

Plan 2010-2011



Yemen

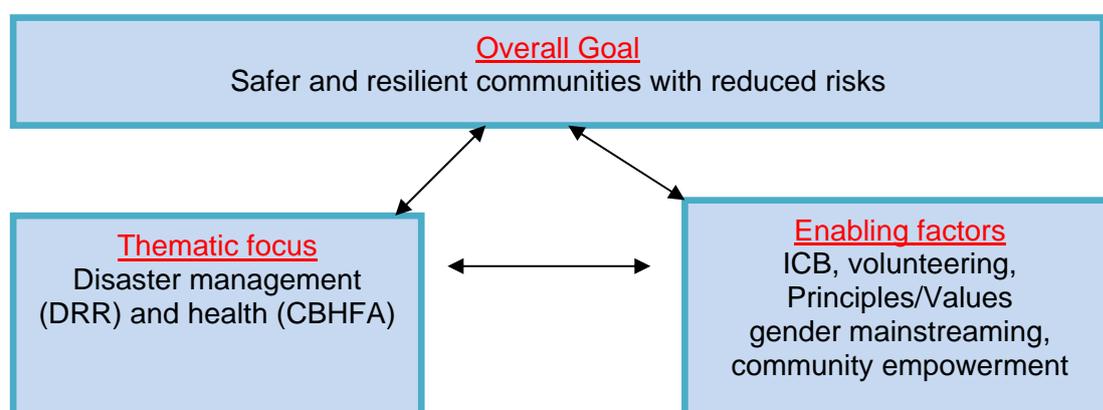
Executive summary

Yemen is recurrently affected by disasters and epidemics including civil strifes, earthquakes, floods, and tropical/semi-tropical diseases. Yemen is also the poorest county in the Middle East with wide ranging and deep-rooted vulnerabilities¹.

In view of the multi-dimensional nature of the humanitarian and social development challenges, the Yemen Red Crescent Society (Yemen RC) core services, including disaster management and health and care, will contribute to the development of safer and resilient communities working with a focus on improving the lives of the most vulnerable people. The programmatic focus will increasingly shift towards local level disaster risk reduction (DRR) and development of community based health and first aid (CBHFA)².

The combined focus on DRR and CBHFA will be based on a holistic National Society development approach including gender mainstreaming and intensified capacity building (ICB) with increasing local level structures and capacities.³ To ensure sustainable results, the Yemen RC will increase and consolidate its local level outreach that can ensure relevant capacity building and participation of community volunteers including females. Integrated operationalization of the Fundamental Principles and Values also forms part of the broad-based approach to influence positive behaviour and reduce stigma and discrimination with increasing respect for human dignity.

The implementation of the revised statutes and the recommendations of the management review conducted by an external consultant in 2008 are expected to enable the Yemen RC to perform as a strong National Society with improving accountability anchored in continuing organizational development and change. Improvement of financial sustainability is also a key priority to enhance the prospect of the self reliance of the National Society.



¹ In the global comparative table for indicators including life expectancy, adult literacy and GDP, Yemen ranks 138th out of 179 countries and 130th out of 130 countries in terms of gender gap. United Nations Country Fact Sheet, Yemen, 2008/2009.

² The CBHFA programme the Yemen RC currently implements under the new operating model of operational alliance (OA) sets a trend for a multi-sectoral focus and aims to improve health, literacy and food security.

³ The ICB support by the International Federation, focusing on establishment of 12 sub-branches in disaster prone communities, aims to create core capacities and structures at the local level to initiate and consolidate services in terms of DRR and CBHFA.

Specific programme targets include:

- Communities at risk and victims of localized disasters including flash floods and land slides (Global Agenda Goal 1 – Disaster Management).
- Communities with little or no access to basic health services including mothers and children (Global Agenda Goal II – Health and Care).
- Yemen RC leaders, managers, volunteers and staff as well as community organizations/civil societies (Global Agenda Goal III – Organisational Development/Capacity Building).
- Dissemination of Principles and Values (Global Agenda Goal IV). This programme is principally implemented in cooperation with the International Committee of the Red Cross (ICRC). Some basic aspects of dissemination are also implemented as integral components of most of the activities supported by the International Federation.

The total 2010-2011 budget is CHF 2,081,562⁴ (USD 2,017,450 or EUR 1,369,667). [Click here to go directly to the summary budget of the plan.](#)

Country context

Located in the geologically active zone susceptible to earthquakes and cyclones in the Arabian Peninsula, Yemen experiences periodic shocks and major disasters caused by flash floods earthquakes and land slides. While wide-spread hazards and deep-rooted vulnerabilities continue to affect a large number of people, basic preparedness and overall capacities remain very low.⁵

The general hazard mapping recently updated by the Yemen RC working with other organizations indicates the overwhelming concentration of disasters in the northern and south-eastern parts of the country (nine out of 22 governorates) including Hadramout where a major flash flood in 2008 caused considerable damage and loss of lives and livelihoods. The mapping also features the diversity and severity of disasters/epidemics in the country with flash floods followed by traffic accidents and lack of water (the latter ranking 3rd together with tuberculosis) topping the list with regards to severity and adversity of impact.

Even small-scale, localized disasters often cause adverse consequences due to low preparedness including weak infrastructure and quality of housing often built by mud and easily collapsible material. In most parts of the country, settlement patterns are concentrated around mountain tops and or deep valleys. This accelerates the speed and damage caused by disasters and acts as a barrier in the effort to ensure rapid access and response. The experience in the Hadramout floods in 2008 demonstrates the limit of preparedness and the difficulty to ensure rapid access to victims especially in situations where the basic infrastructure including the road network is considerably damaged. The coordination problem was also a major challenge faced by the host organizations including the Yemen RC in its effort to ensure effective response through collaborative efforts.

Security challenges continue to affect the country with adverse humanitarian consequences. Despite the continuing effort to end the long-drawn out conflict in the northern governorate of Sadaah, the problem still persists. The presence of Al Queda-affiliated groups with the latest resurgence of secessionist movements in the southern part of the country also add to the complexity of the problem.

Situated on an ancient migration route, Yemen faces specific and unique challenges characterised by mixed migration and refugee flows. While some flee war and persecution in the Horn of Africa, others look for economic opportunities in the Gulf States and beyond. In 2008, more than 50,000 new arrivals

⁴ The total contribution through the International Federation amounts to no more than 4% of the aggregate contribution by all the partners.

⁵ The earthquake in Dahmar in 1982 claimed more than 3,000 lives and displaced more than 5,000 while the flash floods in the governorate of Hadramout in 2008 affected about 30,000 and damaged more than 500 houses. With several villages suddenly submerged under water due to the violent storm, the military was the only organization that had the capacity to reach and rescue the victims using heavy machinery including helicopters. The Yemen RC and its partners assisted more than 20,000 most affected and displaced people in the two districts of Tarim and Hawra.

landed on the shores of Yemen – a 70% increase compared to 2007). This places a rapidly increasing pressure on the country's limited resources.⁶

Up to 50 percent of the people have no access to basic health services. Overall economic performance is very low and slow. Rural – urban income disparities are rapidly rising with increasing rural poverty as well as social and political tension. Poverty affects more than 40 percent of the population in rural areas and about 20 percent in urban areas.⁷ The fact that QAT is increasingly grown at the expense of food crops compounds the problem of poverty and food insecurity.⁸

Socio-economic vulnerabilities are on the rise. Shortage of domestic food production and increasing prices of consumables are affecting a large number of people especially the poor. Addressing income disparities in transforming the economy requires a comprehensive approach that pursues multiple pathways out of poverty - shifting to high value agriculture, decentralizing non-farm economic activity to rural areas and providing assistance to help move people out of agriculture⁹.

Yemen has a high rate of population growth of about three percent per year due, mainly, to cultural practices and attitudes including segregation between the genders and early marriage. Maternal and child mortality rates are also high with about only 16 percent of the births attended by a trained health worker. Up to 46 percent of primary school age children do not have the opportunity to go to school. The rate of enrolment for girls is much lower - 30 percent - in most of the rural areas. Per capita drinking water is just two percent of the global average with very low sanitation especially in the rural areas. Malaria is a major killer with over 800,000 cases reported annually.¹⁰

Communicable diseases and epidemics are common especially along the coastal areas. The World Health Organisation (WHO) has recently declared Yemen as polio free. However, significant efforts are required to prevent and control other communicable diseases including campaigns against the six child killer diseases in which the Yemen RC volunteers actively contribute in the process of monitoring. The spread of HIV/AIDS infection is underreported. Studies suggest that for each reported case (currently standing at about 2,400 cases according to the Ministry of Health), up to 20 to 30 cases remain unreported.

Key statistical indicators

Indicators	2006	Remarks
Population (millions)	21.2	Annual rate of increase - 3 %
Life expectancy at birth	62	
Under five mortality rate	100 per 1000 live births	Improvement from 139 in 1990
Total adult literacy rate	52	Literacy for women as low as 30 % with a 100 % illiteracy in many villages
Household income share (1995-2004 - lowest 40 %)	20 %	A system of resource distribution disfavouring the majority
Household income share (1995-2004 – highest 20 %)	41 %	A system of resource distribution favouring the few
GDP per capita (US\$)	960	45 % of the population on less than 2 US\$ per day

Source: Compiled from UNICEF and World Bank Reports 2005, 2006

The fact that preparedness and overall capacities are low at national and local levels often worsens the impact of disasters, health emergencies and epidemics to assume catastrophic proportions. Capacities are low not only in terms of physical resources but also in terms of awareness and knowledge to build a culture of safety, resilience and prevention.

⁶ UNHCR Fact Sheet, May 2009. Whilst the official estimate of the number of refugees is about 150,000, unofficial estimates raise the number up to more than 500,000. Refugees from Somalia are entitled to unrestricted asylum at the point of entry and they are often assimilated within the host communities.

⁷ The government report of 2007 indicates that Yemen is off track regarding achievement of the Millennium Development Goals related to poverty eradication, women empowerment, and environmental sustainability.

⁸ QAT is a green leaf which most people in Yemen chew despite or because of its mild narcotic and addictive effect.

⁹ World Bank Report, 2008.

¹⁰ Arab Human Development Report 2005, One World Guide. One of the conclusions of the inter-agency consultative meeting on DRR and climate change (Sana'a, 2009) indicates the outbreak of malaria in unusual seasons and in places of high altitude where the problem was not common before.

The overall preparedness by governmental and non-governmental organizations (NGOs) does not go far enough to cover the small, isolated and scattered communities. As auxiliary to the public authorities with its local network of branches and sub-branches, the Yemen RC has the potential to contribute more significantly in terms of building up resilience with better quality of life working closely with communities as well as governmental organisations and NGOs.¹¹.

National Society priorities and current work with partners

Within the framework of its comprehensive strategy for 2007-2011, the Yemen RC's key priorities focus on disaster management, health and care, organizational development/capacity building and dissemination of the Fundamental Principles and Values in line with the International Federation strategy and the Millennium Development Goals (MDGs) of the UN. With increasing focus on CBHFA and DRR at the local level, the Yemen RC aims to perform as a strong civil society organization, enhancing safety and community resilience with better quality of life and reduced risks.

The challenges and priorities in terms of organizational development and capacity building include development of human resources - leadership, management, volunteers and staff - financial/material resources as well as systems and procedures. The implementation of the revised statutes and the recommendations from the management review is expected to enable the Yemen RC to perform as a strong National Society with increasing capacity and impact. Much progress also remains to be made to improve outreach and preparedness with ICB at the local level.

Aware of its limitations, relative to its broad ambition to build up capacities and scale up services, the Yemen RC is working with several partners through both multilateral and bilateral modes of cooperation. This is based on the comprehensive memorandum of understanding (MoU) the National Society has signed with the International Committee of the Red Cross (ICRC), International Federation and the National Societies of Denmark, France, Germany, Italy, Norway, Qatar, Sweden and the United Arab Emirates. In addition to the multilateral and bilateral partnerships, the Yemen RC is implementing a new, flagship programme focusing on CBHFA under the new operating model of OA working together with the International Federation and the National Societies of Denmark, Norway and Sweden. The National Society also provides primary health care services, including mother and child health, through the network of its health centres in 15 branches, in cooperation with the Ministry of Health and Population.

Partner Mapping

Partners	Programme Component /areas of support
International Federation Secretariat support	Disaster management (related to natural disasters), health and care as well as organisational development/ capacity building. The International Federation also works as an OA partner facilitating implementation of the community based health programme supported through the OA
ICRC	Disaster management (related to conflicts) and dissemination of the Fundamental Principles and Values as well as the international humanitarian law
Danish RC	Provides organisational development/capacity building support, OA partner working with the Yemen RC focusing on community based health development
Norwegian RC	Disaster management, health and care as well as organisational development/capacity building through the International Federation, OA partner working with the Yemen RC focusing on community based health development

¹¹ The Yemen RC currently chairs the Yemeni National Humanitarian Forum with a membership of 17 local and international NGOs working in disaster management and health.

Swedish RC	Disaster management, health and care, organisational development/capacity building, coordination through the International Federation, OA partner working with the Yemen RC focusing on community based health development
French RC	Bilaterally working with the Yemen RC focusing on health including water and sanitation in Dahmar and Shabwa branches
Italian RC	Bilaterally working with the Yemen RC with a focus on livelihoods improvement and health promotion in the Island of Socotra
United Arab Emirates RC	Bilaterally working with the Yemen RC with a focus on health and social services as well as occasional distribution of relief supplies during Ramadan
German RC	Bilaterally supporting the Yemen RC in health and DRR
OXFAM	Cooperates with the Yemen RC in disaster management and water and sanitation
Islamic Relief	Cooperates with the Yemen RC in disaster management
Ministry of Health	Cooperates with the Yemen RC in health and care
Civil Defence	Cooperates with the Yemen RC in disaster management
United Nations Higher Commissioner for Refugees (UNHCR)	Cooperates with the Yemen RC in the provision of assistance to refugees
United Nations Population Fund (UNFPA)	Expected to cooperate with the Yemen RC in health (family planning)
World Bank	Expected to cooperate with the Yemen RC in DRR

The successful development and launch of its five year strategy for 2007-2011, reviewed in 2009, has enabled the Yemen RC to build up and expand partnerships working together with an increasing number of Movement and non-Movement partners.

Despite day-to-day operational difficulties owing, mainly, to the National Society's limited capacity in terms of governance, planning, management and overall coordination, the process of partnership development has increased. This has enhanced Yemen RC's contribution in the delivery of humanitarian and social development services with improving visibility and positive consideration as an important operating partner. Supported by the ICRC, the Yemen RC, through its branch in Sadaah, plays a key role in the provision of assistance to conflict victims and internally displaced persons (IDPs). Its role related to natural disasters is equally significant where the International Federation and other partners mobilize efforts in support of the National Society's operations including recovery and DRR at the local level. The dissemination of the Fundamental Principles and Values, estimated to reach an increasing number of people with enhanced Red Cross/Red Crescent (RC/RC) knowledge creates a conducive environment to mobilize broad – based support.

Focusing on mother-child health, the National Society reaches up to an estimated number of 30,000-35,000 beneficiaries annually through the network of its health centres in the different parts of the country. The pilot CBHFA under the OA is designed to reach up to 20,000 beneficiaries in two districts/communities in Hajjah and Hoidedah with a possibility for a roll out based on evaluations. The implementation of the revised statutes and the recommendations from the management review, together with the ICB initiative to develop local level structures and capacities, is expected to enable the Yemen RC to overcome its capacity challenges and ensure greater performance with a focus on CBHFA and DRR. Internal capacity building and scaled up service delivery efforts will be based on increasing partnerships.

Secretariat supported programmes in 2010-2011

Disaster Management

a) The purpose and components of the programme

Programme purpose¹²
To reduce the number of deaths, injuries and impact from disasters.

The disaster management programme budget is CHF 580,410 (USD 562,533 or EUR 381,910).

Programme component: Disaster Management Planning
Outcome: National Society capacity to plan, implement, monitor and report on disaster preparedness, response and recovery based on increasing shift from reactive to preventive approaches is improved.
Based on the mid-term review of the National Society's strategy for 2007-2011 related to disaster management, the disaster management planning will focus on increased communications and participation of stakeholders including beneficiary communities and partner organizations. The geographic focus will be in line with the updated hazard/vulnerability mapping to enhance the Yemen RC's contribution to the improvement of safety and resilience with growing community empowerment in disaster prone governorates/districts. Periodic review and evaluation represents another key feature in the disaster management planning and management based on lessons learnt and knowledge sharing.

Programme component: Organizational Preparedness
Outcome: Contribution to the reduction of deaths, based on decentralized capacity and rapid exchange of information is increased.
This component will focus on enhanced improvement of disaster management institutional strengthening as part of the core capacity building of the Yemen RC in line with the revised statutes and the recommendations of the management review. This involves consolidation of the disaster management unit at the headquarters and the branch/sub-branch level and disaster management focal point structures equipping them with relevant and effective tools, systems and procedures. The decentralized organizational preparedness at the local level includes the development of effective exchange of communication between headquarters and branch/sub-branch disaster management structures in addition to the build up of strategic stocks in branches and sub-branches with high exposure to risks.

Programme component: Community Preparedness/DRR
Outcome: Capacities to plan and manage DRR activities at the local level is increased.
This component will focus on risk reduction at the local level based on the gap between hazards/vulnerabilities and available community capacities and resources. With increasing integration of community preparedness/DRR and the other activities of the Yemen RC, this will involve increasing engagement with disaster prone communities including the communities where the Yemen RC is currently implementing the CBHFA programme and the ICB initiative. The community preparedness/DRR component will also be based on increasing gender mainstreaming in view of past experiences where women and children often tend to be more affected by disasters.

Programme component: Disaster Response
Outcome: Quality, coverage and impact of disaster response in favour of the most vulnerable is improved.

¹² In this plan, 'purpose' is defined as 'the publicly stated objectives of the development programme or project'. Source: OECD-DAC glossary.

This component aims to enable the Yemen RC to improve its disaster management services not only in terms of mitigation but also in terms of building up the necessary capacity for safety and resilience. Improvement of quality with Increasing integration and coordination is a key feature to increase quality and accountability based on Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE) standards.

Programme component: Recovery

Outcome: Assistance to restore or improve pre-disaster living conditions and reduce the risk of future disasters is improved.

In an effort to ensure a comprehensive approach to disaster management, the Yemen RC focuses not only on preparedness and mitigation but also on recovery as an important component in the preparedness-mitigation-recovery continuum. The recovery effort to restore pre-disaster living conditions will also aim to enable communities to foster a culture of prevention to control the recurrence and or minimize the effects of future disasters.

b) Profile of target beneficiaries

The response component of the disaster management programme targets beneficiaries affected by a variety of natural disasters including flash floods, land slides, and earthquakes. Using its branch and sub-structures, the National Society every year caters to the needs of up to an average of 2,000 beneficiaries affected by localized disasters which are not often publicized and do not attract international assistance. The National Society also mobilizes support through special Emergency Appeals to help the victims affected by large scale disasters that exceed local preparedness capacities of indigenous organizations. In all cases, the Yemen RC emergency assistance focuses on non-food items including tents, blankets and kitchen sets to enable the beneficiaries to cope with the immediate effects of disasters including the effects of displacement and the majority of the beneficiaries consist of women and children.

In addition to the training of volunteers and staff, the organizational preparedness component aims to enable the Yemen RC to build up and replenish the basic preparedness stocks to maintain the required level of preparedness to respond to localized disasters.

The components on community preparedness, DRR and recovery will target the wider communities in disaster prone governorates/districts where Yemen RC branches and sub-branches are operational with increasing focus on raising awareness not only to reduce the effects of disasters but also to enhance a culture of prevention.

c) Potential risks and challenges

The very rugged nature of the topography often restricts immediate access to victims especially when the disaster damages the infrastructure including the road network. The effort to build local level preparedness including prepositioning of basic stocks will help to minimize the adverse effects of disasters in isolated areas where access often represents a formidable challenge.

Recurrent emergency assistance has the potential to generate inbuilt dependency. The components on community preparedness, DRR and recovery are expected to create a basis for linking emergency assistance to long term development with increasing awareness and implementation including income generation projects to improve the prospect of sustainability and self reliance. The integrated focus on community preparedness, DRR and recovery also aims to empower the beneficiary communities to increase their capacities for self help initiatives that can minimize dependency on external sources for emergencies especially for small-scale emergencies.

Health and Care

a) The purpose and components of the programme

Programme purpose

To reduce the number of deaths, illnesses and impact from diseases and public health emergencies.

The health and care programme budget is CHF 365,887 (USD 354,618 or EUR 240,754).

Programme component: HIV and AIDS

Outcome: Vulnerability to HIV and its impact is reduced through preventing further infection, expanding care/support and reducing stigma.

The Yemen RC has trained a large cadre of volunteers and staff to raise awareness about HIV/AIDS not only within the Red Crescent community but also targeting the public at large. This effort will be intensified in 2010 and 2011 to enable the trained volunteers and staff to conduct more effective dissemination and education at all levels in coordination with community leaders and relevant organizations. Their engagement in care and support will be consolidated with increasing contribution to the fight against stigma to protect the dignity of persons living with HIV/AIDS linked to the dissemination of the Fundamental Principles and Values.

Programme component: Community based health and First Aid

Outcome: Capacity of communities and volunteers prepared and able to respond to health and injury priorities and development needs of communities is increased.

The implementation of this component in 2010 and 2011 will enable the Yemen RC to continue its efforts on a wider scale in terms of establishment of first aid facilities and services in schools with Red Crescent clubs, training of trainers on community based first aid in National Society branches and sub-branches and development and implementation of specific interventions to promote road safety and inter-city driving. More importantly, the National Society will work on a possible roll out of the CBHFA programme currently being implemented on a pilot basis in two districts in Hajja and Hoidedah governorates.

Programme component: Psychological Support Programme (PSP)

Outcome: People have access to social and mental health services to reduce mental health morbidity, disability and social problems with improved integration of health services during emergencies including PSP and prevention and control of epidemics during disasters.

This component aims to ensure that people have access to social and mental health services especially when they experience traumatic situations including emergencies. The PSP component will also be increasingly integrated and mainstreamed in training and service delivery including CBHFA and HIV/AIDS. It also focuses on development and provision of counselling services and specific PSP interventions targeting vulnerable groups including orphans, street children, and refugees/migrants.

Programme component: Mother Child Health (MCH) Promotion, Prevention and Control of Malaria and Communicable Diseases

Outcome: MCH promotion including safe motherhood and child health initiatives, prevention and control of malaria and communicable diseases through the network of Yemen RC health centres and community-based activities is improved.

This component will strengthen the capacity of the network of Yemen RC health centres in the branches and sub-branches to improve the quality of services they provide with a focus on MCH services. It will also enable the Yemen RC to consolidate the training and preparedness of its volunteers and staff to contribute to the prevention and control of malaria and communicable diseases in a wider context including polio eradication campaigns and the emerging focus related to the control of the spread of H1N1 influenza pandemic.

b) Profile of target beneficiaries

The implementation of the HIV component will enable the trained Yemen RC volunteers and staff in each branch/ sub-branch to promote prevention of HIV/AIDS through increased information, communication and education reaching up to 25,000 to 30,000 beneficiaries with greater awareness against HIV/AIDS. Yemen RC volunteers and staff will also provide care and support including advocacy against discrimination reaching up to five percent of the people living with HIV/AIDS (PLWHA) in each of the governorates with large populations including Sana'a, Ibb, Taiz, Hoidedah, Hajjah, Dahmar, and Aden.

The implementation of the CBHFA component will enable the Yemen RC to review and strengthen first aid training and services involving up to 200 schools in the different parts of the country with basic tools and guidelines to provide community services. Training of drivers constitutes an important feature to

reduce the adverse effects of inter-city driving which affects a considerable number of people every year.

Integration of the PSP component in other health services will enable the Yemen RC to provide comprehensive services in time of emergencies including counselling and support to enable the victims to cope with trauma. This component also aims to extend the National Society's PSP outreach and service to other vulnerable groups including orphans, street children and migrants.

On average, the MCH promotion and prevention and control of malaria and communicable diseases annually reaches more than 30, 000 beneficiaries through the network of the National Society's health centres in the branches and sub-branches. The focus in 2010 and 2011 will enable the Yemen RC to consolidate its contribution to the prevention and control of communicable diseases including the new H1N1 influenza pandemic.

c) Potential risks and challenges

The increasing Yemen RC involvement in the wide-ranging health and social services poses a challenge in terms of sustainability and increasing community expectation. However, the new effort started on a pilot basis focusing on CBHFA under the OA is based on more community participation and ownership at the level of programme design, execution and supervision.¹³ This direction is expected to create a conducive environment where the Yemen RC will increasingly catalyse community-driven initiatives with a decreasing emphasis on external assistance in a long term perspective. To improve the overall prospect for sustainability, the National Society's strategy for 2007-2011 focuses on building up capacities, including local resource mobilization capacities as a basis for scaling up services in the context of development of safer and resilient communities.

Organisational Development/Capacity Building

a) The purpose and components of the programme

Programme purpose:
Increase local community, civil society and Red Cross/Red Crescent capacity to address the most urgent situations of vulnerability.

The organisational development/capacity building programme budget is CHF 374,030 (USD 362,510 or EUR 246,112).

Programme component: Support the Yemen RC to provide effective services to the vulnerable people based on a strong and sustainable organization
Outcome: Overall support including technical support to the Yemen RC to improve its organizational development including overall performance and accountability is provided.
This component will focus on supporting effective implementation of the revised statutes of the National Society at all levels with the required by-laws and internal regulations to enhance performance based on transparent legal and accounting mechanisms. Development of Yemen RC core capacities for planning, programming and coordination and improvement of grassroots structures and capacities with increased outreach in terms of sub-branches and grassroots community structures will also define a key area of focus in line with the recommendations of the management review and the mid term review of the National Society's strategy for 2007-2011. Implementation of this component will increase participation of women and youth not only at the level of programming but also at the level of policy/decision making. This will be realized by increasing the number of youth and female participants in the training of staff and volunteers on planning and management and on how to work with communities.

¹³ The performance framework of the programme can be accessed on the Yemen RC website at www.yemenrc.org

Programme component: Support Yemen RC governance and management to strengthen the ability to lead the organization with effective and efficient service delivery

Outcome: More sustainable organization with enhanced leadership skills and competencies as well as internal and external cooperation and coordination will be developed.

This component aims to enhance leadership skills and competencies at headquarters and branch levels. This will be based on review and evaluation of the existing situation and identification of the requirements in leadership development in line with the revised statutes of the National Society and the comprehensive vision to build up capacities and scale up services. This will involve orientation to raise awareness and knowledge sharing based on best practices and peer support both internally between branches and externally in cooperation with other organizations.

Programme component: Support the Yemen RC to improve resource development with better financial management and sustainability

Outcome: The awareness and capacity of the National Society towards strengthening resource development including resources from within the country coupled with up to date and reliable financial management is improved.

This will focus on resource development plans at national and local level with increasing diversification of sources within the domestic environment, including the general public (broad-based membership, government subsidies, private sector donations and 'profits' from specific income generating projects that do no harm to the Fundamental Principles and Values of the RC/RC Movement).¹⁴ It involves training of leaders, managers, staff and volunteers on the specific skills and competencies required for effective resource development with increasing networking and promotion of good practice and learning from the experiences of other organizations and peer to peer support among Yemen RC branches.

Programme component: Support to the Yemen RC to broaden the base for volunteering

Outcome: Capacities for service delivery based on a growing culture of volunteering is developed.

This component will enable the Yemen RC to strengthen its volunteer base in urban and rural settings with increasing quality in terms of training and services. Improvement of standards will be a key aspect in line with the integrated focus on CBHFA and DRR to enhance the contribution of volunteers working with the Yemen RC in different programmes and projects.

b) Profile of target beneficiaries

The direct beneficiaries of the organizational development and capacity building components are leaders, managers, staff and volunteers of the National Society at national and local levels. However, this represents the means rather than the end. The extent to which the organizational development and capacity building components are implemented will determine the degree to which the Yemen RC will effectively reach and serve the target beneficiaries described in other sectors including disaster management, health and care as well as dissemination of the Fundamental Principles and Values.

c) Potential risks and challenges

One of the main findings of the organization/management review indicates the trend where partners directly work with the Yemen RC branches with little or no contribution to the core capacity of the National Society especially at the central level. This weakens the effort to ensure adequate coordination and monitoring. The effective implementation of the organizational development and capacity building components in line with the revised statutes of the National Society will help to ensure a more holistic development which will ensure stronger linkages between the organisational development/capacity building components and the planning and implementation of the National Society's activities (CBHFA, DRR and dissemination of the Fundamental Principles and Values).

The community based health development under the OA embodies an inbuilt organisational development/capacity building component which focuses on development of a new cadre of community

¹⁴More consistent and comprehensive domestic resource mobilization based on promoting the values of giving, altruism and sacrifice as positive aspects within the cultural context.

volunteers. The same approach defines the linkage between the DRR activities at the local level and the development of grassroots volunteers to build the basis for a growing community participation and ownership.

Principles and Values

There is no budget under the Principles and Values programme, as the International Federation is not asking for funds for this programme area.

The dissemination of the Fundamental Principles and Values together with the IHL represents one of the major areas of cooperation between the Yemen RC and the ICRC. However, the International Federation also contributes to the broad-based dissemination of the Fundamental Principles and Values integrating the basic aspects of dissemination in activities supported by the International Federation. This takes the form of introduction of the Principles and Values as an integral part at the beginning of every seminar/workshop organized under the various programmes and capacity building activities.

b) Profile of target beneficiaries

As the basic dissemination support is integrated as part of the other programme components especially in organisational development and capacity building, the dissemination of the Fundamental Principles and Values will benefit the same target beneficiaries reached through the seminars/workshops organized under the different programmes of the Yemen RC. This will enable the Yemen RC leaders, managers, staff and volunteers to carry out their duty with exemplary behaviour in terms of respect for human dignity with consistent approaches against discrimination.

c) Potential risks and challenges

The implementation of the dissemination support by the International Federation in a supplementary approach requires strong collaboration with ICRC as a primary partner with the Yemen RC in order to clarify respective roles and avoid potential risks of duplication. A shared understanding will also be required regarding overall goal and impact indicators which will also assume greater collaboration in terms of planning, monitoring and evaluation.

Role of the secretariat

The secretariat's budget for its support role is CHF 761,234 (USD 737,788 or EUR 500,892).

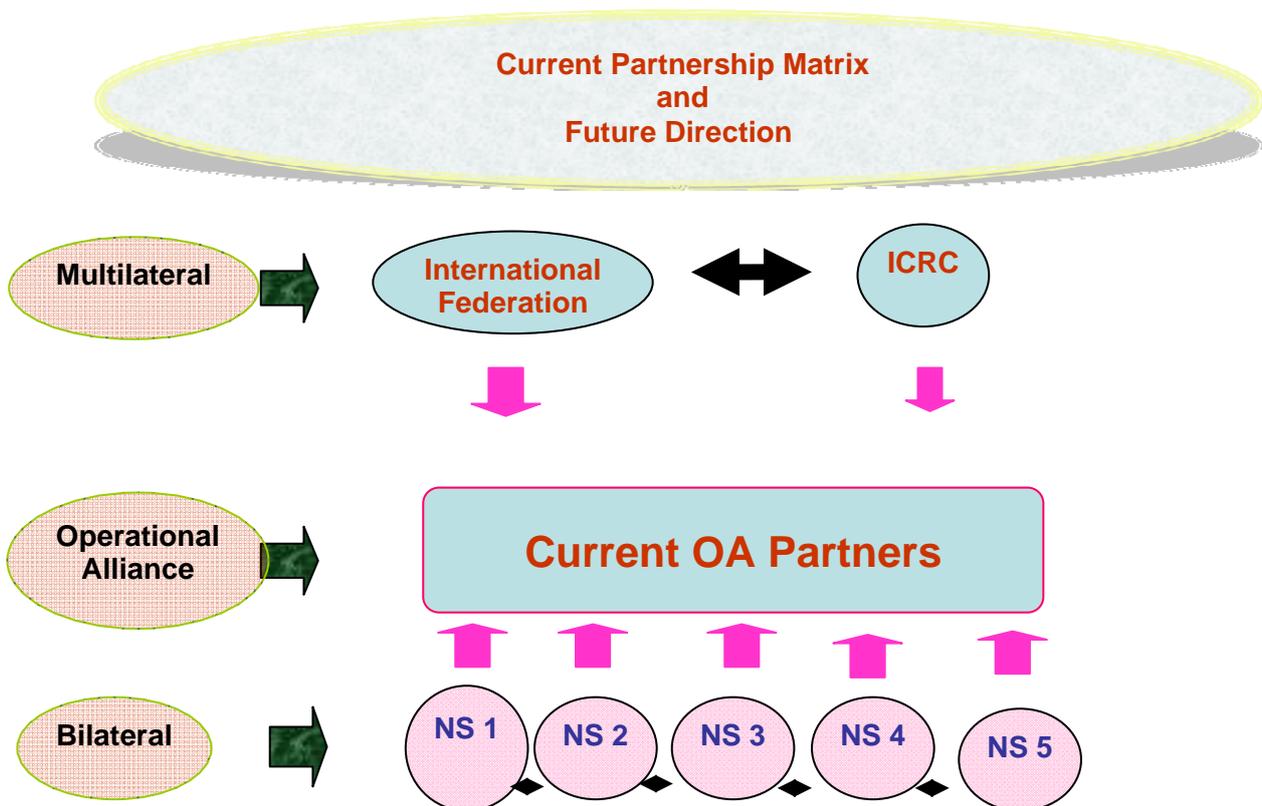
a) Technical programme support

The formidable capacity building challenges the Yemen RC faces, vis-à-vis its ambition and overall goal to scale up services in rural and semi-rural areas, requires strong cooperation with all partners. The International Federation will continue to support the Yemen RC to build up operational capacities at headquarters and branch levels working together with the National Society's programme coordinators at national level and branch/sub-branch managers and volunteers at governorate and district level. The technical support primarily focuses on building up capacities for planning/programming, coordination and resource development as well as systems and procedures including financial management systems.

b) Partnership development and coordination

The International Federation support in building up strategic and operational cooperation will continue to strengthen Yemen RC's efforts to broaden its partnership including Movement and non-Movement partners. In addition to coordination of support through multilateral channels (including through Annual Plans and/or Emergency Appeals), the International Federation plays a key role in facilitating the planning and management of other forms of partnership including programmes under the OA and the ICB initiative. The added value of the International Federation support through the various modalities of cooperation (multilateral, bilateral and OA) is that it promotes consistency and coherence based on the Yemen RC Strategy and the Fundamental Principles and the International Federation's Strategy 2020.

The International Federation, together with the Yemen RC and its partners, continues to work towards greater harmonization, showcasing the OA as an emerging model of partnership that can enable all partners to achieve greater impact working on the same set of objectives and systems/procedures.¹⁵



Current OA partners include National Societies of Denmark, Norway, Sweden as well as the International Federation. Current bilateral partners include the National Societies of Denmark, France, Italy, United Arab Emirates and Germany.

c) Representation and Advocacy

In addition to the focus on operational capacity building at headquarters and branch levels, the continuing advocacy by the International Federation on behalf of the Yemen RC plays a critical role in promoting the National Society as a result of which Yemen RC is improving its chances to attract increasing attention from donors and partners both within and outside the Movement.

- Piloting the OA model, the Yemen RC is raising its contribution towards community based health improvement. There is a distinct focus on DRR with an increasing advocacy to raise awareness on climate change and its humanitarian consequences.¹⁶
- The Yemen RC benefits from the ICB support as well as from the Department for International development (DfID)/ International Federation partnership.
- The National Society is currently chairing the Yemeni Humanitarian Forum consisting of 17 NGOs.

However, a lot more remains to be done. Whilst the humanitarian and social imperatives in Yemen require robust and sustained support, the overall allocation for human development does not go far enough to ensure needs-based planning to mitigate the situation.¹⁷ With the implementation of the revised statutes and the recommendations of the management review to improve capacities, the

¹⁵ One set of working principles, one plan, one set of objectives, one shared understanding of division of labour, one funding framework in which multilateral and bilateral funding can co-exist, one performance tracking system, one accountability and reporting mechanism

¹⁶ In June, 2009, the Yemen RC, in partnership with the Ministry of Water and Environment, hosted the First National Consultative Meeting on DRR and climate change, bringing together key line Ministries, UN Agencies and NGOs.

¹⁷ In 2006, the combined social spending for human development (including health and education) was only 7 % of GDP, much less than the share that goes for defence. One World Country Guide for Yemen, 2008.

International Federation will intensify its efforts to promote the Yemen RC as a strong civil society organization that can contribute to the improvement of the lives of the most vulnerable with increased partnerships, sustainable investment and impact.

d) Other areas

Strengthening the counterpart relationship at a higher level, the International Federation will enhance its engagement with the Yemen RC leadership contributing to the process of strategic thinking and management in the context of a holistic National Society development support. This will include the change management the National Society will address based on the revised statutes, the recommendations of the management review and the mid-term review of its strategy for 2007-2011.

Promoting gender equity and diversity

Consolidating the momentum towards increased awareness with regards to the need to improve gender balance, greater participation of women at all levels of programming and policy making will be taken more seriously as part of the implementation of the revised statutes. This will involve not only increasing the number of female volunteers and staff but also greater gender mainstreaming within the integrated planning and programming of CBHFA and DRR at the local level.

In view of the deeply rooted culture of gender bias against women in Yemen in terms of both socio-economic and political considerations, the continuing effort the Yemen RC makes to improve the balance will be based on operationalizing the Fundamental Principles and Values of the Movement in the context of increasing respect for human dignity. The International Federation supported programmes in 2010 and 2011 will enable the Yemen RC to consolidate and expand gender awareness and mainstreaming to achieve the objectives of improving gender balance in all aspects and at all levels.

Quality, accountability and learning

In-built in the planning, monitoring, evaluation and reporting system of the Yemen RC, the issues of quality, accountability and learning will be addressed with increasing focus as part of the International Federation support to enable the National Society to nurture the growing dynamics of partnership. This will be achieved through the ripple effects of various instruments including self-monitoring and evaluation by the Yemen RC, semi-independent monitoring and evaluation by the Yemen RC and its partners and an independent monitoring and evaluation including the final evaluation of the National Society's Strategy for 2007-2011. In each case, the learning will be filtered to improve the content and quality of planning and programming and will be shared within the National Society and among its partners.

To ensure continuity and sustainability and to address the concerns related to the limited capacities of the Yemen RC, the support plan for 2010 and 2011 will increasingly focus on:

- capacity consolidation with the required organizational change based on implementation of the revised statutes and the recommendations of the management review as well as the ICB initiative with increasing focus on local level improvement of structures and capacities.
- integrated planning and management leading to a more holistic National Society development where the branches will have more decentralized capacities to implement with the headquarters playing an effective role in terms of coordination and supervision.
- evaluation of the pilot CBHFA under the OA with a possibility to replicate the model in other parts of the country based on the results of the evaluations.

How we work

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

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