

Yemen - Humanitarian Pooled Fund (HPF) Strategy Paper - 2017 First Reserve Allocation



Humanitarian
Pooled Fund

ALLOCATION STRATEGY PAPER – FIRST RESERVE ALLOCATION (January 2017)

DEADLINE for submissions of proposals: Monday 22nd January 2017 at 18PM Sana'a time
Only concept notes that have already been coordinated and discussed with the WASH and Health clusters and endorsed by the HC will be considered.

A. Background to the Allocation Strategy

As of 18th October, 18 laboratory cholera cases have been confirmed together with 340 suspected cases of Acute Watery Diarrhoea (AWD) in Taizz, Al-Hudaydah, Aden, Al Bayda, Lahj, and Sana'a Governorates. The outbreak of cholera and AWD was first reported on 6th October, leading to the immediate activation of a dedicated Working Group tasked with developing a plan and coordinating the response. The YHPF and CERF provide support for the first phase of the response (3 months). Some progresses have been made for containing the outbreak. However, despite the effort of the Health authorities and Humanitarian actor cholera and AWD cases are still reported end of December. As of third January 2017, a cumulative number of 13942 AWD/Cholera cases and 98 deaths (CFR 0.7%) were reported in 156 districts. Of these 6911 (49%) are women, while 4786 (34%) are children below 5 years¹.

Cholera is an acute intestinal infection caused by ingestion of food or water contaminated with the bacterium *Vibrio Cholerae*. It can quickly lead to severe dehydration and death if treatment is not promptly given. The outbreak poses a significant threat given the drastic deterioration of the health care infrastructure with only 45 per cent of health facilities currently functional. The national health system's capacity to respond to the cholera outbreak has been severely compromised by the continuing decline in performance due to conflict. The situation is also further exacerbated by the inadequate sanitary conditions - especially in the cities, with uncollected garbage playing a role in the spread of cholera - and the fact that two-thirds of Yemen's population does not have access to clean water supply.

The Ministry of Public Health and Population and Ministry of Water in partnership with WHO, UNICEF, health and WASH partners are mobilizing a rapid WASH and health response, including a public outreach campaign. A first Integrated Cholera Response Plan that encompasses comprehensive health, WASH and communication interventions was developed and endorsed on October 10th. The plan was updated and endorsed on 12th December 2016. The total cost for the integrated plan is \$25 million, covering two phases.

B. Broad Objectives of the Allocation Strategy

Given the overall situation in Yemen, containing the outbreak is critical to avoid the spread of the disease. Progress has been made since the outbreak was declared. However, the WHO Cholera/AWD weekly update in Yemen (3rd January) reports that the overall attack rate is 5.9 per 10,000 of population. This rate indicates that there is raising need for more intervention in the affected areas.

Within the overall framework of the Humanitarian Response Plan (HRP)² and more specifically the updated Cholera Response Plan, the Humanitarian Coordinator has therefore decided to launch the First Reserve Allocation 2017. The allocation will be open to grant applications from pre-selected **partners**, for an amount of **US\$3 million**. The most impacted governorates so far will be prioritised under this allocation: Sana'a, Ibb, Taizz, Al Bayda, Al Dhale, Al Hudaydah and Hajja in line with the wash and Health cluster gap analysis.

The response strategy is aligned to the main objective of the updated Cholera Response Plan developed by the health and WASH clusters together with the health authorities. The main objective is to support the AWD and cholera outbreak response with three strategic objectives including: 1) supporting treatment/case management, 2) surveillance and laboratory services, and 3) prevention.

¹ WHO cholera/AWD weekly update in Yemen 3 Jan 2017

² http://reliefweb.int/sites/reliefweb.int/files/resources/YHRP_2016_Revision_FINAL_30%20August%202016.pdf

C. Timeline and Procedures

This HPF Allocation Strategy is published by the HC on Sunday 15th January 2017. From this day, **eligible humanitarian organisations with Concept Notes already endorsed by the HC have 5 working days, i.e. until Sunday 22nd January 2017 (18PM), to submit project proposals** through the HPF online Grants Management System (GMS), available at <https://cbpf.unocha.org/>

Sunday 15th January	The HC publishes the First Reserve Allocation 2017 strategy paper
Sunday 22nd January	Deadline for selected organisations to submit project proposals through the OCHA online database (GMS)
Monday 23rd January	Proposals submitted are reviewed by the respective cluster lead and the Humanitarian Financing Unit and comments are provided back to partners.
24-28th January	Proposals are finalised. HC provides final endorsement.
29-31st January	Grant agreements are signed
Wednesday 1st February	Disbursement process begins

In view of the emergency nature of this allocation and in the interest of ensuring a timely response, no strategic review committees will be set up. Proposals received will be exclusively reviewed by the OCHA Humanitarian Financing Unit (HFU) and cluster coordinators.

D. Contact Information

Selected organisations should liaise with the respective clusters to ensure their proposed intervention is aligned to the Cholera Response Plan and properly coordinated with other stakeholders:

Cluster/Working Group/Adviser	Name	E-Mail
WASH	Marije Broekhuijsen	mbroekhuijsen@unicef.org
Health	Kamal Olleri	ollerik@who.int

OCHA Humanitarian Financing Unit Contacts

- Pascal Mounier, mounier@un.org, +967 71 2222821

E. Complaints Mechanism

HPF stakeholders with insufficiently addressed concerns or complaints regarding Yemen HPF processes or decisions can at any point in time contact the OCHA Head of Office or write to yemenhpfcomplaints@un.org with these concerns. Complaints will be compiled, reviewed and raised with the HC, who will then take a decision on necessary action(s). The HC will share with the Advisory Board any such concerns or complaints and actions taken thereof.