



**ALLOCATION STRATEGY PAPER
THIRD RESERVE ALLOCATION
(September 2019)**

Overview

1. The objective of this Reserve Allocation is to provide short-term “lifeline” funding for critical humanitarian projects that will be forced to close in coming weeks due to lack of funding. For this Reserve Allocation, three programmatic responses will be considered: a) emergency and life-sustaining health services, including reproductive health services; b) NFI kits for vulnerable households; and c) services for the victims of gender-based violence. In addition, funding for the annual Multi-Cluster Location Assessment, upon which the annual Humanitarian Needs Overview and Humanitarian Response Plan are based, is under consideration.
2. The following pertains:
 - Only proposals that are in-line with this strategy and previously coordinated and discussed with the Clusters will be considered.
 - The “Reserve Allocation” modality has been chosen to accelerate the processes considering the needs on the ground.
 - The envelope for this Reserve Allocation is set at USD16.5 million. Proposals must be submitted by 10 September 2019.

Situation overview and response

3. Eighty per cent of the population – 24.1 million people – requires some form of humanitarian assistance; 230 out of Yemen’s 333 districts are at risk of famine, 7 million people are malnourished and 2.8 million people in 45 districts are facing catastrophic food insecurity (IPC Phase 5). According to WHO, more than 600,900 cumulative suspected cholera cases were reported from January 2019 to end of August. The outbreak has affected 22 governorates and 299 of Yemen’s 333 districts. An estimated 3.34 million people are internally displaced across the country; another 1 million have returned to their homes.
4. The 2019 Yemen Humanitarian Response Plan (YHRP) requires US\$4.2 billion to assist more than 20 million Yemenis. As of today, the YHRP is 34 per cent funded. At the High-Level Pledging Event for the Humanitarian Crisis in Yemen convened by the UN Secretary-General in February 2019, the United Nations and humanitarian partners were promised USD 2.6 billion to meet the urgent needs. To date, less than half of this amount has been received forcing organisations to close life-saving programmes. Unless funding is received in coming weeks, an additional 22 life-saving programmes will be closed, or scaled-back.
5. The impact of under-funding is already significant. 5,300 health workers are no longer receiving incentives and 9 million of the country’s most destitute people who received health care at 209 governorate and district level hospitals are no longer benefitting from the minimum service package. At the end of May, major country-wide vaccination campaigns reaching 13 million people, including 200,000 infants, against killer diseases were halted.
6. Other key programmes are being at risk because of underfunding; more than 800,000 of the most destitute IDPs will no longer receive shelter support including 60,000 IDPs who depend on rental subsidies and close to 350,000 of the most destitute IDPs are unlikely to receive the household items they need to survive. At least 50,000 of the most vulnerable, destitute IDPs will no longer receive protection services and 500,000 women and girls will no longer receive support and protection in shelters, safe spaces and specialized facilities.

7. Lack of funding also impacts the evidence base of the entire operation. Funding is urgently required for the annual Multi Cluster Locations Assessment (MCLA) which identify vulnerabilities and humanitarian needs at the household level through household-level interviews in 333 districts in Yemen (2,810 locations). The MCLA covers 6 Clusters and 6 population groups (Migrant, Refugee, Returnee, IDP, Non displaced (Host and Non-Host), living in locations that are randomly selected; a total of 22,120 Households will be interviewed. The evidence collected during the MCLA forms the foundation for the Humanitarian Needs Overview and next year's Humanitarian Response Plan. Failure to conduct the MCLA will negatively impact the planning cycle for the entire humanitarian operation.

YHF Strategic Priorities and Activities

8. Based on the current situation assessment, a third Reserve Allocation is being launched as “lifeline” support to prevent the closure of emergency programmes and loss of lives. This allocation will only be opened to grant applications listed below. These include:
9. *Health: countrywide with a focus on Abyan, Aden, Hajjah, Hodeidah, Sa'ada, Taizz and West Coast* (WHO and UNFPA) Activities to include:
- Procurement and distribution of trauma and emergency surgery kits.
 - Provision of essential commodities to preserve the health system.
 - Maintenance of surgical teams to provide life-saving surgeries.
 - Procurement, distribution and monitoring the provision of life-saving medicines for patients with cancer and other life-threatening conditions and retention of healthcare workers delivery care services to these patients.
 - Maintenance of reproductive health services in a prioritised number of hospitals and PHCs.
 - Response to the Diphtheria outbreak.
10. *Shelter: countrywide* (UNHCR) Activities to include:
- Provision of core relief items to 11,500 families hosted in IDP hosting sites.
11. *Protection: with a focus on Ta'iz, Hodeida, Hajjah and Al Dhalee governorates* (UNFPA) Activities to include:
- Provision of Gender-Based Violence and protection services in 14 safe spaces.
12. *Coordination; countrywide* (IOM) Activities to include:
- Conduct the Multi Cluster Locations Assessment.

Priority locations, prioritization of projects and eligibility

13. This YHF Reserve Allocation will focus on the districts where services will stop in the coming months.
14. Projects that are submitted within the deadline of 10 September 2019 will be reviewed by Clusters and OCHA's Humanitarian Financing Unit (HFU) using a simplified scorecard and through a combined strategic and technical review committee.
15. YHF eligible partners are expected to align their project proposals with the priorities outlined in this allocation strategy and the technical recommendations provided by the Clusters. YHF partners will have to report on a regular basis to the Clusters and actively participate in the coordination mechanisms in Sana'a and at field level. Projects should have received prior endorsement by the Cluster. Project duration should be 6 months maximum.

Timeline and procedures

16. This YHF Reserve Allocation Strategy is published on 8 September 2019. From this day, eligible humanitarian organisations have until 10 September 2019 (18:00 Sana'a time) to submit project proposals through the YHF online Grants Management System (GMS), accessible at <https://cbpf.unocha.org/>.

Key Date	Phase	Step	What	Who
6 September	Preparation	Allocation Strategy endorsed	Allocation Strategy	HC, AB
8 September		Launch of Allocation in the GMS	Allocation open	OCHA

10 September	Proposal Development and Review	Proposal submission deadline	Proposals	Partners
11 September		Strategic and Technical review	Technical review of projects; feedback to partners	Technical Review Committee, OCHA
12 September		Proposal revision and adjustments	Partners address feedback, OCHA final clearance	Partners, OCHA
From 13 September	Approval	Grant Agreement (GA) preparation, HC and Partners signatures	GA prepared/start date agreed with Partners, HC approved project, Partners signs / start of eligibility	OCHA
From 18 September	Disbursement	Grant Agreement final clearance and first disbursement	GA cleared and signed	OCHA

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Complaints mechanism

17. YHF stakeholders with insufficiently addressed concerns or complaints regarding YHF 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.

Annex 1: Budget preparation guidelines