Executive Summary

2012 saw the start of a new Country Programme, which was signed in the presence of the Regional Director and the Prime Minister at the beginning of the year. In recognition of the malnutrition crisis affecting Yemen’s children, UNICEF has begun a dramatic scale-up of its response. In 2011 UNICEF, in collaboration with the ministry of health (MoH), had treated 58,338 children through 460 Outpatient Therapeutic Programmes (OTPs) in 17 governorates. By December this number stands at over 100,000 children in 562 OTPs in 17 governorates. The approach has centred around the roll-out of SMART surveys, which provide an accurate picture of malnutrition at any given moment in a given ecological zone. The SMART surveys (seven to date) have confirmed alarming levels of Severe Acute Malnutrition (SAM) ranging between 3 and 11%, with high variations within governorates and ecological zones. Recognizing the importance of a holistic response that goes well beyond the health sector, the SMART surveys inform governorate level micro-plans (four to date), which detail the precise interventions across the different sectors and the actors involved. Furthermore, at the end of 2012, Yemen became the 31st country to join the Scaling Up Nutrition (SUN) initiative, a great step forward in terms of political support at the highest level.

UNICEF has been closely engaged with the Ministry of Education (MoE) as the Co-ordinating Agency for the Local Education Group. In recognition of UNICEF’s comparative advantage, its presence on the ground, its achievements through the Education Cluster in 2011 and 2012 and its technical capacity in support of primary education, UNICEF has assumed the role of Supervising Entity for the next round of the newly named Global Partnership for Education (GPE). There is an US$82 million envelope tentatively assigned to Yemen and the proposal will be due in the first quarter of 2013. Unfortunately Yemen was unable to present the proposal in 2012, which will result in a funding gap for MoE in what is largely recognized as one of the most important social sectors, on which successful transition and development is contingent.

In response to the listing of parties committing grave child rights violations in the multiple conflicts in Yemen under Security Council Resolution 1612, UNICEF and the Resident Co-ordinator have established a Country Task Force to oversee the monitoring and reporting as well as the development and implementation of Action Plans with the listed parties to end these violations. This effort was recognized by the newly appointed SRSG for CAAC whose first field visit was to Yemen in late 2012.

Building on Yemen’s Social Welfare Fund, which reaches 1.5 million of the poorest Yemenis, UNICEF has invested in a partnership with the International Policy Centre for Poverty Reduction to measure and monitor social protection indicators in a multi-dimensional longitudinal study of recipient and non-recipient families, which will form the basis of important advocacy to increase the reach and improve the targeting of the programme over time.

Country Situation as Affecting Children & Women

2012 has been a year of political stabilization, coming in the wake of a year of protests that saw the president of 33 years step down. At the beginning of the year, single candidate presidential elections were held and the establishment of an interim government followed. However, large parts of the country remain extremely unstable and have been characterized by small episodes of continued violence. This has been most notably in the north with the Al-Houthi movement and in the south, with militant groups affiliated to Al-Qa’ida on the one hand, and the Al-Hiraak separatist movement on the other. Against this backdrop, the original protagonists of the ‘revolution’ continue to face each other off under the very precarious ‘National Dialogue,’ which seeks sustainable peace between all parties and which will be concluded by 2014.

Yemen has the highest poverty rates in the Middle East, with 54% of Yemenis living on less than $2 a day and half the population food-insecure. Yemen consistently ranks last in the Global Gender Gap Index: Gender disparities are deeply rooted in cultural traditions, inhibiting women from equal access to basic services, job opportunities and civic participation. Yemen also ranks low on the human development index at 154 out of 187 and is unlikely to meet any of the Millennium Development Goals (MDGs) or to achieve the targets of A World Fit for Children.
Despite a declining trend since 1990, rates of maternal, child and under-five mortality (U5MR) remain high, with neonatal mortality contributing to 80% of infant mortality. National-level statistics often mask even greater inequities at the subnational level: While the U5MR is 77 deaths per 1,000 live births, it is 68% lower among the richest one-fifth of the population than among the poorest; Delivery by a skilled birth attendant is 33% lower among the poorest one-fifth; 93% of urban residents (source: JMP 2012) have improved sanitation, compared to just 26.7% in rural areas (source: Rural water sector inventory survey report 2012). Childhood killer diseases like pneumonia and diarrhoea add to the mortality and morbidity, while a key underlying cause of child mortality arises from widespread and worsening malnutrition. Yemen has one of the highest rates of chronic malnutrition in the world: Around 58% of under-five children are stunted, and 15% suffer moderate or severe wasting. Further contributing to this, just 45% of the population are using improved drinking water sources and 34% of those living in rural areas are using improved drinking water sources (source YHRP 2013).

While Yemen has made progress in primary school net enrolment, at 73% (80% male, 66% female), it remains insufficient to realize either the MDG or ‘Education for All’ targets. Rural girls lag behind due to traditional attitudes toward girls’ education and a severe lack of quality schooling, in addition to poverty, insecurity, deteriorated school infrastructure and overcrowding. Women represent only 25% of teachers and only 9% in rural areas, which further influences this imbalance.

Many of the development and humanitarian challenges in Yemen can be linked to its deep child protection crisis. The justice and social welfare systems do not conform to international norms: Yemen is one of the few countries in the world that carries out the death penalty against minors; and there is no legal minimum age for marriage in Yemen. Of all women aged 15-49 years, 14% were married before 15, and 32% of women aged 20-24 were married before age 18. Female genital cutting affects 23% of women and girls nationally, rising to 90% in three coastal governorates. Low birth registration (22.3% of children under 5 have their births registered) limits access of children and families to social services and further affects the protection of children.

There are widespread violations of the country’s commitments under the MDGs, Convention on the Rights of the Child (CRC) and International Labour Organization Conventions 138 and 182, as well as A World Fit for Children. Major gaps exist in child- and gender-relevant protection laws, policies, regulations and recourse mechanisms. Although Yemen has a satisfactory record of ratifying international human rights conventions, this is not reflected in national legislation, which remains in violation of the CRC in three areas; the definition of a child; family law; and administration of justice for children.

Achievement of basic rights for children is further challenged amid interlinked chronic and acute needs and emergencies. The protracted conflicts in the north and the more recent conflicts in the south have resulted in the displacement of more than 340,000 people, at least half of whom are children. While humanitarian space has begun to open up in the north, only an estimated 15% of internally displaced people (IDPs) have returned home because of a lack of security and basic services.

To achieve a sustainable realization of rights for girls and boys, rights holders and duty bearers must have the necessary institutional and skills capacity, which UNICEF Yemen considers a cornerstone of good development practice. Accordingly, building capacity at the local district and national level is an integrated activity among all sections.

UNICEF Yemen is cautiously optimistic that during 2013, significant scale-up and acceleration in response to the needs of vulnerable children can be achieved in an improving implementation environment.

**Country Programme Analytical Overview**

2012 saw the consolidation of programming gains made during 2011, characterized by the emergency response. Whilst this was timely and pertinent, a barrier to an even more effective response was capacity of the existing field offices. 2012 has therefore seen the recruitment and full staffing of these offices to ensure
that UNICEF is positioned to provide support to programme implementation, for both the emergency response and development programme. UNICEF has undertaken some preliminary analysis of barriers and bottlenecks, specifically in the design, implementation and scale-up of the integrated response to the nutrition crisis. The analysis looked at six areas, identifying bottlenecks and barriers in all: 2012 programming addressed them with some degree of success:

**Management & Co-ordination**: the nutrition cluster continues to be a flagship cluster for UNICEF Yemen and has co-ordinated the development of micro-plans in several parts of the country. These address malnutrition from a holistic perspective and incorporate inputs from many different partners, in recognition of the fact that nutrition cannot be addressed through health interventions alone.

**Legislation & Policy**: after concerted and consistent advocacy, the Mutual Accountability Framework, which lays out the government priorities during the transition period, has included nutrition as a stand-alone priority. In addition the Government of Yemen has been accepted as a member of the SUN movement based on a request from the Prime Minister who designated the Ministry of Planning to play the technical lead role – again a recognition that a holistic multi-ministerial response is required to make real gains against malnutrition.

**Access to adequately staffed services**: UNICEF has shifted its focus in terms of capacity, to the governorate and district level facilities, which has resulted in a significant increase in the number of children reached through the nutrition response. In order to sustain the scale up, UNICEF has also increased its partnerships with NGOs in pursuit of the same goals.

**Information**: whilst the government data management system for nutrition is slow, UNICEF has invested in a temporary arrangement to gather routine information from health facilities on a more regular basis. In addition UNICEF has also supported and rolled out seven SMART surveys which have provided much needed data on SAM at the governorate level.

**Financial Access**: advocacy at the community level, whilst in its early stages, has encouraged families to attend free nutrition screening and treatment.

**Quality**: UNICEF has invested in technical training as part of the micro-planning process and has also introduced capacity within the Ministry to conduct SMART surveys on an ongoing basis. It is also worth noting that UNICEF undertook an analysis exercise early in the year to identify the most vulnerable districts in Yemen based on a composite indicator that was also somewhat weighted for population. This resulted in 106 districts in which UNICEF will ‘directly’ implement during the current Country Programme. This is in addition to emergency districts as defined through cluster processes. This approach results in a focus of programming around service delivery for the most vulnerable populations.

**Humanitarian Assistance**
UNICEF’s original humanitarian appeal was US$ 49,807,000, revised to US$ 80,764,847 at mid-year and stood at 57% funded. UNICEF sustained its cluster coordination lead in Nutrition, WASH, Child Protection and Education. The regional cluster mechanisms played a key role in ensuring a better coordinated response: In 2013 greater emphasis will be placed on reinforcing these mechanisms particularly in monitoring and leading the planning process.

Overall the emergency response was well coordinated and the delivery of humanitarian assistance did not face major problems with the exception of Abyan where access was not possible due to ongoing conflict and insecurity.

In the North, in Sa’ada UNICEF’s engagement strategy with the Non-State Actor continues to pay off resulting in better access and programme expansion. However, lengthy negotiations with the de-facto authority has caused implementation delays.

UNICEF promoted an integrated and comprehensive approach to address malnutrition, with a strong community component. Mobilization of resources was also effective to ensure that the measles vaccination was implemented in response to a nationwide outbreak. Child protection mechanisms were strengthened in emergency-affected areas, and mine risk awareness activities were expanded. Alternative learning spaces, and teaching and learning materials were provided to ensure conflict-affected children including IDPs received education.
Effective Advocacy

Initiating action to meet benchmarks

The new country programme provided a great opportunity to strategically position advocacy within the country programme agenda. Three key sectors; malnutrition; child protection (with emphasis on child recruitment, child marriage and juvenile justice); and education were identified as priorities for this year. This was based on the fact that Yemen has one of the highest malnutrition rates in the world next to Afghanistan. Half a million children under 5 are likely to suffer lifelong developmental challenges due to malnutrition: Half of those are at risk of aggravated health problems, including premature death.

Despite ratified global instruments and national legal frameworks, the situation of children in conflict with the law in Yemen remains complicated mainly due to the definition of the juvenile’s legal age limit. Most children in conflict with the law lack birth certificates, which makes determining the actual age of the juvenile difficult and requires specialists in this field. In addition, child marriage, with girls as young as eight, is widely practiced and 30% of children of school-going age are out of school, most of whom are orphans, minorities or IDPs.

Against this backdrop and within the context of the Yemen National Transition Plan, advocacy efforts were anchored in the following approaches; production of position papers specifically around the non-recruitment of children (submitted to the Human Rights Council and the office of the SRSG-); a demarche calling for an end to the juvenile justice penalty (jointly presented to the Ministry of Human Rights by UNICEF and the EU); and a legislative review report calling for an end to child marriage amongst others. Bilateral meetings and consultations were also facilitated with key policy makers at the highest level, including the President and Prime Minister to ensure that issues affecting the well-being, survival and protection of children are central to the national development agenda. These efforts were complemented with high profile visits from the Executive Director, Mr. Anthony Lake, the Regional Director Ms. Maria Calivis, the UK Minister for Development Assistance, Mr. Alan Duncan and the SRSC-CAAC, Ms. Leila Zerrougui.

Direct consultations were held with key line ministries on; social protection monitoring to ensure that cash transfers reach the most vulnerable; ensuring that addressing malnutrition is anchored within a multi-sectoral approach; ensuring inclusion of children and adolescents (constituting 50% of Yemen’s population) in the National Dialogue and Constitution Reform Process. As an immediate consequence, a social protection framework is already being rolled out and Yemen has officially been accepted to the SUN initiative.

Bilateral meetings were also held with the Minister of Education around mainstreaming the child friendly school model. This has been operationalized and serves as a guiding principle to all development partners.

Advocacy efforts were also scaled up through massive media engagement both nationally and internationally and on social media, in collaboration with MENARO, Geneva Regional Office and New York. An effective media monitoring system is also in place that informs messaging and to some extent programme response.

Capacity Development

Mostly met benchmarks

Strengthening the capacity of duty-bearers at all levels is an important thrust of the country programme and features in all aspects of sectoral and cross-sectoral programming. Every workplan has a specific component of capacity building. Below are some of the highlights.

Institutional capacity building on communication for development is one of the major focus areas of the C4D programme in Yemen. Interventions in 2012 have focused on improving the capacity of partners (both government and NGOs) on effective planning, implementation and monitoring of C4D activities. In this regard a three day workshop was organized in August for the Health Education Department, the Ministry of Health and Population, NGOs and other partners to develop a National Communication plan for Immunization. The
focus of the workshop was to train participants in effective communication planning; situation assessment; to develop realistic implementation plans; as well as to formalize monitoring indicators, timelines and budgets. As an outcome of the workshop, a draft National Communication Plan for Immunization was developed and submitted to the Ministry of Health for endorsement.

Capacity development has also been a focus of the YCSD programme: To address the need for human resource development for effective nutrition programming and given the knowledge gap amongst the health and nutrition workers, UNICEF partnered with the Universities of Sana’a and Aden and the Higher Institutes of Health Sciences on mainstreaming nutrition education.

UNICEF also trained a group of 23 Yemeni journalists on Ethical Reporting of Child Issues and also advanced writing skills for human interest stories. The group, who came from different parts of the country, has produced five interesting and relevant human interest stories as an output of the training. These journalists, 50 per cent of whom are female reporters, will be further applying the acquired knowledge and skills by filing dozens of stories from the field in collaboration with UNICEF.

**Communication for Development**

**Fully met benchmarks**

With the start of the new country programme, UNICEF Yemen decided to focus on communication for development (C4D) as a core programme strategy, without which progress towards achievement of the MDGs would be severely limited: Yemen is the poorest country of Arab world with an under 5 mortality rate of 77/100, an infant mortality rate (IMR) of 57/1000, neonatal mortality 32/1000 and stunting among children under 5 at 58%. With such poor indicators, Yemen is unlikely to meet the MDG targets (source UNICEF, MICS, Yemen Country Profile).

However, various research studies show that many household level practices can reduce under-nutrition and child mortality to a great extent if implemented at scale. Exclusive and continued breastfeeding for example can reduce child mortality by 13%, appropriate complementary feeding by 6%, clean delivery by 4% and water, sanitation and hygiene by 3%. (Source: Jones et al, Lancet 2003: 362; 66-71. Child Survival Series). But despite their proven usefulness, the prevalence of these household level practices in Yemen is alarmingly low: Exclusive breastfeeding among children under 6 months is only 12%, while early initiation of breastfeeding is just 30%, etc. (source UNICEF, MICS, Yemen Country Profile).

In May, the country office recruited a dedicated C4D Specialist to focus on this situation and to look at how C4D could be more integrated in the country programme. The office has since finalized a comprehensive C4D strategy to promote key maternal, childcare and WASH practices in 106 of the most marginalized districts. The focus of the C4D strategy is to integrate C4D interventions into government and UNICEF programmes to empower parents and caregivers to adopt improved maternal and child health (MCH), and WASH practices.

In this regard, UNICEF has also finalized a communications package of key MCH and WASH practices that are vital for reducing child mortality and undernutrition. Implementation of the package, which includes comprehensive communication interventions to reach targeted households, began in September with the training of stakeholders, interpersonal communication activities at family level and orientation for community leaders. This will continue to be implemented in 2013, targeting 30% of families in all 106 target districts.

Aside from the integrated package, UNICEF Yemen’s PCR 3, Empowerment, has also provided the opportunity to integrate C4D throughout all programmes. The focus here is mainly on empowering rights holders and duty bearers through providing appropriate information; and mobilizing various population groups in favour of children’s rights. Additionally, specific IRs have been allocated to C4D interventions in each of the sections’ workplans, with overall guidance from the C4D section. Furthermore, C4D interventions are integrated in all contracts with NGOs and other community-based interventions supported by UNICEF.
Service Delivery

Mostly met benchmarks

From the onset of the new country programme, UNICEF developed an equity-focused service delivery. This was designed to promote equitable access to high-quality basic social and protection services, with the main aim of reaching the poor and vulnerable. Service delivery data showing wide variations in coverage between rural and urban (26% versus 62% for skilled attendance at birth); between different parts of the country (total school enrolment rate is 95% in Taiz but 52% in Hajjah, which are both fairly stable); and across the wealth quintiles (immunization coverage with 3rd dose DPT is 40% for the poorest versus 95% for the richest quintile) was used to rally government and partners to action. Removing barriers to the use of services was a key priority in 2012: Health and nutrition outreach services were implemented to enable the 30% of children not routinely reached through the health infrastructure to be vaccinated, receive vitamin A, to be screened for undernutrition and referred for specialized care. Female teachers were provided with incentives to work in remote areas, thus improving girls’ enrolment, and 500,000 kits were provided to children in conflict affected areas for the back to school campaign.

Before the 2011 crisis, the public sector was the principal channel for service delivery and UNICEF has supported efforts to strengthen capacity of this sector to deliver services at scale. The collapse of the public sector, precipitated by the crisis, obligated UNICEF to seek alternative means of service delivery. For example in logistics, in an unusual bid, UNICEF facilitated clearance of nutrition supplies and medicines from the ports to the main warehouses and secondary distribution to the governorates and health facilities, especially in the conflict areas of Sa’ada and Abyan – an activity usually undertaken by the government. UNICEF has helped mobilize an additional 15 INGOs to establish bases in Yemen: Those working to address the undernutrition crisis and partnering with UNICEF through programme cooperation agreements have increased seven-fold since November 2011. Many still face challenges in attracting qualified personnel to Yemen because of the constant security threats however. Localized conflict and insecurity continues to be a major constraint to delivering services in the north and south of the country. The ability of INGOs and UNICEF to absorb and utilize funds has increased, although there are still concerns that some INGOs rely on the limited number of local NGOs to deliver services.

Mid and annual reviews were held with partners, during which, progress on key service delivery targets was reviewed, bottlenecks analyzed and corrective strategies outlined. The overall performance of service delivery in 2012 has been ranked as satisfactory: with the following key achievements: Measles vaccination coverage is at 62% in the under 1 year olds as of October 2012; 93% of under 10 year olds were vaccinated against measles during a national campaign; over 100,000 children out of the targeted 160,000 with SAM were enrolled into treatment; Child-friendly spaces were created at police stations and courtrooms; Over 500,000 children were facilitated to go back to school.

Strategic Partnerships

Mostly met benchmarks

UNICEF continues to value partnerships with all development partners, the UN, government and non-governmental entities. In the UN Country Team (UNCT), UNICEF is an active participant and has played a leading role on a number of issues such as support to the Government’s Transition Plan, the Programme Criticality exercise and the preparations for preparing a proposal to the Peace-building Fund. At the global level UNICEF engages with GAVI and is the selected Supervising Entity for the Global Partnership for Education. This latter role requires UNICEF to work closely with the Co-ordinating Agency (GIZ) and with the World Bank on the fiduciary risks and controls in which the World Bank has a comparative advantage. In addition UNICEF provides the technical leadership for the Country Task Force for Monitoring and Reporting on Grave Child Rights Violations by listed parties as per Security Council Resolution 1612.

Within the context of the ongoing emergency situation, UNICEF is the designated lead in the WASH Cluster, the Education Cluster and the Nutrition Cluster as well as the Child Protection Sub-cluster. In all clusters, UNICEF has invested in staff to provide the required leadership and co-ordination, which has on the whole
been successful.

In order to implement what has become a significantly larger programme as a response to the ongoing emergency but also in light of the consensus achieved on an integrated response to the nutrition crisis, UNICEF has recognized that the required scale-up can only be achieved in partnership with the significant non-governmental capacity that is now in-country. Accordingly, UNICEF has revised its internal procedures to review and implement partnerships with NGOs based on the 2009 guidelines. The process emphasizes accountability with the technical staff managing the partnerships while ensuring quality control. This is done through a rigorous review process that involves both operations and programme and ensures that the field offices are involved in the development and implementation.

Yemen has not yet implemented the Harmonized Approach to Cash Transfers but the commitment has been made and a basic workplan has been established to do so. This will also promote a more enabling environment for governmental and non-governmental partners to work with UNICEF with an emphasis on results for children rather than process.

In view of the nutrition crisis facing Yemen’s children, partnership with WFP to simultaneously intervene in moderate acute malnutrition alongside UNICEF’s support to severe acute malnutrition was key. WFP and UNICEF signed a MoU in 2012 outlining the nature of the partnership between the two organizations. The MoU is accompanied by a number of annexes with detailed arrangements for continued collaboration.

Knowledge Management

*Partially met benchmarks*

During 2011 and 2012, activities involving gathering, analysis and dissemination of data and information were severely curtailed. The instability and security not only had an effect on the availability of data and evidence, but also had a knock-on effect along the knowledge management (KM) continuum from data to information and learning. Knowledge and data are generated through planned studies, surveys, and evaluations, which are monitored closely via IMEP status implementation reports.

After 2011 the security situation improved somewhat, resulting in an acceleration of KM activity: Firstly, equity-focused district selection with phasing was completed. This stage in the process identified the most vulnerable 106 districts (out of total 333) for our development programme interventions. Secondly, the baseline survey, which is now under implementation, utilized a sample from these 106 districts and data from the household survey will be available in April 2013. National Social Protection Monitoring has also begun and is expected to generate very useful and critical information about the situation of children and their coping mechanisms. UNICEF has also been supporting the Government with implementation of major data collection exercises for 2012/2013 namely the NDHS, which is now underway (data availability late 2013) and planning for the 2014 Census.

Despite the fact that there are delays with the implementation of some studies and surveys, overall the progress is satisfactory and periodic data is generated from surveys such as the nutrition SMART surveys, which have enabled timely intervention by the nutrition section.

During 2012, UNICEF participated in 20 Emergency Assessments focusing on IDPs, Child Protection, Nutrition and WASH sectors. A similar eight exercises are already planned for 2013. The completed exercises are shared on OCHA’s assessment registry. UNICEF is an active participant promoting KM as a member of the assessment technical group. In addition to our current survey commitments for 2013, UNICEF is also working on the design of a coordinated assessment approach.

Occasional, more formal learning activities also took place in 2012. Apart from mid-year and end-year reviews with partners, regular internal Programme Coordinating groups were convened and in addition, an external meeting with Save the Children (SCI) was convened to share information and knowledge as well as to explore strategic alliances. This resulted in an agreed action plan, which is currently being implemented.
As data from Baseline Studies, SPM, DHS and SitAn becomes available throughout 2013 a significant increase in activity led by UNICEF, along the entire knowledge management continuum, is anticipated in 2013.

**Human Rights Based Approach to Cooperation**

*Fully met benchmarks*

Although Yemen has a satisfactory record of ratifying international human rights conventions, this is not reflected in national legislation, which remains in violation of the CRC in three areas – the definition of a child, family law, and administration of juvenile justice. With urgent calls to improve the protective environment for children and address child rights violations in emergencies, during this first year of implementation of the new country programme (2012-2015), priority is given to improving monitoring and reporting, delivery of appropriate services and bolstering of capacities among implementing partners: This includes non-governmental organizations (NGOs) and community-based organizations (CBOs) at district and community levels.

The overall goal of the 2012-2015 programme of cooperation is to achieve more equitable development for children in Yemen and greater fulfillment of their rights to protection, participation and development, particularly for the poorest and most vulnerable. This is to take place in line with the country’s commitments to the Convention on the Rights of the Child and its protocols, the Millennium Development Goals and the Millennium Declaration.

Children should have access to services when they need protection and duty-bearers need to be more aware of children’s rights before protection needs arise. To address this, priority has been given to structured, targeted advocacy, lobbying and community mobilization to ensure the endorsement of key national legislation (child rights law, penal code, juvenile justice and personal status laws) that is in line with international standards.

The child rights reporting focus in 2012 has helped support government and other stakeholders to provide timely, quality reports on children’s rights, based on international instruments to which Yemen is a State Party, as well as other international obligations. During this year, two Management Information Systems were developed; the Juvenile Justice (JJ); and the Monitoring and Reporting Mechanism (MRM) on grave violations of children’s rights in situations of armed conflict, both - are currently being piloted.

Finally, in late November 2012, The Special Representative for the Secretary General on Children and Armed Conflict (SRSG-CAAC), Ms. Leila Zerrougui, recently visited Yemen and met all four listed parties in Yemen (Al Houthis armed groups, pro-Government tribal militias, Yemeni Armed Forces and First Armoured Division) resulting in commitments made in line with SCR1612: The President issued a decree banning all children from Yemeni Armed Forces; the Prime Minister and Cabinet signed the Paris Principles and Commitments; The Government will establish a National Committee responsible for drafting, implementing and monitoring an action plan to address the use, recruitment and other grave violations against children; and the Al-Houthis committed to address the issue of use and recruitment of children in their controlled area.

**Gender Equality**

*Partially met benchmarks*

Yemen continues to occupy the last place in the world’s Gender Gap index, ranking 135th out of 135 countries, scoring 0.5054 in 2012 (the Global Gender Gap index).

Throughout 2012, the Yemen Country Office continued its efforts towards mainstreaming gender across UNICEF’s programme strategies and plans, utilizing a human-rights based approach to programming, guided
by UNICEF’s commitments to the CRC and CEDAW. Consequently, Yemen Country Office has adopted a three-pronged approach to mainstreaming gender equality into UNICEF’s programmes:

i. **Programme preparation** ensures that results are designed explicitly on the basis of prior research and analysis of gaps in the realization of women’s and girls’ rights, and the differential power relations and dynamics between women and men, boys and girls that drive these;

ii. **Programme implementation** is carried out in such a manner as to ensure that human rights principles and standards are applied in all phases of the programme cycle; and

iii. **Situation analysis, performance monitoring and reporting** explicitly document progress in achieving gender equality, in line with the principle standards of the CRC and CEDAW.

At the inter-agency level and contributing to appropriate *programme preparation*, UNICEF has actively participated in the UNCT Gender Working Group, formed in early 2012 to ensure that gender issues are mainstreamed across all jointly coordinated initiatives. As an example of this, the Gender Working Group has worked closely within the frame of Yemen’s potential Peace Building Fund resources to identify priority peace-building areas and conflict-sensitive programming, related to key aspects of gender issues in Yemen, in line with the UN’s comparative advantages.

UNICEF actively participated through the Gender WG in identifying the critical dimensions of gender issues in Yemen to be effectively mainstreamed in the *programme implementation* of joint Government-UN efforts during this transition period. As an example of our work within this framework and specifically within the national displacement policy for durable solutions, UNICEF has provided 42,394 pregnant and lactating women (PLWs) with supplementary feeding; and approximately 7,000 households with dignity kits (basic necessities for displaced women and girls to maintain feminine hygiene).

In terms of *situation analysis, monitoring and reporting*, in 2012 YCO –with technical support from MENARO-developed TORs for coordination of the Programme’s three programme component results (PCRs) with fully integrated gender component. This year, YCO developed the TOR for a Situation Analysis of Children and Women in Yemen, which incorporates a strong gender analysis module. YCO has also integrated a ‘gender review’ into plans for the Mid-Term Review (MTR) to measure and inform gender mainstreaming across our programmes. Finally, during the End-Year Review, a number of key actions were agreed upon, including gender focal points in each programme, a capacity building process for those focal points, and most critically, a gender RWP for 2013-2014, which will consolidate and outline the details of all YCO’s efforts to mainstream gender effectively and achieve substantive results for gender equality.

### Environmental Sustainability

**Mostly met benchmarks**

Water scarcity remains the most critical environmental concern in Yemen, compounded by agricultural practices concentrated in cultivating the water-intensive, narcotic qat plant which does not contribute to nutrition, itself a priority concern for children across the country. 2012 has been the first year of implementation of UNICEF's new country programme (2012-2015) which integrates WASH as a key component of UNICEF's broader nutrition response.

Overall, the new country programme is making every effort to minimize negative impact on the environment that arises from programme activities: Specific impact assessments are being carried out at the output level where relevant in addition to continued advocacy with all concerned partners to institutionalize adequate practices. Adequate measures are also taken to minimize temporary disturbance to the environment, especially during rehabilitation and construction activities. For example all wells are managed to avoid the depletion of resources: The ‘safe yield’ of each well is calculated based on evidence, which then becomes the maximum amount of water available for extraction each day. UNICEF also ensures that solid waste management includes positioning away from water sources.
During 2012, WASH district profiles were finalized, gaps in data were identified and are expected to be filled by the end of the first quarter in 2013, to guide the 2013 WASH response and related programme interventions. Given the ongoing humanitarian needs, the main focus of the WASH programme in 2012 has been on emergency affected districts, reaching over half a million people.

**South-South and Triangular Cooperation**

In the context of the launch of the current country programme, UNICEF has focused on establishing or strengthening our partnerships in Yemen with the return of the donor community after a series of temporary evacuations in 2011.

The one South-South collaboration that bears mentioning relates to UNICEF’s Social protection Monitoring and Impact survey. This has been established in partnership with the International Policy Centre for Poverty Reduction in Brazil (IPC) which is affiliated with UNDP but is led by staff seconded by the Brazilian Government. The experience of Brazil, a Middle Income Country, is of great interest in the context of Yemen where the country supports 1.5 million of the most vulnerable through a modest cash transfer programme. By dint of coming from a non-traditional development partner the experiences shared by IPC with the Yemeni Government and the lessons learned take on a different perspective, which is based on a relationship of equals – common to many South-South initiatives. The preliminary results of this survey will be shared in 2013 and are expected to inform a qualitative review of the reach, depth and substance of Yemen’s Social Welfare Fund.
Narrative Analysis by Programme Component Results and Intermediate Results

Yemen – 4920

PC 1 - Equitable access to basic social services

On-track

PCR 4920/A0/05/001 By 2015, the most vulnerable girls and boys have sustainable and equitable access to and use quality, targeted basic social services, particularly to accelerate progress toward MDGs 1, 2, 3, 4

Progress:

The year 2012 was a challenging one as the country emerged from a recession precipitated by the troubles of 2011. Government was unable to meet its obligations in delivery of basic social services with the poor and vulnerable bearing the brunt. With an already high out of pocket expenditure on health (60%) and education before the crisis, a food inflation rate of 8.13% in July 2012, affordability of essential services remained a major constraint to populations especially the vulnerable in accessing basic social services. The quality of the services was also in doubt with a depleted workforce (many of the foreign nurses and teachers who fled the crisis have not returned) and stock-outs of essential supplies. UNICEF through its equity approach helped to ensure continued provision of essential supplies and services to populations affected by the crisis. In the area of social protection, emergency legal aid, mine risk education and psychosocial support was provided to IDPs and unaccompanied minors. Child-friendly services were set up at police stations while an essential justice service package was developed. In the area of health and nutrition 62% of the targeted children with Severe Acute Malnutrition were enrolled in the CMAM programme against 2012 target and 70% of the children under one year received a third dose of pentavalent vaccine against a target of 80%. A national measles catch up and outbreak response campaign reached 7.98 million children aged under five (93% of target). Two integrated outreach campaigns were conducted as a means of reaching the most hard-to-reach 30% of the population. In education, an estimated 500,000 learners were provided with supplies as part of the back to school campaign and over 839,000 children participated in the hand washing with soap campaign. Purposeful programming with an equity lens was institutionalized with the formation of an equity working group, approved TORS and workplan. With support of the regional office, an equity analysis of maternal and child health was undertaken and has informed priorities for the 2013-2014 workplan.

On-track

IR 4920/A0/05/001/001 By 2015, 40% of fixed health facilities and outreach services in targeted districts deliver an integrated package of health, nutrition and WASH awareness raising services.

Progress:

Discussions on Essential Service Package (EHP) and integration of services at facility level concluded. Modalities of implementing package roll out within MOPHP and partners was discussed with Director General of Primary Health Care. The need for a senior consultant was discussed with development partners for their buy-in and approved by government. TORS developed jointly with partners on the Essential Health Package which is also a priority of the Government’s two year 2013-2014 Transitional Plan. Consultant recruited to commence work on EHP from mid-December 2012. In the meantime, Ministry of Health sent out a memorandum to all governorates urging them to ensure immunization and nutrition screening is integrated. Hodeida Governorate is currently utilizing existing training materials to train health workers and community volunteers on integrated services and has developed tools for profiling health facilities on their capacity gaps for integrated services. As of October 2012, an estimated 46% of health facilities and the outreaches were delivering an integrated package of services. However this was incomplete (less water and sanitation & hygiene) and the criteria for determining ‘delivery’ needs to be determined in terms of minimum services provided, availability of essential supplies, stock-outs of supplies and trained health personnel. Three rounds of integrated outreach services were conducted targeting 1.6 million children aged under 2 years during the outreaches vaccination against polio, measles, rotavirus diarrhoea, pneumonia and other vaccine-preventable diseases were provided, in addition to Vitamin A, screening for malnutrition and treatment of childhood illnesses. The outreach services boosted coverage by 18% although
coverage with measles vaccine, a benchmark for essential services is 61%, (data up to September 2012).

**Progress:**

Community IMCI continues to lag behind the health facility component. The Government is currently updating the entire training manuals for Community Health Volunteers (CHV) which includes gender sensitive counseling with support by UNICEF. A consultant for the Essential Health Package under IR 1.1 will also be focusing on the community component. In some targeted UNICEF-supported districts, the CHVs are applying 2009 procedures adding WASH, nutrition, IMCI, RH and other PHC components until the manual is finalized.

Underreporting due to lack of supervision and monitoring. A one day meeting led by government with participation of all partners who use volunteers deliberated on modalities of and package of remuneration for volunteers. Currently only 5% of CHV have the full range of knowledge, skills and equipment and supplies to deliver an integrated package of services and almost none are submitting the complete reports.

**Progress:**

Yemen remains one of the most water scarce countries and with destruction and/or disrepair of 30% of the water supply facilities. Throughout 2011, this water access situation has worsened with an estimated 50% of the population without access to potable water. In 2012 the district profile including WASH was developed to identify the targeted households and water quality. Data collection will be finalized to guide the WASH response and related programme interventions. The main focus in 2012 was on the emergency affected districts through provision of treated water to about 750,000 people in Haradh, Aden and Abyan.

**Progress:**

The decline in vaccination coverage due to the 2011 crisis and the accumulated susceptibles due to uneven and persistent sub-optimal measles coverage and the suspension of the planned measles catch-up campaign all resulted in Yemen suffering one of the largest measles outbreaks in memory with more than 4,000 measles cases and over 130 deaths reported. UNICEF mobilized resources to support a national Measles /polio campaign targeting over 8 million children under 10 years, reporting 93% coverage. Thus containing the outbreak in less than a month. In addition, support was provided for 2 polio NIDs in Jan, March/April and one sub NIDs in Hajja and Hodeddia in November. A third round of polio NID is planned for December 2012. During 2012, support was provided to government to increase routine coverage through 3 outreach rounds out of a planned 4 that has historically contributed to 30% of the routine vaccination coverage. Despite the challenges in 2012, MOH managed to introduce Rotavirus vaccination which is expected to contribute to reduction of 50% of diarrheal disease morbidity and mortality. The current measles coverage in under-ones is 61% as of September 2012, slightly less than for the same month in 2010.

Other areas supported included the qualitative analysis of the polio eradication efforts, an in-depth analysis of the quality of the campaigns. The review found that 21% of unvaccinated children were due to refusals and the inability of the health workers to reach the households. A communication for development strategic
plan was developed to address this together with gaps in routine immunization. UNICEF maintained its role in ensuring availability of high quality vaccines through support to forecasting, procurement services worth over US$ 50 million and technical support to ensure adherence to the GAVI protocols.

Constrained

IR 4920/A0/05/001/005 By 2015, an additional 25% of expectant mothers and their newborn babies in targeted districts receive follow-up care and are linked to comprehensive primary health care services.

Progress:

With over 70% of home-based deliveries and only 37% skilled attendance at birth, the majority of maternal and newborn deaths are taking place during the delivery and within the first one week, community-based maternal and newborn care is an essential component of the health systems in Yemen. The National Strategy on Home-Based Maternal and Newborn care was adopted. UNICEF supported the training of 80 community midwives, review of the home-based maternal and newborn trainer and trainee manual and is in the process of printing 3,500 manuals. Policy dialogue is in process with the Deputy Minister of Health and the Social Fund for Development to upscale nationwide, the home-based maternal and newborn care. As of Mid-2012 only 20% of deliveries were attended by skilled health workers and 23% of pregnant women received antenatal care.

On-track

IR 4920/A0/05/001/006 By 2014, the most deprived schools in targeted districts meet minimum standards for Child-Friendly schools.

Progress:

WASH activities are pending until the completion of studies/surveys of the Child Friendly Schools and targeted schools in districts. Tasks and coordination with Education Section should be strengthened for progressing in this IR.

However, in 2012 we initiated preparatory interventions: establishing the WASH in Schools working groups in coordination with SFD, MoE, MoP&H and consultative workshops. The bottleneck analysis was conducted. The GHWD was implemented in coordination with WASH cluster partners, MoE, MoPh&P, and MoI, targeting 354 schools at capital of governorates and districts level. 839,990 school children (target 990,000) reached and IEC materials for distribution to 15,450 schools targeting 4,295,263 (target 1,620,000) school children.

International consultant recruited focusing on integrating protection and violence prevention in the child-friendly schools, Working Group established within MoE and with participation of partners, such as Social Fund for Development (SFD), Save the Children, SOUL for Development and Child Protection Initiative (CPI); baseline survey in 35 schools in 5 governorates conducted including training of data collectors; mapping of existing resources of MoE on violence prevention; child protection framework, policy and other tools drafted in collaboration with the Working Group.

Despite over 50% of schools having water and sanitation facilities only 8% and 9% have adequate sanitation and water facilities respectively. (MOE Comprehensive Survey 2010-2011)

Constrained

IR 4920/A0/05/001/007 By 2015 increased primary completion rate by 20% and transition rate from primary to secondary education by 20% for boys and in target CFS schools.

Progress:

In 2010-11, completion rate in grade 9, 42.2% (46.6 for male and 37.3 for females)
In primary education, completion rate in grade 6, 63.3 (69.3 for males and 56.3 for female). Retention rate in grade 6, 75.7% (82.4 % for males and 68.0 % for females). Retention rate in grade 9, 58.7% (67.2 for males and 48.9 % for females). Source of data: JAR 2012.
Poverty, insecurity and increasing drop-out due to economic and social factors is a big challenge in improving
completion rates. Unless these root problems are addressed, it is very difficult to improve completion rates. The figure in the Target (completion rate) is from 2012-2015.

On-track

IR 4920/A0/05/001/008 By 2015 net enrolment in primary education in targeted districts is increased by 20% for boys and girls.

**Progress:** Guiding principles on education for out-of-school children developed and endorsed; Education officials in Hodeidah, Raymah, Mahweet and Hajjah training on the new guidelines on OOSC initiative; Two governorate level workshops have been planned in Taiz (November) and Lahj (December) and preliminary selection of pilot locations in Taiz in progress.

On-track

IR 4920/A0/05/001/009 Gender sensitive child social welfare and protection services for affected boys and girls from violence, abuse and exploitation in selected governorates/districts through benefitting from a package of minimum quality child social welfare and protection services.

**Progress:**

An international consultant was hired and undertook initial assessment during his first visit to Yemen, including review of the Ministry of Social Affairs and Labour (MOSAL) existing structures, policies, capacity and services available; and review of Social Work Department within Sana’a and Aden Universities. Work in supporting birth registration (BR) in eight vulnerable districts started. Fundraising efforts resulted in obtaining 2.5 million EURO for three years from EU which will contribute in accelerating BR activities. Consultancy firm for reviewing the system was identified and will start in February 2013.

On-track

IR 4920/A0/05/001/010 Gender sensitive child Justice services for boys and girls who come into contact with the law either as victims, offenders or witnesses in selected governorates/districts through benefitting from a package of minimum child-friendly and gender sensitive justice services and better protection by laws and policies in line with international standards.

**Progress:**

Comprehensive review of child related legislations, including 15 pieces of new legislation (including drafting new child rights law) beside the constitution were finalized. Two guiding procedures and regulations were developed on juvenile death penalty (JDP) & child recruitment. Work in progress towards establishing child-friendly police units, prosecution and courts. A program on social monitoring and non-custodial measures was developed and implementation started in Aden and Ibb. 679 children (604 boys, 75 girls) benefited from legal aid services. Paris commitment and principles was ratified by Yemen and 3rd CRC OP on individual complaints was approved by the government & process of endorsement is underway.

On-track

IR 4920/A0/05/001/011 By 2015, the Social Welfare Fund and Social Fund for Development ensure that social protection mechanisms are child-focused.

**Progress:**

In 2012, UNICEF worked closely with the Social Welfare Fund (SWF) and the Social Fund for Development (SFD), to support child-sensitive social protection targeting. The key area was focusing on capacity building of SWF staff at central and governorate levels to ensure beneficiary targeting explicitly accounts for children’s risks and vulnerabilities. SWF staff in the 21 governorate branches were trained on child-sensitive targeting and case referral. Specific areas of work included the following:

1. **Social Work Network:** The main focus is to build the capacity of the beneficiary development staff at field level on referring poor and vulnerable households not yet enrolled within the SWF, especially HH with vulnerable children. The actual field work was initiated with conducting two main training of training
The office has the proven capacity to mobilize financial resources as well as the UNICEF-led clusters at national and regional level in affected areas to respond in a relatively timely manner to emergencies, including in leading assessments, engaging with donors, leading advocacy efforts (measles, children affected by mines) and ensuring pre-positioning within UNICEF and with its partners, including with government (Ministry of Public Health and Government Water Authorities).

The C4D element of the response has been further strengthened in the course of the year through additional in-house dedicated resources, particularly for the measles campaign that UNICEF led following a nationwide outbreak with a reported 4,282 cases and 177 deaths. Funds were quickly mobilized through UNICEF’s own resource, donors, OCHA (ERF and CERF); vaccines procured rapidly and training provided including community mobilization and awareness. Advocacy efforts with the government and donors have been effective in mobilizing resources and partners to rapidly put in place a Mine Risk Education programme in the South/(Abyan/Aden/Lahj).

The response to the displacement in the North/Al-Khamissein area was characterized by a well sequenced integrated response of WASH/Nutrition/Education and Child Protection.

An overall area requiring further strengthening is a better assessment of the coverage of our response with regards to the affected population particularly in Education and Child Protection.
The target of 80% set for Nutrition is too ambitious given the large scale of undernutrition crisis in the country and the need to set up and implement an integrated Nutrition response through increased partnerships, community volunteers, increase of the number of OTPs and Stabilization Centers and greater supervision and monitoring. These factors, whilst part of the emergency response, do also require structural and developmental changes that will be realized in the longer term. The Nutrition Cluster, in which UNICEF plays the biggest role is reviewing its targets for 2013 drawing on lessons learnt from 2012, opportunities including expanded number of NGOs operating in nutrition.

**PC 2 - Evidence for children’s rights**

**Constrained**

**PCR 4920/A0/05/002** By 2015, evidence based on children in Yemen is complete and updated, and effectively used to identify and implement sustain high-impact interventions and policy development, with specific focus on the most disadvantaged.

**Progress:**

In 2012, UNICEF scaled up its focus on evidence. Among the 333 districts in Yemen, UNICEF identified the most vulnerable 106 for its development programme with a total population of 8,326,209. In 2012, as UNICEF begins work on its new 4-year programme, in partnership with the Central Statistics Office, work commenced on a baseline survey of its targeted districts to determine which interventions are required where, and to enable assessment of progress on programme implementation over 4 years. Throughout 2012-2014, UNICEF is also actively supporting the implementation of a longitudinal Social Protection Monitoring Survey currently underway, the National DHS survey currently underway as well as a National Census planned for 2014. These districts and national initiatives are underpinned by training and database development. In addition to exercises planned under the IMEP, UNICEF implemented 26 Assessments/SMART surveys throughout Yemen and are currently hosted on OCHA’s assessment registry. UNICEF is working with both central and local government institutions to strengthen capacity for data storage and analysis. Within the Ministry of Planning, UNICEF is leading the process to update the DEVINFO website and data warehouse. This process includes support for training, tools, hardware and software. In the Ministry of Social Affairs, UNICEF is supporting the development of a database on Juvenile Justice.

**Constrained**

**IR 4920/A0/05/002/001** By 2015, Nutrition Information System is fully operational and producing timely quarterly reports based on disaggregated data

**Progress:**

Reporting system reviewed, new tools have been developed and in use at all service delivery points. Governorate HIS focal points have been trained on data collection and verification and involved in development of reporting tools. In collaboration with WHO, training of focal persons currently in progress. Focal points will be instrumental in establishing the system. CMAM and IYCF registries and statistical forms updated and in use. Reporting timeliness and completeness however remains challenging as most districts are reporting with a 1-2 months lag-time. However as of end of Oct 2012; only 27% of the districts were timely reporting. As of end of Oct. 2012; the total number of districts reporting were 314 out of 334 districts country-wide (only Al-jawf and Abyan districts are inaccessible because of insecurity) and three quarterly CMAM reports have been submitted as of end of Oct. 2012.

**On-track**

**IR 4920/A0/05/002/002** By 2015, the Ministry of Education compiles and makes public quality routine disaggregated education statistical data and analysis.
**Progress:** An agreement was made with MoE to form a team from the statistics and planning department to work in the area of education data. We are developing a ToR to contract a firm to do capacity building for the MoE in statistics and planning at central, governorate and district levels.

**On-track**
**IR 4920/A0/05/002/003** By 2015, a Child Protection Management Information System is established, and routinely generates disaggregated data on key protection issues to support reporting on international obligations.

**Progress:**

**Two sub-systems Juvenile Justice (JJ) MIS and MRM MIS developed and being piloted.**
The Juvenile Justice (JJ) MIS was developed in line with international justice for children indicators and piloting started in two governorates (Taiz and Sana’a); a final system review workshop was conducted; training on data entry of cases, use and application of the computerized system was conducted for 25 data entry personnel from MoI, MoSAL, prosecution and court staff. UNICEF provided computers and furniture for 23 stations and the private sector contributed to the (installation of telephone lines and running costs of the system)

Monitoring and reporting on grave child rights violations (MRM) MIS was functional during 2012: database and monitoring tool developed and functional with a coverage of some 1.275 million population of conflict affected and vulnerable children in Sana’a, Aden, Abyan, Lahj, Hajjah, Sa’ada, Al-Dhalea, Marib, Taiz, Hadhramout, and Amanat Alasmah, which contributed in submitting the SG-CAAC Annual Report and 5 global horizontal notes (GHN) as well as inputs for Human Rights Council and Security Council reports on Yemen and to many UNICEF press releases/statements at national, regional and global levels in Yemen, Geneva and New York.

**On-track**
**IR 4920/A0/05/002/004** By 2015, Governmental and civil society organizations effectively monitor and evaluate child-focused social protection interventions.

**Progress:**

The Social Protection Monitoring Survey was officially launched on September 29th in the Central Statistical Organization, and the data collection started on October 1st in all the 21 governorates. On October 3rd, a seminar was conducted in CSO on the methodology, sampling, and questionnaire of the SPM. The main presentations were done by the IPC-IG team leader, and have explained the details of the impact evaluation of the SWF transfers at national level.

The survey includes a national representative sample of 7560 HH from the 21 governorates of Yemen. Data collection will be based on a rotation approach such that data collection will be undertaken on monthly basis from all the 21 governorates, with a sub-sample of 2520, while the overall cohort is finalized every quarter. The data collection on monthly basis for the period of 12 months. A structured, interviewer-assisted questionnaire will be the main data collection tool, which covers indicators on nutrition, food security, health, water, hygiene & sanitation, child protection, education, and HH economic activity and income. Partnership with the IPC-IG, a UNDP research centre based in Brazil, was established, to provide technical support in the design, methodology, and sampling. The data collection is being done by a national institution, Interaction in Development, which was selected after a competitive bidding process. The SPM survey aims to:

1. Ensure the provision of routine disaggregated data on the poor and vulnerable HH at national level;
2. Provide evidence on the impact of the public cash transfer programme implemented by the Social Welfare Fund. Two rounds of data collection were finalized for the months of October and November in all governorates except Saada, and for December data collection is in progress.

**No Progress**
**IR 4920/A0/05/002/005** By 2015, decision-makers in targeted districts utilize disaggregated data for child-focused annual and emergency planning.
Progress:

There is no progress with this IR, as it’s not addressed by any interventions UNICEF is currently doing, and we don’t have the capacity to implement or to measure the progress toward achieving them. Therefore, it will most probably be inactivated and replaced with another more relevant to M&E work.

On-track

**IR 4920/A0/05/002/006** By 2015, relevant government ministries, local councils, media, civil society organizations, and academic institutions use child-friendly budget analysis to allocate and monitor resources.

Progress:

The social budgeting assessment was not initiated this year and was postponed to be started in 2013. This decision was jointly taken with governmental partners, as the government was fully engaged in preparing and finalizing the transition plan for the upcoming two years, with the related budget. It should be noted that UNICEF, and as part of the joint UN support to the finalization of the 2-year transition plan, had provided necessary inputs to the plan and the TP budget to be child-focused. A series of consultations were conducted with the Ministry of Planning and International Cooperation to plan for conducting a social budgeting analysis followed by a series of advocacy and capacity building for key governmental agencies, to be conducted in 2013/2014.

On-track

**IR 4920/A0/05/002/007** By 2015, knowledge is generated on the attitudes and practices of rights holders and duty bearers related to key programmatic initiatives.

Progress:

Knowledge and data are generated through planned studies, surveys, and evaluations, which are monitored closely via IMEP status implementation reports. Equity-focused district selection for integrated programming for the Country Programme cycle with phasing is completed and which identified the most vulnerable 106 districts (out of total 333 districts) for its development programme interventions

Despite the fact that there are delays with implementation of some studies and surveys, overall the progress is satisfactory and periodic data is generated from surveys like the nutrition SMART surveys which enabled timely intervention by the nutrition section. National Social Protection Monitoring is also started the field work, and expected to generate very useful and critical information about the situation of children and their coping mechanisms. Government major data collection exercises for 2012 namely the NDHS is launched; however data were not expected to be available before the last quarter of 2013.

By December, the implementation of the Baseline survey in 106 districts had commenced.

Constrained

**IR 4920/A0/05/002/008** By 2015, humanitarian actors in Yemen have the capacity to conduct and disseminate vulnerability and needs assessments, rapid appraisals, humanitarian evaluations, and to utilize an integrated emergency management information system.

Progress:

The work being constrained because the project of introducing the web based EMIS for emergency planning and reporting was discontinued; however, there was good progress with cluster and emergency reporting, and the information management capacities are in place to support the clusters with technical support from UNOCHA. Therefore, and despite the fact that the components of this IR are relevant and important to UNICEF intervention, we believe that some components are being addressed by other IRs and the rest can be integrated with the other emergency IR instead of having a stand-alone IR.
PC 3 - Empowerment for children's rights

On-track

**PCR 4920/A0/05/003** By 2015, rights holders and selected duty bearers use expanded capacities and services to ensure sustained realization of the rights of vulnerable girls and boys

**Progress:**

The focus of PCR-3 is to design and implement appropriate interventions to empower rights holders and duty bearers and mobilize them to take appropriate action for the realization of rights of children. The IRs and activities are distributed across all programme sections. Since this is the first year of RWP, the first half of the year went in developing appropriate strategies. Now major strategies have been developed and field implementation started during the second half of the year. The strategies would be implemented during the next three years of country programme.

**Major achievements**

- C4D strategy drafted on key 3 child protection issues (child recruitment, child marriage and crime prevention)
- Life skills strategy drafted and ready for approval
- C4D strategy to promote key MCH & WASH practices finalized and implementation started in field

**Constrained**

**IR 4920/A0/05/003/001** By 2015, 50% of water committees and water providers in targeted districts promote improved hygiene practices and safe water handling in their communities.

**Progress:**

The main focus in 2012 was on the emergency affected districts through provision of water purification and provision of water to an estimated 750,000 people in Harad and Aden city. However, WASH programme achievements include

1- WASH in Schools working groups established in close coordination with SFD, MoE, MoP&H; Two WiS workshops conducted, the bottleneck of WIS were identified by concerning agencies and departments. GHWD was implemented in coordination with WASH cluster partners, MoE, MoPh&P, and MoI, targeting 354 schools at capital levan in governorates and districts. 839,990 school children (target 990,000) reached and IEC materials for distribution to 15,450 schools targeting 4,295,263 (target 1,620,000) schoolchildren.
2- The General Authority for Rural Water Projects has a clear WASH emergency preparedness and response strategy and core WASH cluster professionals are trained. The activities will be based on the lessons learnt from the emergency activities implemented by GARWP and other partners. GARWP has WASH emergency preparedness and response strategy with which core WASH cluster professionals are trained. The community water committees in rural areas were largely responsible for maintaining water supplies during the crisis. The office was constrained in 2012 in focusing on building capacity of the committees due to competing priorities of the emergency situation.

On-track

**IR 4920/A0/05/003/002** By 2015, 50% of communities in targeted districts are equipped with knowledge and skills on critical maternal and child survival practices.

**Progress:**

The focus of this IR is to develop and implement comprehensive C4D strategy to promote an integrated package of key maternal, child health and WASH practices. Institutional capacity building of government and other partners is another important component of the IR. There is significant progress on both of these components, the integrated package of key MCH and WASH practices finalized and implementation started in field; partnership initiated with Health education department under Ministry of Health to build the capacity on effective planning, implementation and monitoring of C4D interventions.

**Key achievements:**
The package of key maternal, child health and WASH practices finalized;

Communication materials finalized and printed;
Field activities started with orientation of 120 key stakeholders, influential community members and religious leaders in Hodeida field office;
15% of households reached with a package of key maternal and child caring practices messages in 2 districts in Lahj;
National communication plan for immunization drafted and submitted for endorsement by MoHP;
30 participants from national and governorate level health education department, EPI and NGOs trained on communication planning.

Constrained

IR 4920/A0/05/003/003 By 2015, 70% of boys and girls in targeted formal and non-formal basic education programmes have acquired basic life skills.

Progress:

Working with MoE and other agencies, a draft vision and strategy for life skills has been designed. This is expected to be followed by a national consultative meeting on life skills to share the vision and to look at ways to garner resources for a national life skills programme.

On-track

IR 4920/A0/05/003/004 By 2015, boys, girls and duty bearers in targeted districts mobilize their communities to collectively address key child protection issues (child marriage, child recruitment and crime prevention).

Progress:

This IR is based on a new strategic direction working towards empowerment and social change as per the new country programme, so time is spent in developing a new programme strategy/communication for development strategy which is currently in the final stages. Hence, it is too early to report on the majority of indicators except for indicators related to emergency. Meanwhile in conflict affected areas, given the continued risk of children being exposed to mines/ Unexploded ordinates (UXOs)/Explosive Remnants of War (ERWs), UNICEF is leading, together with Yemen Executive Mine Action Center, in accelerating and coordinating mine risk education (MRE) activities under the Child Protection Sub-Cluster jointly with a wide range of partners in Yemen, including the Ministry of Social Affairs and Labour (MOSAL), more than 25 local and international organizations and over 50 community volunteers from all the Districts of Sa’ada, reaching over 215,678 people including 98,185 children (38,733 girls, 59,452 boys) and 117,493 adults (49,786 women, 67,707 men) in high risk governorates in the north and the south. Also 1,937 children (911 girls and 1026 boys) have been reached through peer educators on life skills and other child protection issues and in total at least 123,264 children (48,896 girls and 74,368 boys) have been provided with awareness on child protection issues in emergencies.

PC 800 - Cross-sectoral costs

On-track

PCR 4920/A0/05/004 Cross sectoral costs

Progress: Enhanced operational and administrative capacity to support programmes for timely delivery of country programme results by 2012

On-track

IR 4920/A0/05/004/001 Salaries

Progress: Ensure that posts are fully funded and staff are timely paid as per approved schedule.
On-track
IR 4920/A0/05/004/002 Operational expenses
Progress: Ensure Sana'a office as well as zone offices are fully functioning and UNICEF assets and properties are well managed.

On-track
IR 4920/A0/05/004/003 Communication, Planning and Training
Progress:
In 2013, This IR will be deactivated, and a new IR for communication will be created under the Evidence PCR.

Rationale:
i) Communications needs a specific result to drive towards with concrete indicators (available if you need them) for the Results Assessment Module (RAM) and an IR to manage its funds in VISION.

ii) Planning needs a specific result to drive towards with concrete indicators (available if you need them) for the Results Assessment Module (RAM) and an IR to manage its funds in VISION.

On-track
PCR 4920/A0/05/800 Programme Support
Progress: Enhanced operational and administrative capacity to support programmes for timely delivery of country programme results by 2012

On-track
IR 4920/A0/05/800/001 Governance and Systems
Progress: Ensure that Governance committees are developed and fully functioning, as well as systems are running smoothly and staff trained on them.

On-track
IR 4920/A0/05/800/002 Financial Resources and Stewardship
Progress: Effective and efficient Management and Stewardship of Financial Resources

On-track
IR 4920/A0/05/800/003 Human Capacity
Progress: Effective and efficient management of Human Capacity
IR 4920/A0/05/800/888 HR
Effective Governance Structure

The Country Management Team (CMT) continues to play a key role in reviewing office management performance and laying out clear strategies and guidelines for the overall implementation of the Country Programme. During 2012, the CMT met almost every month to review and decide on key indicators related to programme strategies; budget implementation; programmatic and operational initiatives; human resources (HR) and recruitment issues; donor relations and trends; advocacy; communication and fund-raising; emergency preparedness and response; supply management; equity and gender priorities; and staff association issues. A review of EPRP/disaster risk reduction and Enterprise Risk Management (ERM), as well as follow-up on audit recommendations, are also a part of the CMT agenda.

Another key governance structure supporting the effective performance of the programme is the monthly Programme Coordination Meeting (PCM), attended by all professional programme staff, and the chief of operations. The PCM reviews a standardized set of monthly programme indicators which include those related to financial implementation, and proposes corrective measures concerning programme management and performance. Discussion during the PCMs has also helped to increase synergy and identify opportunities for cross-sectoral collaboration. Both the CMT and PCM review programme implementation and achievements/constraints, with particular emphasis on cross-sectoral issues where coordination is an essential component; and review and assess performance on operational matters such as DCTs, budget implementation, supply and travel. The office has also set up innovative, cross-sectoral working groups to provide effective coordination, implementation and monitoring of programme results around Equity, Evidence and Empowerment.

Other statutory bodies such as the Joint Consultative Committee (JCC), Contract Review Committee (CRC), Property Survey Board (PSB), Project Cooperation Agreements Review (PCA) Committee, Central Review Bodies (CRB), Local Learning Committee (LLC), ICT Governance Team, and the Local Salary Survey Committee (LSSC), are running effectively in the office. In addition, Peer Support Focal Points and Sexual Exploitation, Harassment and Abuse of Authority Focal Points have been set up in the office to provide guidance to staff members. Simplification of certain business processes was introduced in line with Vision Role Mapping.

A Conference call is held with the four field offices on a weekly basis with participation of both programme and operations staff.

In view of the implementation of the International Public Sector Accounting Standard (IPSAS) and the new Enterprise Resource Planning system - VISION, office and staff preparedness have been a major priority and closely monitored during all CMT meetings. A series of trainings were conducted for all staff, which has been a major challenge this year, partly because of time and partly because the system was so new, so staff are still learning on a day-to-day basis.

Strategic Risk Management

As a follow up to the Risk Control and Self-Assessment carried out in 2011, YCO reviewed its risk profile and risk control library, updated this in February 2012 and provided it to the Office of Internal Audit. The office will continue to monitor high risks as well as medium-to-high risks through the CMT every month.

The country office has undertaken several initiatives to improve emergency preparedness, such as regularly updating information in the Early Warning-Early Action system. From experience in responding to previous emergencies, UNICEF mapped out strategic areas in which it has a comparative advantage, to provide assistance in case of an emergency. These were categorized as interventions in the first eight weeks after a disaster and those in the recovery, reconstruction and transition phases. For each intervention area and response phase; key supplies, most with long-term agreements with suppliers; and information, education and communication materials were identified to ensure rapid and well-targeted emergency response. The office has also worked closely with government ministries and potential donors to lay the groundwork for
more rapid needs assessments for women and children, to related requests for assistance, and for securing timely and appropriate levels of funding.

To further enhance its capacity to maintain critical operational functions and deliver services during emergencies, the CO regularly updates its Business Continuity Plan (BCP), and the Disaster Recovery Plan for ICT to assist during crises. These two complement and support the office's Emergency Preparedness and Response Plan. Information Technology Core Systems to support the BCP were identified and implemented. Office is (MOSS) compliant. All staff assigned by management to ensure continuity of critical functions, have been given access to UNICEF resources (Lotus Notes, Vision and other ICT resources) through remote access (Citrix and CISCO/VPN).

Security enhancement was undertaken in the Field Offices of Aden, Haradh, Hodeidah, in close coordination with assessments done by UNDSS and with advice from Regional Security Advisor. The Office is in the process of identifying new premises in Taiz Field Office. Steps are being currently taken to enhance security in the 3rd floor of the Sana’a office premises so that this can be used as additional office space for the increased staff in YCO.

The Office made preliminary preparations for an Audit which was scheduled for November 2012 but was eventually rescheduled to March 2013.

In line with Vision, most of the office work processes were reviewed, finalized and shared with staff, taking into account internal risk management control. The office has already started using a risk-informed approach in its locally developed Standard Operating Procedures and simplification of business processes.

UNICEF has maintained a minimum readiness level for 20,000 people for emergency responses throughout the country. All pre-positioned emergency supplies are strategically located in the three warehouses managed by companies on behalf of UNICEF, i.e. Sana’a (central), Hodeidah (north) and Aden (south). End-user supply monitoring is being jointly conducted with Programme and Supply staff, with the active involvement of the field staff, and is well-received.

**Evaluation**

The evaluation function and related analytical activities were severely constrained throughout 2012 as a result of the continuing conflict and instability thus restricting movement and access to districts. Overall IMEP performance was satisfactory throughout 2012, with six out of nine planned exercises either completed or underway at the end of the year. However, the one planned independent evaluation did not take place but has instead been rescheduled for 2013.

The development of a child-friendly school programme is central to the improvement in access to quality education by the country’s most vulnerable children. So, following a pilot implementation phase between 2010 and 2011, an independent evaluation was scheduled for 2012. However, instability in many of the relevant districts prevented the exercise taking place. Nonetheless, guided by the M&E section, it was replaced by a detailed assessment implemented through field offices, which yielded valuable data on progress and constraints. The outputs from this exercise will inform the revision of an evaluation TOR that is now planned for implementation in 2013.

At this time in programme implementation, the Yemen Country office continues to consider the availability of evidence and lessons learned, critical to optimal programme implementation. This is reflected in the CPAP PCRs, which are focused around Equity, Empowerment and Evidence. The capacity of the M&E section was strengthened in 2012, so accordingly, a significant scale-up in evaluation and related analytical activities is currently under preparation for inclusion in the 2013 IMEP. Ultimately though, this will remain dependent on access in the context of improving security and stability.

UNICEF used a cross-sectoral composite indicator to identify the 106 most vulnerable districts in the country with a total population of 8,326,209. In 2012, UNICEF has been strengthening its partnership with the Central
Statistics Office, and is implementing a baseline survey in these same districts to enable assessment of progress on programme implementation over four years. Throughout 2012-2014, UNICEF is also actively supporting the implementation of a longitudinal Social Protection Monitoring Survey and the National DHS survey, which are both currently underway, as well as a National Census planned for 2014.

Effective Use of Information and Communication Technology

One of the main challenges for UNICEF Yemen’s ICT unit continues to be connectivity, especially in emergency situations. Political tensions result in occasional sabotage of services, and while this is becoming less frequent, it nevertheless leaves field offices without connectivity at times. Much of the country has connectivity issues; in some cases the services that exist are not of good enough quality for the price; and not all the services required by UNICEF are available in all areas. In efforts to overcome these challenges, YCO ICT section actively participated in emergency telecom cluster activities and worked very closely with other UN agencies to provide an adequate level of connectivity for staff posted in emergency field locations where the situation is more difficult.

Direct technical support and assistance was provided to UNICEF staff members and programme activities throughout the country and field offices, including for emergency activities in the south and north. This included a careful review of ICT infrastructure and connectivity requirements, aiming to meet the needs for new system upgrades. As with previous years, all the global rollout projects were successfully implemented in Yemen, including the upgrade to Windows 2008 Hyper V, Windows 7 and MS Office 2010, in addition to providing sufficient training and orientation to all staff through our weekly ICT activities as well as through a specific induction process for all newcomers.

In regard to VISION migration and other system upgrades, the VSAT bandwidth was upgraded to 2.5/2.0 MB in coordination with ITSSD. Furthermore, the local ISP internet bandwidth has been upgraded to accommodate requirements for future applications. The type and quality of support provided to YCO from MENARO and ITSSD with regards to resolving connectivity problems was very crucial in trying to overcome (and to resolve) some of the challenges. Indeed without such support, many of these resolutions would not have been possible.

The ICT unit has also participated in the review and implementation of project proposals from various sections that involve an information technology component. In these instances, the unit has provided advice on the different technologies available in the market as well as how they would fit in with existing government systems. This has often resulted in improved and less costly project proposals.

Based on the UNICEF hardware lifecycle and as per global policies and guidelines, all out of date ICT equipment was disposed of, through the PSB, in a secure and safe manner.

Fund-raising and Donor Relations

2012 has seen a significant increase in donor confidence, both in UNICEF as well as in the transitional progress being made in Yemen. A structured fundraising approach was initiated at the start of the year targeting National Committees through the funding toolkit as well as facilitating visits between them and the country office. Targeted visits were made to Scandinavian and European National Committees and their governments, with bi-lateral engagement with in country donor representatives. This has triggered interest in and commitment to the children’s agenda in Yemen. UNICEF has been asked to supervise the Global Partnership for Education fund which is potentially 82 million dollars over the next three years. Similarly UNICEF has entered a partnership with DFID for US$56 million to implement an integrated response to address the malnutrition crisis amongst children under the age of 5. Engagements were also initiated with Gulf countries, specifically the UAE and this will be further explored in the coming year.

On the whole there has been a 149% increase in donor funding this year (from US$32,508,575 in Dec 2011 to US$80,805,107 by Dec 2012) with 67% (28m out of 41.9m) of the planned OR funding within the CPD
already covered during this first year of the country programme. Only 55.8% of the CAP has been funded, although the flagship programme nutrition is 97% funded.

In terms of fund utilization 99.6% (US$20,495,144 out of US$20,575,638; expired total of US$80,494) of all expiring funds were utilized and 70% of the donor reports (21 out of 30) due this year were submitted on time, with the remainder delayed by only a few days and largely related to a change in the system for recording the due date. A draft fundraising strategy is now in place to strengthen and broaden existing partnerships and explore opportunities for new donors especially with Gulf Countries and the Private Sector.

Management of Financial and Other Assets

The last internal audit in Yemen took place in 2005 (the last external audit was in 2009). The Office of internal audit has communicated to UNICEF that the next audit will take place in March 2013. The office has begun its preparation processes in this regard. In terms of financial management, the country, being in its first year of the Country Programme has not yet been fully funded. However, funding is measured and reviewed on a monthly basis in both the Programme Co-ordination Meetings as well as the Country Management Team meetings.

The office operates on two year rolling work plans and as we start 2013, these are approximately 50% funded, which can be crudely construed to mean that the 2013 component of the 2013/14 workplans are close to fully funded. In this sense the results and resources are well matched.

Management of contributions was overhauled in early 2012 and all allocations to Intermediate Result levels are made in a consultative, transparent and systematic manner. Those sectors that do not receive direct funding receive a small proportion (standard percentages agreed through the CMT) of all OR and most ORE funds. These are also reflected in all proposals. The RR funds are allocated based on analysis that considers the likelihood of receiving OR funds directly, the expenditure of RR funds in the previous year and the planned results for the given section. This allows for a weighting in favour of sectors that have high implementation rates, are less likely to receive direct OR funds and which have larger programmes. Together this allows for the cross-sectoral components of the office to plan accordingly.

Bank reconciliations operate efficiently as does the cash forecast process (although there is always room for improvement). Liquidations of Cash assistance have proved problematic in light of the new operating system – Vision – and thus the final DCT over nine months made reference to here, needs to be considered in this context as the ‘real’ amount is actually much lower.

In terms of the key indicators, there were three operating system hurdles to overcome; RR expenditure is at 94% (US$6,738,183 out of US$7,175,656); 5 grants in 2012 were extended, again largely due to administrative hurdles posed by the new operating system; and DCT over nine months stands at 13.7% (2m out of a total outstanding balance of 14.8m) although the real figure is more likely to be under 10%.

Through the Operations Management Team, UNICEF continues to engage actively in order to identify means of making efficiency gains and achieving cost savings. Examples include the phone system whereby the UN has negotiated free inter-office calls and preferential rates. Another relates to the use of business class for both consultants and staff as per recent discussions in the Country Management Team. The use of Long-term Agreements for procurement and services is also being expanded in order to cut down on transaction costs.

Supply Management

YCO’s supply function YCO continued to work in three complimentary strategic areas; regular programme; emergency interventions; and provision of Procurement Services (PS) to the government and UNDP dispensary on essential supplies.

The throughput of goods and services continued to increase in 2012: Compared with 2011, the total value of goods procured has increased by 43 per cent.
In total, 107 sales orders have been issued to a total value of $24,082,740.71 for the year. Of these orders, 48 were locally sourced, accounting for $5,894,418.60, while the remaining 59 offshore supply orders total $18,188,322.11.

Procurement service was mainly provided to the Ministry of Public Health and Population (MOPHO) for various medical supplies and equipment, vaccines and several pharmaceuticals. These supplies were all procured from offshore suppliers through the supply division, while the Government is responsible for in-country logistics of all PS supplies. The total volume of supplies under PS was around $50 million for MOPHO and only $4,000 for UNDP dispensary for vaccines.

The implementation of VISION and IPSAS placed a substantial and much needed focus on warehouse and inventory management related activities. UNICEF Yemen started 2012 with 18 warehouses located throughout the country as defined by the new system. Considering that the warehouse mapping was not effectively implemented during the rollout of VISION and the IPSAS, the office had a backlog to clear and to close some of the warehouses that were not directly under UNICEF control.

The backlog has since been cleared and all the transactions are now performed in the system. Fifteen warehouses were closed, which has left UNICEF currently maintaining three, in Sana’a, Hodeida and Aden, with their management outsourced from different service providers. Two warehouses (Hodeida and Aden) are located in the two major sea ports and are strategically located to easily service the areas where sections are implementing their programmes. The warehouse in Sana’a is located in close proximity to the country’s international airport. To ensure rapid response to emergency, programme sections have also propositioned essential supplies in Implementing Partner’s warehouses.

The office has an MOU with the Government of Yemen to render support in the in-country logistics. This is mainly in distribution to end users as the Government still lacks capacity in this area. The items are distributed from different Government warehouses to the facilities throughout country. End user monitoring of supplies and equipment usage in the field was undertaken jointly with programme staff, with special emphasis on quality, impact and efficiency of the supply component of the country programme. The feedback received from the partners was found to be very useful to both programme and supply teams.

Despite the positives achieved, the office faced some challenges and risks in customs clearance, especially on security equipment. The processes are too long, cumbersome and some concerns are beyond UNICEF’s control. To mitigate the risks, the office hopes to negotiate special dispensation from the Government in order to facilitate clearance of all UNICEF assignments.

**Human Resources**

With the start of a new four year country programme, the staff strength in YCO increased to 96: Fifty-three new positions were established, out of which 41 have been filled. The remaining positions are OR funded and remain vacant pending fund availability. The office made giant strides towards gender parity, with the current number of women amongst the national staff exceeding 50%. Gender disparity amongst internationals remains high though, with 23% women (67% men) so recruitment of qualified females in the IP category remains a priority.

Recruitment of qualified national candidates especially into senior positions remains a challenge. The office has two certified competency based interviewing trainers. Most managers/supervisors and other staff members who sit on interview panels are now certified to participate in competency based interviewing techniques.

The office established a Training/Learning Plan with a view to providing learning opportunities to all categories of staff. This included using mixed learning approaches such as stretch assignment, external training, e-learning and WebEx sessions. 16 External trainings (9 international; 7 local), 6 On line trainings and 6 Group trainings were approved, weekly staff training was also established and 12 two-hour sessions have been
conducted. The office also made efforts to strengthen managerial skills for its supervisors and managers by conducting a six-day residential management training for 32 managers/supervisors. An induction programme is also organized for new staff members upon arrival.

All staff members have been orientated on the e-Pas/PAS process. A PER monitoring system is in place and by the end of May, the office had achieved 100% completion rate for 2011 PERs. The office has also put in place a checklist to guide supervisors and supervisees on their proper completion.

Leave balances were rigorously monitored by management to ensure a work life balance for staff; staff were regularly encouraged to take leave. There was renewed energy by the staff association; new executives were elected, one staff retreat was organized as an opportunity for social interaction among staff. The staff association and the management carried out a comprehensive review of the results of the 2011 Global staff Survey to address areas of staff concern for YCO. Necessary office improvement plans were put in place and monitored through JCC.

The office is committed to UN Cares and the 10 minimum standards on HIV in the workplace. The office collaborated with UNAIDS in training of staff on UN Cares; sensitization sessions on HIV and AIDS were organized in three UNICEF office locations. The office already has two Peer Support Volunteers and management is working closely with the staff association to elect more Peer Support Volunteers to cater for the increased number of staff.

### Efficiency Gains and Cost Savings

Since 2011, YCO has implemented a number of strategies and actions as detailed below:

1) Pursue and increase use of alternative learning and training modalities for staff (without compromising on priority staff learning needs);
   • In the context of the Country Programme development, YCO conducted a staff competency and capacity assessment and identified priorities for common and local training opportunities;
   • E-learning is being used as a preferred training tool as opposed to training that would involve international travel;
   • The office has and will further increase the use of web seminars to enhance knowledge of staff in selected areas.

2) Increased usage of alternatives to international travel for meetings and conferences;
   • YCO has and will continue to use web-conferences for information sharing as an alternative to meetings involving travel and expensive phone conversations with RO and HQ.
   • All International consultant travels will be on economy class, regardless of the length of travel, to reduce the cost of travel. Exceptions are based only on the need to work the day of arrival in country.

3) Mitigation of the impact of (rising) inflation on recurring operating costs by entering into fixed-price Long Term Agreements (LTA) with relevant parties;
   • LTA office landlord (rental contract for all offices)
   • LTA for printing supplies
   • LTA office equipment maintenance
   • LTA travel agencies.
   • LTA for Logistics (transportation and clearing)
   • LTA for security (on-going with UN)

4) Saving on office running costs
   • Reduce office vehicle running costs by streamlining the use of vehicles through the renting of cars in field offices when this is more cost-effective, and the establishment of contracts for car maintenance.

5) Pursue efficiency gains on utilities
   • YCO has managed and will continue to reduce significantly all costs of utilities, telephones, and other services by using electrical timers, using VOIP, controlling gas consumption and timely servicing of the office equipment.
Changes in AMP & CPMP

Yemen Country Office aims to strengthen the AMP as a monitoring tool in 2013, especially for the Country Management Team (CMT), but also for sections and individuals. This will be done through the AMP’s role as a reference document; a compilation of all relevant and available management documents and tools. The AMP 2013 will continue to establish the accountabilities within the office, its sections and units, and its many individuals. The indicators that are put in place to measure the AMPs key results are expected to be easier to measure than in previous years and will be aligned to the indicators that are presented on a monthly basis in the CMT.

UNICEF Yemen’s overarching management objective in 2013 will be to ensure that its office management structure, workplan and human and financial resources are mobilized optimally. This will include adequate decentralization systems, particularly in funds management and the associated accountability, in support of activities during the second year of the country programme (2012-2015), and with particular focus on the humanitarian response as outlined in the CAP for 2013.

During the first half of 2013, UNICEF Yemen will also be conducting a fully-fledged Situation Analysis of Children and Women (SitAn), which is the first since 2004. The SitAn will inform the country programme’s Mid-Term Review, which will be conducted during the third quarter of 2013.
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<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AMP</td>
<td>Annual Management Plan</td>
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<td>BCP</td>
<td>Business Continuity Plan</td>
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<td>C4D</td>
<td>Communication for Development</td>
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<td>CAP</td>
<td>Consolidated Appeal Process</td>
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<td>CBO</td>
<td>Community-Based Organizations</td>
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<td>CEDAW</td>
<td>Committee on the Elimination of Discrimination against Women</td>
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<td>CPD</td>
<td>Country Programme Document</td>
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<td>Central Review Body</td>
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<td>Convention on the Rights of the Child</td>
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<td>DCT</td>
<td>Direct Cash Transfer</td>
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<td>DPT</td>
<td>diphtheria, pertussis and tetanus vaccine</td>
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<td>EPRP</td>
<td>Emergency Preparedness and Response Planning</td>
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<td>ERM</td>
<td>Enterprise Risk Management</td>
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<td>GAVI</td>
<td>The GAVI Alliance</td>
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<td>GIZ</td>
<td>German Society for International Cooperation (Gesellschaft für Internationale Zusammenarbeit)</td>
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<td>Information Communication Technology</td>
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<td>Internally Displaced Person</td>
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<td>IMEP</td>
<td>Integrated Monitoring, Evaluation and Research Plan</td>
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<td>IMR</td>
<td>Infant Mortality Rate</td>
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<td>INGO</td>
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<td>IP</td>
<td>International Professional</td>
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<td>IPC</td>
<td>International Policy Centre for Poverty Reduction in Brazil</td>
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<td>IPSAS</td>
<td>International Public Sector Accounting Standard</td>
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<td>IR</td>
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<td>MDG</td>
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<td>MOU</td>
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<td>Acronym</td>
<td>Full Form</td>
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<td>RR</td>
<td>Regular Resources</td>
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<td>Situation Analysis of Children and Women</td>
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<td>Enterprise Resource Planning system</td>
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<td>Voice Over Internet Protocol</td>
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<td>Water, Sanitation and Hygiene</td>
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<td>Working Group</td>
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<td>Yemen Humanitarian Response Plan</td>
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