



Photo: Essraa Ghamdan

Note from the Humanitarian Coordinator

Since its establishment in 2010, the Yemen Emergency Response Fund (ERF) has provided civil society and United Nations agencies with a rapid and flexible funding mechanism to respond to unforeseen short-term humanitarian needs of vulnerable communities affected by emergencies in Yemen.

The past year was marked by a major increase in contributions highlighting the increasingly strategic role of the Fund: \$19.3 million was provided targeting more than 1.2 million people. A third of the funds were allocated for critical life-saving gaps in the Yemen Humanitarian Response Plan (YHRP). An additional contribution from the United Kingdom enabled us to initiate a second call for proposals. The ERF also achieved the target of providing 70 per cent of the funding through NGOs; 28 per cent went to national NGOs. One of the advantages of the ERF is that eligible Yemeni NGOs can access it directly.

In 2014, the ERF achieved nationwide coverage and supported projects throughout the country. The Fund enabled scaling up humanitarian response to conflict and displacement in the Northern Governorate of Amran following an escalation in mid-year, emergency response in Southern Abyan Governorates where fighting continued between militants and Government forces and in the highly insecure and volatile Western Hajjah. The Fund supported protection of Syrian refugees in Aden, Taizz and Sana'a, provided matching grant to the Qatar Charity in nutrition and sought opportunities to speed up response by scaling up a project in Northern Al

Jawf to cater for an additional caseload providing food and NFIs to people displaced.

To increase accountability and effectiveness of the Fund, a new strategy and a risk management framework were developed, field visiting enhanced and third party monitoring piloted. Assessment and monitoring missions were conducted to ensure that the project responds to the needs of targeted groups and communities, and to improve accountability to the affected population. Gender was also mainstreamed in all the ERF projects.

I thank the United Kingdom, Sweden, Denmark, Netherlands, Germany, Switzerland and Republic of Korea for their generous donations to the Fund in 2014 as well as the board members, cluster coordinators, OCHA humanitarian financing team and management for their continual support. I am also encouraged by the engagement with Gulf and Arab countries and for their support to the Fund.

Escalating conflict has already shown that there will be a major increase in the number of people who will need humanitarian assistance in 2015. With the on-going transition of the Fund towards a globally harmonised country-based pooled fund, we look forward to further strengthening the fund management and building capacity of our partners. Together with the donor and humanitarian community's support, we can ensure prioritised response to the Yemenis in greatest need.

Johannes Van Der Klaauw
Humanitarian Coordinator for Yemen

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Executive Summary

At the end of 2014, Yemen continued to be a large scale humanitarian crisis. More than half the population of Yemen, 14.7 million people, remained in need of some form of humanitarian assistance. Some 10.5 million people were food-insecure, of whom 4.5 million severely food insecure. An estimated 1,080,000 children under five suffered from acute malnutrition, of whom 279,000 children severely acutely malnourished. In addition, about 13.1 million Yemenis had no access to improved water sources or to adequate sanitation facilities, with rural areas the worst affected. A further 8.6 million people had insufficient access to health.

While the 2014 Yemen Humanitarian Response Plan (YHRP) was 58 percent funded, a third of the ERF funds were allocated for critical life-saving gaps in the YHRP and the remaining to respond to urgent unforeseen emergencies and capacity building of national partners.

In 2014, the ERF funded 62 project proposals with a combined budget of \$19.3 million in the sectors of emergency shelter, protection, health, water, sanitation and hygiene, nutrition, food security, early recovery, coordination and logistics. Thirteen project proposals were rejected and six projects were processed for disbursement in early 2015.

About 1,200,387 million people benefited from ERF funded projects in 2014, including 536,725 women and girls, 498,753 men and boys and 164,909 children under five.

Overall in 2014, the ERF funded 13 international NGOs (receiving around 43% of funding), 11 national NGOs (28%), and seven UN agencies (29%). Several organizations had more than one project funded.

No-cost extensions were requested by partners for 16 projects, of which 13 were granted, and further three were rejected. The main reason for the requests were the deteriorating security situation in Yemen, which led to the relocation of ERF's implementing partners including the ERF Review Board members (RB) outside Yemen. The Fund maintained increasing flexibility in allowing grants to be reprogrammed as the situation on the ground evolved. During 2014, \$733,647 was returned for two cancelled projects due to duplication of activities or declined access to beneficiaries.

During 2014, the ERF received generous contributions of \$22,004,899 from Denmark, Germany, the Netherlands, the Republic of Korea, Sweden, Switzerland and the United Kingdom. The funding received in 2014 constitutes a major increase compared with 2013. An innovative partnership with Qatar Charity allowed for piloting the first time a matching grant model for the Fund.

With \$19.3 million disbursed in 2014, the funds utilization rate was almost 89 per cent, an improvement over the previous two years of the Yemen ERF, which were 64 per cent in 2013 and 61 per cent in 2012.

One of the major challenges for the ERF during 2014 was the monitoring of projects at the field level due to the deteriorating situation, lack of capacity and staffing problems within the Humanitarian Financing Unit. As a result, it was difficult to monitor the ERF-funded projects in Al Jawf, Marib, Shabwah, Abyan, Hajjah and recently in Amran and Hajjah Governorates.

To overcome the access constraints that affected the field monitoring of projects, OCHA and the United Kingdom's Department for International Development (DFID), explored the use of a third-party monitoring for ERF-funded projects in locations with limited access. OCHA developed a concept note and held discussions with DFID and the ERF Advisory Board (AB) in August to agree on how to monitor ERF projects using third-party monitoring. As a result, OCHA deployed a third party monitoring team (3PM) to collect data and information to conduct the monitoring exercise at the field level. The third-party monitors piloted field visits for selected projects during the fourth quarter of 2014.

During the year, a project monitoring matrix was developed and shared with OCHA field offices. Fourteen field visits were completed in 2014, compared to 12 in 2013. OCHA met with the partners operating in inaccessible areas to have an overview of the project and challenges faced. All partners provided project reporting.

The revised Yemen ERF strategy in 2014 outlines the strategic objectives of the Fund and mainstreams the key decisions of the AB that had been made over the past two years. The strategy articulates capacity assessment, project selection and allocation criteria and monitoring and

reporting elements. It is also better aligned with the Humanitarian Needs Overview (HNO) and YHRP through the project selection and allocation criteria. The lack of access to some project locations is also taken into consideration in the strategy.

OCHA's Humanitarian Financing Unit (HFU) developed standard operating procedures (SOPs) for projects with a cash programming component, to improve the accountability of the fund. These SOPs are part of the fund's accountability framework, which also includes a risk management framework, a monitoring strategy and plan, and reporting and audit requirements. The SOPs were shared with ERF partners, outlining the conditions under which the ERF can fund cash-based response activities, and the measures that organizations are required to take.

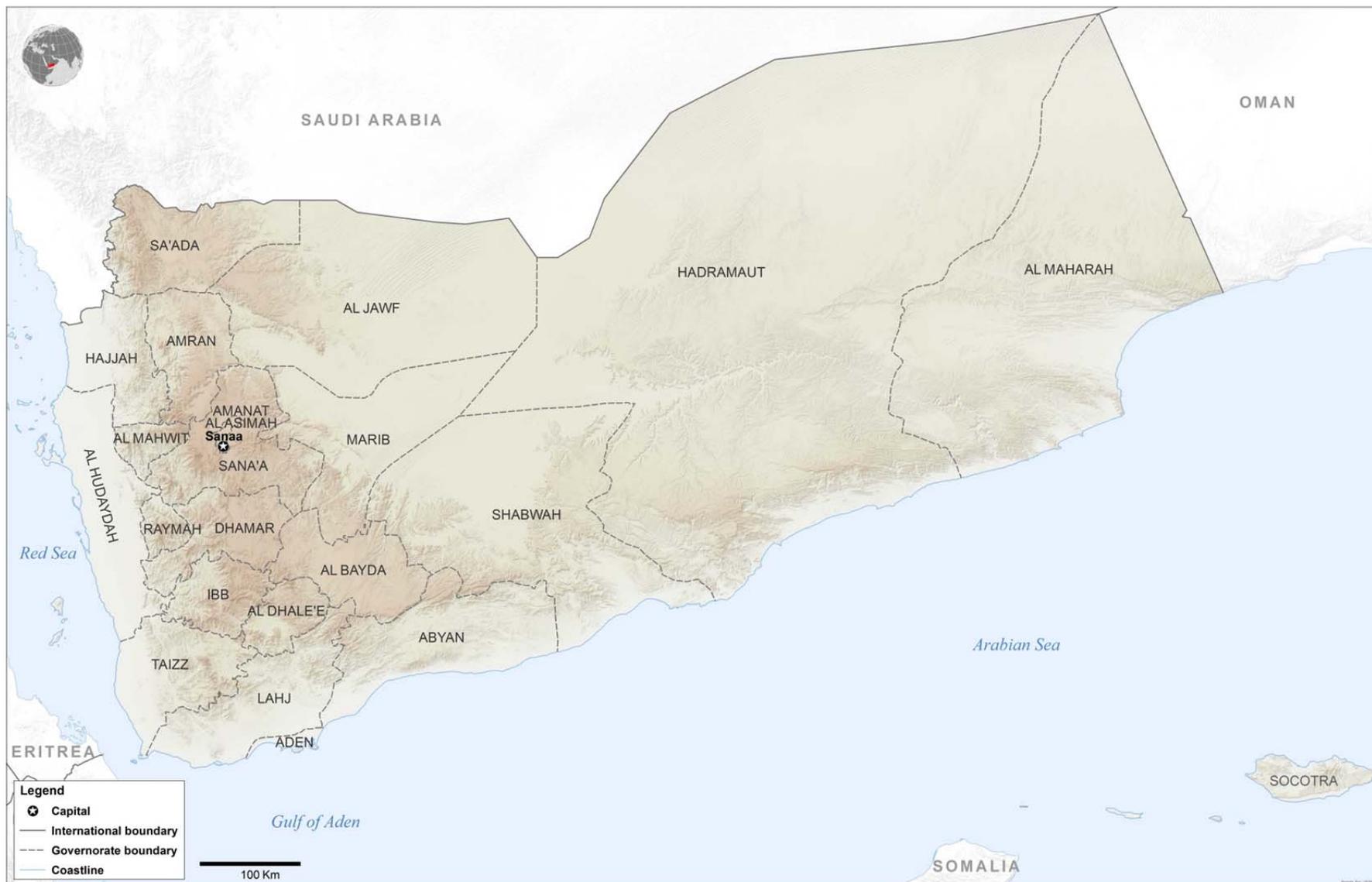
OCHA has developed a fast track procedure for project processing during crisis emergencies. As a result, one ERF project was approved and able start implementation within two calendar days.

The pilot demonstrated that projects responding to urgent lifesaving needs during an ongoing crisis can be reviewed and approved within short deadlines.

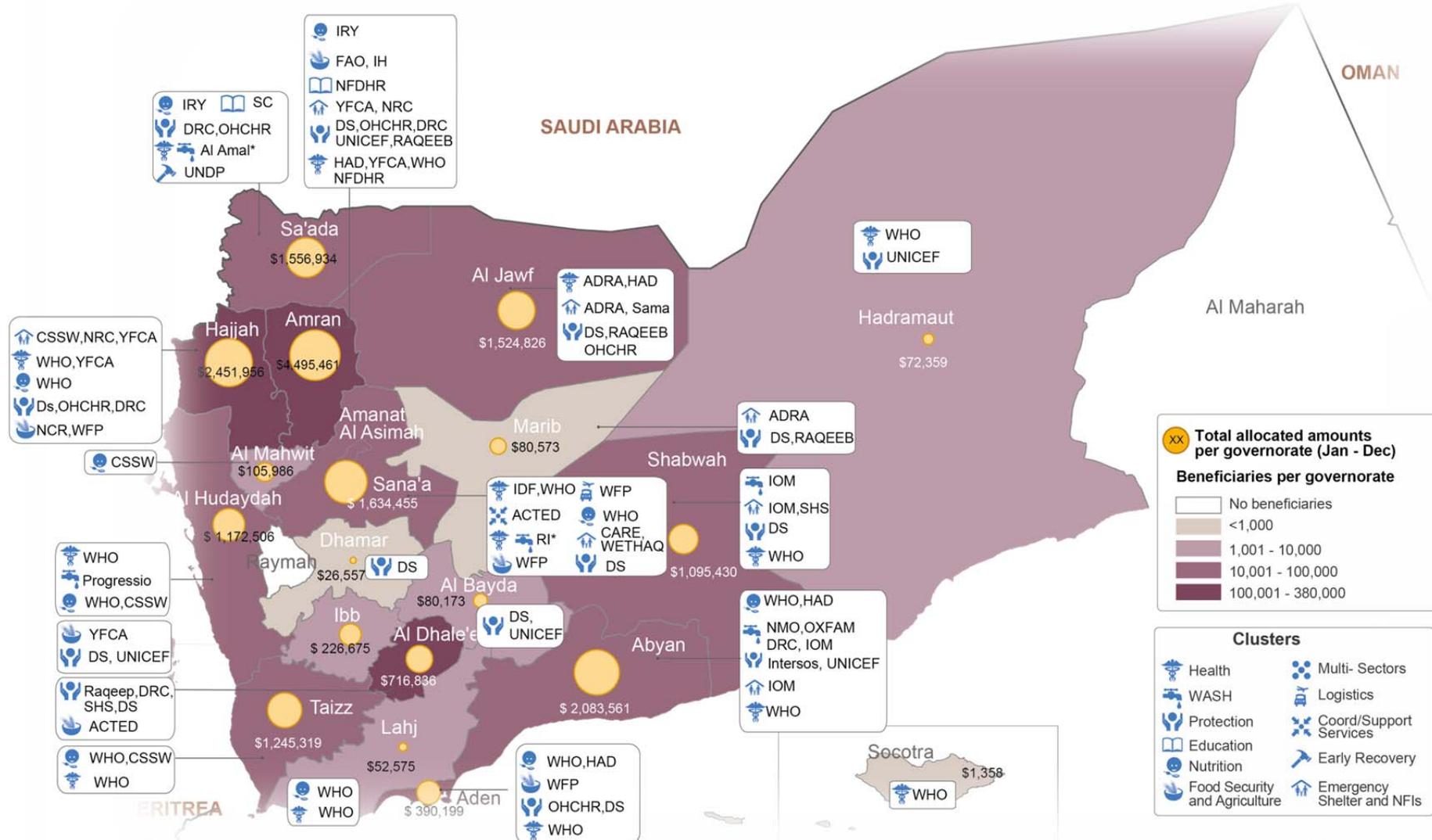
Through calls-for-proposals in July and late December, the ERF was able to provide strategic funding to the highest-priority underfunded projects in the YHRP. In order to streamline the proposals, OCHA prepared "Yemen Emergency Response Fund Call for proposal Allocation Strategy Paper". Through this process 23 projects were identified and funded with a combined budget of US\$6.9 million.

The average project processing time through 2014 was 26 working days compared to 27 working days achieved in 2013 and 33 working days in 2012. This is considered an achievement compared to the amount of funding received in 2014 and the numbers of projects that were funded.

Country Map



Map: ERF Funding in 2014



Chapter 1: Information on Contributors

In 2014, the ERF received \$22,004,899 from Denmark, Germany, the Netherlands, the Republic of Korea, Sweden, Switzerland and the United Kingdom representing an increase of 229 per cent over 2013. Both United Kingdom and Sweden doubled their contributions in 2014 compared to 2013, and Germany joined as a new donor to the Fund with a \$2.5 million contribution.

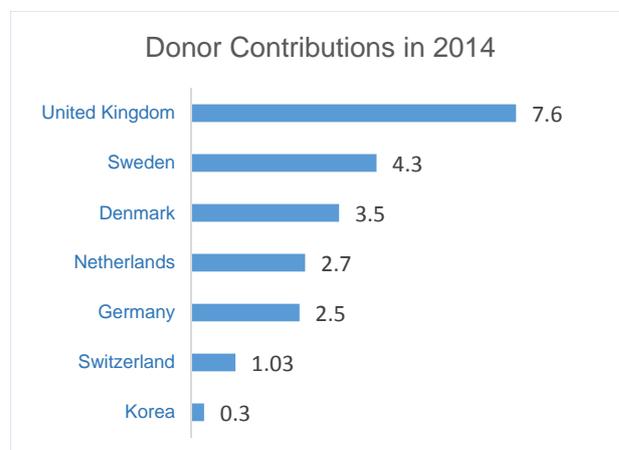
To compare time from pledges to deposits, the fastest disbursements were made by Denmark and United Kingdom who disbursed their commitments in less than 14 days. Germany, Netherlands and Sweden deposited their pledges within one month of their commitment. Switzerland pledged \$1.04 million in November 2014 and deposited in early January 2015. In the United Kingdom's multi-year agreement of 2013, DFID agreed to two 2014 contributions of \$3.8 million each. Both contributions were paid in

accordance with this schedule, during March and September 2014.

In 2014, OCHA piloted an innovative co-funding partnership with Qatar Charity (QC). Jointly, they explored a partnership that strengthened coordination between them and clusters, mobilized resources for a priority project of the YHRP, enhanced information sharing and promoted learning with each other. QC contributed nearly \$600,000 to a nutrition project worth \$1.1 million, with a matching contribution mobilized through the ERF. OCHA drafted terms of the partnership that were acceptable to QC. QC wanted to participate in each stage of the project cycle, working alongside the implementing partner. QC would like to explore further co-funding opportunities in 2015 because they consider the partnership with OCHA to have been a success.

Donor Contributions in 2014

Donors	Contributions received in 2014
United Kingdom	7,631,039
Sweden	4,350,979
Denmark	3,471,519
Netherlands	2,673,797
Germany	2,541,296
Switzerland	1,036,269
Korea	300,000
Total	22,004,899



Summary Donor Contributions to ERF from 2010 to 2014

Donor	2010	2011	2012	2013	2014	Grand Total
Denmark	853,242		1,684,636	3,598,660	3,471,519	9,608,057
Netherlands					2,673,797	2,673,797
Norway				1,643,115		1,643,115
Sweden	879,176	2,214,365	1,498,231	2,238,138	4,350,979	11,180,889
Korea, Rep. of			500,000		300,000	800,000
United Kingdom	777,605	2,467,105	3,466,108	3,731,343	7,631,039	18,073,200
Ireland		273,598	515,842	255,428		1,044,868
Switzerland		542,888	969,599		1,036,269	2,548,756
Australia		1,002,004				1,002,004
Germany					2,541,296	2,541,296
Grand Total	2,510,023	6,499,960	8,634,416	11,466,684	22,004,899	51,115,982

Chapter 2: Allocation overview

2.1 Allocation Strategy

The ERF strategy for 2014-2015 was initially endorsed by the Advisory Board on 6 April 2014. Taking into account changes in the humanitarian situation, at a meeting on 25 June 2014 the strategy was further revised to include references to the ERF's risk management framework and a concept note on third-party monitoring of ERF projects. The AB endorsed the final revised strategy in August 2014, setting out the strategic objectives and priorities for the ERF activities and outlining the programmatic and allocation criteria.

The ERF strategic objectives were reformulated to be compatible with the Yemen Humanitarian Needs Overview (HNO) and HRP. The strategy allowed the ERF to allocate up to 20 per cent of the annual available funds for underfunded projects that address critical life-saving needs identified by clusters, giving priority to integrated projects. The underfunded life-saving needs were to be identified through the Inter-Cluster Coordination Mechanism (ICCM) and approved by the Humanitarian Coordinator (HC). Priority projects include those of an integrated nature in geographic areas where implementing partners have access to beneficiaries and the projects enhance complementarity of interventions between the various clusters for maximum impact.

In 2014, the ERF initiated two calls-for-proposals and provided strategic funding to the highest-priority, underfunded projects in the YHRP. Each call-for-proposals included the allocation strategy and related priorities, donor contributions and details on how projects should be prioritized and humanitarian context with a focus on how the ERF fits into that context. OCHA disseminated the documents to the clusters and partners and requested for project proposals.

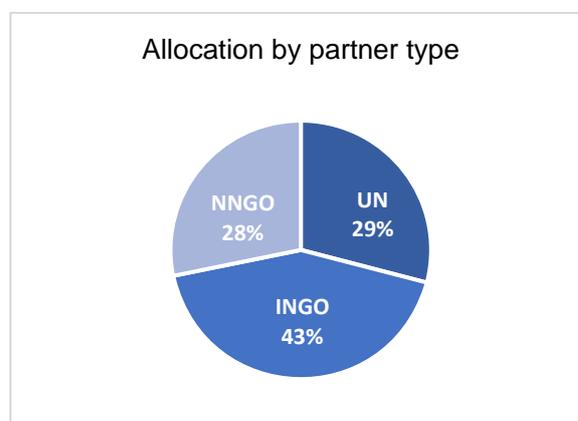
During the allocation process, OCHA convened meetings with the clusters to review the project proposals according to the principles of the call-for-proposals, to ensure that the submitted proposals complied with the project selection criteria, and to ensure that funds would go to the governorates/districts identified with the highest consolidated overall need in the HNO. The fund allocations under the two calls-for-proposals included areas of conflicts such as Amran, Al

Jawf, Marib, Shabwa, Abyan, Sa'ada, Hadramaut, Hajjah and Sana'a governorates.

2.2 Allocation Breakdown

Allocation by partner type

In 2014, the ERF allocated funds to 62 projects worth \$19,312,078 million. The projects were implemented by national NGOs (NNGO), international NGOs (INGO) and UN agencies. 28 per cent (\$5,448,694) was disbursed to NNGOs, 43 per cent (\$8,250,406) to INGOs and 29 per cent (\$5,612,978) disbursed to UN agencies.



In 2014, NNGOs received 28 per cent of total ERF funding, compared to 18 per cent in 2013. The amount of funds disbursed to INGOs was \$8.2 million in comparison to \$6.3 million in 2013. The percentage of fund allocation to UN agencies was 29 per cent in comparison to 25 per cent allocated in 2013.

Allocation type

In 2014, the ERF strategy was updated and aligned with the YHRP. The objectives of the ERF strategy directed the allocations made throughout the year:

Strategic objective 1: The Yemen ERF provides funding to immediate life-saving needs stemming from new and unforeseen crises, including natural disasters and conflict, and from newly opened access and availability of data on needs.

Under objective 1, the ERF allocated \$8,894,117 to 28 projects.

Strategic objective 2: The Yemen ERF can fund eligible, high priority projects that have not been funded in the Yemen HRP (up to 20 per cent of

total available funding when the current balance is not less than US\$5 million).

Under objective 2, the ERF allocated \$10,389,089 to 33 projects.

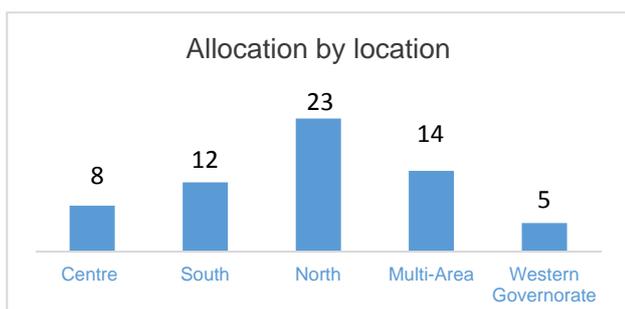
Strategic objective 3: *The Yemen ERF aims to build the capacity of NGOs to increase their ability to provide humanitarian assistance, and their potential to access the ERF. It also seeks to promote partnership between UN agencies, I/NGOs for the delivery of quality humanitarian assistance by NGOs who have access to insecure areas in need.*

Under objective 3, the ERF allocated \$28,873 to one project.

The ERF allocations in 2014 were classified as reserve and standard. Under the reserve allocation, the fund disbursed \$12,450,384 to 39 projects representing 64 per cent of the total allocation in the year. Under the standard allocation, two calls for proposals were initiated and the fund disbursed \$6,861,695 to 23 projects.

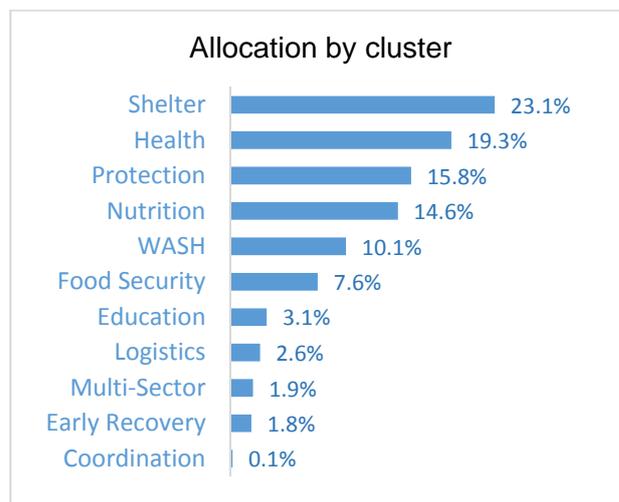
Location

In 2014, the ERF achieved for the first time a nationwide coverage, supporting projects throughout Yemen, except in Raymah in the east. Geographically, Northern Governorates received the most funding. This reflects the high needs identified in these areas due the recent conflict. The conflicts in Amran and Al- Jawf between Al-Houthies and tribesmen and militant groups have increased needs.



Cluster

Out of total funds disbursed, 23 per cent were allocated to Emergency Shelter, 19 per cent to Health, 16 per cent to Protection, 15 per cent to Nutrition, eight per cent to Food Security, three per cent to Education, three per cent to Logistics, two per cent to Multi-sector and one-tenth of one per cent to Coordination.



2.3 Fund Performance

Funding for key humanitarian events

In 2014, the ERF continued to respond to the most urgent needs of vulnerable communities, to complement the activities of other humanitarian actors, and to reinforce coordination and partnership among UN Agencies, NGOs and local authorities to strengthen the humanitarian response capacity. Sixty-two projects worth \$19.3 million were funded across the country.

During the reporting period, on-going conflict and resultant deterioration in the humanitarian situation in Yemen created new needs in Al Dhale'e, Al Jawf, Amran, Marib, and Abyan and Shabwah governorates. The ERF supported 22 projects in these areas to deliver emergency shelter, non-food items, health care, water and sanitation, cash for assets assistance and protection services to 672,915 vulnerable conflict-affected people. Al- Ghayl District in Al Jawf was the main area of conflict, and the ERF supported some of 9,450 people with emergency shelter and non-food items. The allocation also responded to protection needs of some of 4,380 internally displaced people (IDP). In Al Jawf and Amran governorates, continuation of conflict disrupted access to health care services. The general hospital in Amran governorate was provided

health equipment to ensure returnees and vulnerable populations have access to essential healthcare services. These two governorates as well as Hajjah, Al Hudaydah and Sana'a governorates also benefited from ERF health funding aimed to improve access to health services for IDPs and other conflict-affected people.

The ERF supported a nutrition surveillance and early warning system implemented by World Health Organisation in Abyan, Aden, Lahaj, Al Hudaydah, Taizz, Hajjah and Sana'a. The ERF allocation was highly important for many Yemenis who are struggling with food insecurity and malnutrition. The early detection system will complement the nutrition information base to provide continuous and regular information about the critical and emergency situation of malnutrition. It will also provide a picture of the health status including immunization coverage, any illness or mortalities in the targeted groups and care practices related to feeding, health and hygiene.

In support to humanitarian operations in Yemen, the ERF allocated funds to logistics project worth \$493,805 to provide humanitarian air services for humanitarian workers traveling from Sana'a to Sa'ada for a period of six months, 29 June 2014 to 13 December 2014.

Reserve and standard allocations

The Yemen ERF is aligned with the Global ERF Guidelines for making funding decisions under the leadership of the Humanitarian Coordinator (HC). The main difference between the reserve and standard allocation processes is that, standard allocations process will be initiated through a call for proposals. The steps and the time to complete standard allocation is explained in allocation strategy. The purpose of the allocation strategy paper is to outline the strategic objectives of the ERF call for proposal, and summarize the analysis, strategy and intent of the allocation. This allocation strategy paper includes information on allocation strategy and related priorities; donor contributions; details on how projects should be prioritized and humanitarian context with a focus on how the ERF fits into that context.

During 2014, the Yemen ERF made two standard allocations totaling of \$7.2 million and was able to provide strategic funding to the highest-priority, underfunded projects in the Yemen HRP.

The average proposal review period was 26 working days, slightly lower than the 27 days achieved in 2013, but higher than the target of 21 working days. The deterioration of the security situation in Yemen forced the relocation of implementing partners, including ERF Review Board members, outside Yemen, resulting in delay of proposal submission and reviews. Inconsistency of partner bank information caused additional delays. Finally, a shift of OCHA's Administrative Service Branch's ERF financial management from Geneva to New York caused additional delays in processing time. However, OCHA developed a fast track procedure for project processing during crisis emergencies. As a result, one ERF project was approved and could start within two calendar days, demonstrating that projects responding to urgent lifesaving needs during an ongoing crisis can be reviewed with short deadlines.

Strengthening leadership and coordination

In 2014, the Fund grew significantly in size and scope, thereby enabling more strategic response to lifesaving activities or filling gaps in the underfunded high priority projects in the YHRP. The HC provides overall management for the Yemen and takes strategic decisions based on advice from the Advisory Board.

The clusters play a critical role in the allocation process. At national and sub-national levels they collect information on the underfunded priority areas, which is essential for the development of ERF allocation strategies. In 2014 the respective clusters endorsed all the allocations. Cluster coordinators were also critical to guiding partners on the ERF availability, calls for proposal and the application process.

Ensuring inclusiveness and partnership

The Yemen ERF aims to provide NGOs and UN agencies with a rapid and flexible funding mechanism to respond to unforeseen short-term humanitarian needs of vulnerable communities affected by emergencies.

To build the capacity of Yemeni NGOs, OCHA through the ERF provided funds to the Yemeni Humanitarian Forum to train 60 national NGOs and strengthen its partnership with the Government Social Fund for Development. To build costing and budgeting capacity, the ERF facilitated a training programme for seven national NGOs, which was delivered by external auditors.

CHAPTER 3: RESULTS PER CLUSTER

Early Recovery

Number of projects	Budget in US\$	Implementing agencies	Geographic Area
1	348,526	UNDP	Sa'ada, Hajjah, Al Jawf, Sanaa, Marib & Dhamar
Outputs			
Total number of beneficiaries targeted 4,800 and about 170 reached including 25 women and girls and 145 boys and men.			
Project results: Procurement of medical equipment in progress; 170 new victims accessed medical support and examination in Hajjah and Sana'a governorate.			
ERF's added value to the project: Rapid funding of critical humanitarian activity complemented ongoing Mine Action operations; Victims' assistance was underfunded however ERF funding helped some of the most vulnerable people where were identified and enabled to receive medical assistance.			
Gender considerations: Victims' assistance team comprise female assessors to facilitate the identification and interview of female; Mainly men and boys are affected by landmines. The project allowed also women and girls to access life-saving medical services.			

Education

Number of projects	Budget (\$)	Implementing partners	Geographic Area
2	605,599	SC (1) and NFDHR (1)	Sa'ada and Amran
Key achievements			
Total number of beneficiaries targeted 10,511 and reached 1,511 including 599 women and girls and 912 boys and men.			
Project results: 28 teachers in 5 schools in Sa'ada trained on child-friendly teaching methodology thereby benefiting 1,483 children;			
ERF's added value to the project: Improved physical environment of conflict-affected schools lessened the high drop-out rates among affected children; Training provided to teachers reduced incidents of school violence.			
Gender considerations: Privacy of girls' latrines in rehabilitated schools was ensured; Female teachers participated in the training were by female trainers.			

Food Security

Number of projects	Budget in US\$	Implementing agencies	Geographic Area
5	1,468,199	NRC (1), YFCA (1), ACTED (1) WFP (1), FAO (1)	Hajjah, Taizz, Ibb, Al Dhale'e, Sana'a, Aden and Amran
Outputs			
Total number of beneficiaries targeted 36,550 comprising of 21,866 women and girls and 14,684 boys and men			
Projects results: 22,950 IDPs and host community in Al Jawf received livelihood inputs, 3080 individuals received cash and vouchers in Al Dhale'e and 9,800 people received food vouchers in Taizz and Ibb.			
ERF's added value to the project: The projects improved the resilience capacities of the people for future crisis, and the emergency activities improved the food consumption score and access to food by the most vulnerable population. The emergency activities improved the food consumption score in the targeted areas			
Gender considerations: Assessment data were disaggregated by gender and age and gender sensitive approach was adopted.			

Logistics

Number of projects	Budget (\$)	Implementing partners	Geographic Area
1	493,805	WFP (1)	Sana'a, Sa'ada, Al Hudaydah, Haradhh and
Key achievements			
<p>Total number of beneficiaries targeted 588 and reached 593 including 193 women and girls and 400 boys and men</p> <p>Project results: 593 humanitarian workers were transported between Sana'a and Sa'ada; 500,000 liters of fuel distributed to more than 30 humanitarian agencies to run their operation during fuel crisis; Fifteen logistics cluster coordination meeting organized with partners; Operational overview, infographics and logistics information shared with partners.</p> <p>ERF's added value to the project: ERF contribution enabled aid workers to reach Sa'ada safely. The ERF support for provision of fuel during fuel crisis enabled humanitarian assistance in Yemen. Logistics Coordination and information sharing with cluster members capacitated humanitarian agencies to respond and prepare contingency plan.</p> <p>Gender considerations: Equal participation by females in the in the Logistics cluster meeting to build capacity.</p>			

Water, Sanitation and Hygiene

Number of projects	Budget (\$)	Implementing partners	Geographic Area
8	1,944,679	PROGRESSO (1), NMO (1), Oxfam (2), DRC (1), IOM (1) and IH (1)	Al Hudaydah, Abyan, Shabwa and Amran
Key achievements			
<p>Total number of beneficiaries targeted 52,148 and reached 25,121 including 13,051 women and girls and 12,070 boys and men. Another 27,027 will be reached by June 2015 including 13,581 women and girls and 13,446 boys and men.</p> <p>Project results: 25,130 of affected population, including IDPs and returnees, gained access to water. 14,755 vulnerable/affected people provided with hygiene promotion messages, 8452 with hygiene kits, 1168 ceramic water filters and 2756 had household latrines constructed. 74 community outreach volunteers were trained on hygiene promotion.</p> <p>ERF's added value to the projects: In Kowd el Neasah ,92% and 62% of the returnees gained access to safe drinking water and hand washing facilities, respectively, and 65% learned and adopted hygienic practices. In Zinjibar and Ahwar, 92% of returnees and conflict affected people have reachable water points and 72% of HHs dispose off their solid wastes at least once a day. Increase of awareness of women and girls on available protection services and self-referral mechanism in Lawder in Abyan. 80% of Al-Baydha population (Hudydah) has water sources within reachable distance and latrines in their residences.</p> <p>Gender considerations: Men and women consulted on the design of water supply infrastructure and their roles on collecting water. Female hygiene promoters were used to ensure hygiene promotion messages, including those of sensitive women's issues.</p>			

Emergency Shelter and Non-Food Items

Number of projects	Budget (\$)	Implementing partners	Geographic Area
12	4,456,226	CSSW (2), NRC (2), YFCA (2), CARE (1), IOM (1), SHS (1), ADRA (1), Sama (1) and WETHAQ (1)	Hajjah, Haradh, Sana'a, Abyan, Shabwa, Amran and Al Jawf
Key achievements			
<p>Total number of beneficiaries targeted 264,040 people and reached 84,742 people including 39,032 women and girls and 46,710 boys and men.</p> <p>Project results: 12,089 households were assisted with Non-Food Items, 230 Transitional Shelters constructed and 125 houses and latrines rehabilitated.</p> <p>ERF's added value to the project: Newly displaced families received Non-Food Items and long-term ones provided with transitional shelters. Damaged houses due to fighting in Amran rehabilitated.</p> <p>Gender considerations: Needs of boys, girls, men and women were addressed from the outset of ERF projects. Transitional shelters were designed and constructed with specific consideration of women, girls, boys and men needs to promote safety and dignity. Information management capacity building programs were provided to cluster partners to enhance the collection and analysis of disaggregated data to inform programming as well as to measure the impact of project activities.</p>			

Health

Number of projects	Budget (\$)	Implementing partners	Geographic Area
10	3,725,333	HAD (3), YFCA (1), IDF (1), WHO (3), NFDHR (1), ADRA (1)	Amran, Hajjah, Sana'a, Al Hudaydah, Al Jawf, Amanat Al-Asimah, Taizz, Aden, Abyan, Lahj and Socotra
Key achievements			
<p>Total number of beneficiaries targeted 449,343 and reached 329,508 including 159,712 women and girls and 119,612 boys and men</p> <p>Project results: 17,070 Received Primary Health care, 300 Families received NFI, 1,900 HH received ceramic water filters and 2,500 Families received hygiene kits; 2 Health Facilities in Al-Heira and Alamshia of Harf Sufyan sub district were rehabilitated thereby benefiting 17,932; 100 % of the targeted health facilities (10 health facilities) have been equipped with essential medical equipment and supplied with reproductive health needs; 4,200 (70 % of targeted cases) pregnant women have received clean delivery kits; 100% of health workers were trained in management of sexual transmitted disease and in management of sexual violence in crises situation. 100 % of the targeted health promoters have been trained in disseminating important health messages related to reproductive health. 90% of the targeted communities (5,400) have attended awareness sessions in reproductive health issues; 25682 refugees received drugs and health care assistance; 499 persons referred to secondary and tertiary medical care; 12 public health facilities (hospitals and medical centres) received refugees; 437 vulnerable cases received psychosocial-support counselling/sessions and 3 best interest determinations conducted; 100% of unaccompanied and separated children identified and 150 cases living in alternative care were monitored; Procurement of essential equipment for Amran Hospital; Provided 222,259 medical consultations in Sana'a, Hajjah, Al-Hodeidah, Taiz, Aden, Abyan and Lahj through the eDEWS surveillance system, identifying and responding to 224 alerts and 0 outbreaks; 4,865 beneficiaries, most of them are women, received emergency primary and maternal health care services; 4 Health facilities have been assessed and rehabilitation is starting by beginning of 2015</p> <p>ERF's added value to the project: ERF funding enabled 17,932 beneficiaries to get access to health services including the provision of safe delivery kits to 100% of targeted pregnant women in Hajjah and Amran governorates. Uninterrupted provision of Primary Healthcare services to vulnerable population in target governorate; People living in conflict affected areas have increased access to emergency primary and maternal health services</p> <p>Gender considerations: 4 Medical staff of the team were females and 20 out of 40 volunteers were females. Needs of women at reproductive age who have no access to emergency obstetric and RH services were addressed. Equal opportunities of Projects' staff including volunteers and technicians consisted of females and males. Needs of men, women,</p>			

boys and girls were considered on procurement of the equipment for Amran Hospital. Primary Health Care as well as disease surveillance and response services were provided to all patients in need without discrimination. Privacy concerns of different gender groups, particularly women and girls were part of the service provision. The emergency health services is provided by a female doctor and midwife so that women could receive antenatal care, family planning and emergency obstetric care. Information collected is disaggregated by age and sex so that monitoring of beneficiaries especially women and under five children how they could benefit more from the services provided

Protection

Number of projects	Budget (\$)	Implementing partners	Geographic Area
13	3,045,105	UNICEF (2), OHCHR (2), DRC (3), INTERSOS (1), SHS (1), Raqeeq (3) and DS (1)	Abyan, Al Dhale'e, Hajjah, Sa'ada, Al Bayda, Al Jawf, Sana'a, Amran, Dhamar, Ibb, Aden, Marib, Hadramaut
Outputs			

Total number of beneficiaries targeted 438,118 and reached 23,697 including 11,624 women and girls and 12,073 boys and men

Project results: A child protection network composed of local NGOs was established and strengthened in Al Dhale'e, and 10 local based protection and child protection committees established and strengthened. 80% of the reported human right and child right violations are documented, with 26 survivors of violations received legal support and referred to service providers. Full human right violations database established and monitoring and reporting mechanisms (MRM) are established and maintained at sub-national level. 600 displaced women provided with dignity kits in Amran, 4366 individuals assisted to access food in Al-Dhale'e, 1356 vulnerable people supported through psychosocial counseling, 1290 people targeted during awareness sessions on MRE, GBV and HR. 3700 vulnerable individuals received unconditional cash assistance in Amran governorate. 25 Explosive Remnants of War survivors and 119 GBV survivors assisted and 90 women at risk enrolled in short term vocational training. 175 people trained on Human Rights and 174 people involved in FGDs on GBV. 50 youths from Abyan involved in the organization and implementation of activities during the 16 days of activism against SGBV. Raising awareness campaigns for 3533 female and 4290 male through the trained CBPNs. Reported and responding to human rights violations on 5 incidents related to protection in the targeted areas through the CBPNs teams. 106 cases of killings or injury, and 5 detentions at areas of conflict were documented and reported including Al-Baida, Ibb and Sana'a Governorate.

ERF's added value to the project: The project enhanced the capacities of local CBOs, field teams and volunteers to monitor and report human rights and grave child rights violations. Through referral, identified shelter rehabilitation needs were addressed by 65% (reference made to DRC database) in Amran Governorate. Identified capacity development needs for local stakeholders in Al-Dhale'e addressed by 75% (DRC capacity assessment database). Support to ERW survivors increased. INTERSOS signed a MoU with one hospital to ensure proper and prompt medical assistance to the beneficiaries, who benefited from the services provided (surgery, treatments, etc.) and improved their daily life. The response to and the knowledge of specific problems affecting the communities of concern was improved and strengthened by capacity building trainings addressed to judiciary personnel, INGO staff and volunteers on human rights, GBV, IASC minimum standards. Decreasing the risk of involving the children with armed groups in the targeted area and the risk of occurrence of GBV cases. Establishment of effective monitoring and reporting activities within the targeted population. ERF funding has allowed the deployment of field monitors to locations of increasing conflict or instability across Yemen (Sana'a Municipality/ Governorate, Taiz, Hajjah, and Aden). Human Rights Field Monitors have worked with a low profile given the difficult security situation, nevertheless, have worked to achieve protection a variety of ways; fostering dialogue between them and Yemeni Authorities, the direct encouragement and empowerment of local human rights actors, as well as, the important task of public advocacy and reporting.

Gender considerations: Men, women, boys, girl and marginalized groups were involved in the project implementation. Awareness and capacity building activities included most of the community sensitive issues such as equality and discrimination. Gender-specific information sharing methodologies relevant for displaced women in conflict affected areas of Amran, Abyan and Al-Dhale'e was designed. DRC prioritize provision of assistance and services for vulnerable groups through the protection fund, including women, displaced, children and minority groups. Gender has been promoted and taken in consideration from the beginning of the project, including the organization of awareness sessions and capacity building activities focused on gender issues and in the active participation of INTERSOS in the 16 days of activism campaign against SGB. Focusing on the risk of GBV in each awareness campaign (CBPNs male members conducted the awareness campaign for boys and men, while the female members conducted the awareness campaign for women and girls. OHCHR

has initiated the sensitization of Human Rights Field Monitors on the increasing vulnerability of women and girls and boys at times of conflict, including, gender based violence, and the targeting of young boys by armed groups. Human Rights Field Monitors were recruited with a consideration to gender balance with 50% male and 50% females.

Nutrition

Number of projects	Budget (\$)	Implementing partners	Geographic Area
5	2,821,807	WHO (1), HAD (1), CSSW (2), UNICEF (1) and IRY (2)	Abyan, Aden, Lahj, Hudaydah, Taiz,, Hajjah, Sanaá, Sa'ada, Abyan, Aden and Amran

Key achievements

Total number of beneficiaries reached 90,707.

Project results: 11835 children under five years suffering from severe acute malnutrition treated and received RUTF and 3182 cartons of RUTF. 16583 children received BS18465 U5 MAM children treated 50461 PLWs received WSB. 14600 packs of multiple micronutrient powder (sprinkles). 3650 children provided with micronutrient for six months

ERF's added value to the project: Target population became aware of nutritional needs; Technical capacities of government health staff were built ERF helped in saving lives of many children suffering from severe acute malnutrition in the targeted districts.

Gender considerations: About 40% of volunteers were females; The gender issue was highly considered and at all stages of the project implementation, all efforts done to provide equitable services to both gender, however as this project mainly targeted children under five and PLWs and implemented in the remote areas where mainly female-dominant community, so more than two-thirds of the beneficiaries were female as the numbers indicated.

Coordination

Number of projects	Budget in US\$	Implementing agencies	Geographic Area
1	28,872.58	ACTED	All over Yemen

Outputs

Project results: The parameters for a Common Needs Assessment Platform are established, and the platform has the full support of the humanitarian community in Yemen; A user friendly, interactive data-sharing platform and interface is initiated to supplement universal assessment, data sharing standards and indicators established under Outcome 1.

ERF's added value to the project: By funding this project, the humanitarian community at large in Yemen will be assisted to design, implement, and report on interventions across Yemen through improved assessment methodology and enhanced data sharing standards

Gender considerations: Clusters were encouraged to upload gender-specific data in order to ensure that future design of projects and funding decisions take gender mainstreaming issues in to account.

CHAPTER 4: ACCOUNTABILITY AND RISK MANAGEMENT

Improving ERF accountability

The Yemen ERF's accountability framework included risk management; the monitoring and reporting (M&R); accountability to the targeted beneficiaries and affected people, including gender. The ERF's risk management framework developed by OCHA was presented to the AB meeting in June. The framework builds on existing risk management activities that OCHA has implemented over the years. Having these practices articulated in a framework will help ERF stakeholders to streamline, collectively address and monitor progress on risk management. Risks in humanitarian operations are shared and require a coordinated, coherent and systematic approach, with clarity on roles, responsibilities, and risk sharing. The ERF's risk management framework articulated risk exposure of the ERF and recommended mitigation measures. For instance, OCHA and DFID collaborated on a joint pilot regarding the use of third party monitoring for ERF projects in remote inaccessible locations. In addition, OCHA continued to implement the accountability framework of the fund, including capacity assessments, onsite project visits, reporting compliance, and financial audit of completed projects. A more systematic implementation of the risk management framework and cash programming SOPs, also developed by OCHA in 2014, is expected to take place in 2015

Capacity assessment

OCHA conducted capacity assessments for 13 NGOs, 11 NNGOs, and two INGOs, which were found to have capacity to implement ERF projects. The assessment exercise looked at their respective organizational capacity, such as human resources, its financial and administration structures, internal oversight, leadership and managerial structures, and experience in implementing projects. Capacity assessment of new/potential ERF implementing partners aims to strengthen overall risk management of the Fund.

Monitoring and reporting

Monitoring of ERF projects improved in 2014. In 2014, a project matrix was shared with OCHA field offices. Projects documents and MoUs were also shared. Out of 38 projects implemented in 2013, 12 projects were monitored in 2014. Furthermore, 14 projects started in 2014 were

monitored during the year. The field visits were conducted by OCHA offices in Aden, Haradh, Sa'ada and Sana'a. However, OCHA were not able to cover all projects sites due to deterioration of security situation in some governorates such as Marib, Al Jawf, Amran, Shabwah, Abyan and Al Bayda.

To increase monitoring of ERF projects, DFID proposed to OCHA to make use of DFID's third party monitoring (3PM) team in Yemen. A concept note was developed by OCHA outlining issues pertinent to project monitoring and reporting and as an initial step in seeking to articulate and to formalize the use of third party monitoring. As a result, OCHA facilitated the pilot 3PM team's site visits and data collection. The experience and lessons learnt of the 3PM will be further discussed in 2015.

CHAPTER 5: CONCLUSIONS AND WAY FORWARD

Since 2011, conditions in Yemen have severely deteriorated due to political instability, conflict, and an economic and fiscal crisis leading to the near-collapse of basic services. The scale of needs makes Yemen one of the largest humanitarian emergencies globally. The situation worsened markedly in 2014, particularly in the second half of the year. Localized conflicts flared in Abyan, Amran, Al Bayda, Al Jawf, Marib, Sana'a and Shabwah Governorates, displacing nearly 100,000 people. The majority of people affected required food assistance or medical care.

In the first quarter of 2015, the conflict in Yemen has significantly escalated and on 26 March, a campaign of airstrikes began targeting Al-Houthi areas and military installations. At the same time, fighting has escalated on the ground, particularly in southern Yemen. There are reports of civilian casualties, new displacement and damage to civilian infrastructure. Priority needs have been identified in the areas of health, nutrition, WASH and protection and partners expect needs for emergency shelter, NFIs and food to increase.

With the launch of the OCHA Global Guidelines for Country-based Pooled Funds (CBPFs) in February 2015, the ERF became the Yemen Humanitarian Pooled Fund (YHPF). Through the global harmonization process the various humanitarian pooled funds, the so-called ERFs and Common Humanitarian Funds (CHF) operating in 17 countries worldwide, are being brought under one modality.

The Guidelines establish global minimum standards for the management of pooled funds with an emphasis on harmonized accountability and control mechanisms. The harmonised approach will therefore require more capacity. The process is timely for Yemen, where the ERF's rapid growth since its establishment in 2010 had created a need for more robust operational modalities.

The YHPF is a multi-donor pooled fund that aims to promote a coordinated response to those most in need, as well as to improve the humanitarian response by strategically funding the highest priorities identified in the Humanitarian Response Plan. Sudden on-set and new emergencies will continue to be supported through the pooled fund

as new needs emerge. The humanitarian leadership and coordination will be empowered in the identification of prioritised needs.

Much like before, the allocations follow two routes: standard allocations similarly to the calls for proposals and reserve allocations on rolling basis for emergencies. An important element of the harmonised approach is a global online Grant Management System (GMS), where stakeholders have access and can apply and monitor the Fund in real time. The GMS became operational for the Yemen Fund in March 2015.

With the rapidly escalating conflict and urgent unmet humanitarian needs, the Yemen Humanitarian Pooled Fund continues to actively mobilize and seek new resources and donors to contribute to the Fund in 2015.

Glossary

AB	Advisory Board
ACTED	Agency for Technical Cooperation and Development
ADRA	Adventist Development and Relief Agency
Al Amal	Al Amal Community for Social Welfare
CARE	Cooperative for Assistance and Relief Everywhere
CBO	Community Based Organisation
CSSW	Charitable Society for Social Welfare
DFID	Department for International Development
DRC	Danish Refugee Council
DS	Democracy School
ERF	Emergency Response Fund
FAO	Food and Agriculture Organisation
GBV	Gender Based Violence
HAD	Humanitarian Aid and Development Organization
HNO	Humanitarian Needs Overview
IDF	Interaction in Development Foundation
IH	Islamic Help
INTERSOS	INTERSOS
IOM	International Organisation for Migration
IRY	Islamic Relief Yemen
MRM	Monitoring and Reporting Mechanisms
NFDHR	National Foundation for Development and Human Rights
NMO	Nahda Makers Organization
NRC	National Refugee Council
OHCHR	Office of High Commission for Human Rights
Oxfam	Oxfam GB
PROGRESSO	PROGRESSO
Raqeep	Raqeep Organization for Human Rights
RB	Review Board
RI	Relief International
Sama	Sama Al-Yemen Development Foundation
SC	Save the Children
SHS	Society for Humanitarian Solidarity
SIDA	Swedish International Development Authority
SOP	Standard Operating Procedures
UK	United Kingdom
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
WFP	World Food Program
WHO	World Health Organisation
YFCA	Yemen Family Care Association
YHRP	Humanitarian Response Plan