

# Plan 2009-2010



International Federation  
of Red Cross and Red Crescent Societies

## Yemen

### Executive summary

The Republic of Yemen, with an area of 530,000 km<sup>2</sup> and a population of about 21,000,000, is recurrently affected by both man-made and natural disasters including earthquakes, floods, epidemics and tropical/semi-tropical diseases. Yemen is the poorest county in the Middle East with up to 50 per cent of the people having no access to basic health services.

In recent years, public policy in Yemen has shifted towards a free market economy and the scope of public services has been considerably restricted. Although the shift is expected to foster a positive environment for development through various channels including the private sector and civil society, the short term impact has affected most of the people - especially the poor with very low coping capacities. In response to the historical and emerging challenges facing the country, the Yemen Red Crescent Society (Yemen RC) is expected to enhance its role, contributing to the improvement of lives and livelihoods in line with its strategy for 2007-2011 and the Global Agenda Goals of the International Federation. The National Society's strategy for 2007-2011 underscores the need to scale up services and capacities

The goal in 2009 and 2010 aims at consolidating the humanitarian and social development services of the Yemen RC - disaster management and health/social services with increasing focus on local level risk reduction and community based health development (CBHD). As a follow up to the amendment of the statutes and re-organization of the National Society, the process of organizational development will be intensified as a matter of on-going concern to improve performance and accountability with increased local level outreach and delivery capacities for scaling up.

The specific programme targets for disaster management include communities at risk and victims of localized disasters including flash floods, land slides, earthquakes, etc. The beneficiaries of health and care are communities with little or no access to basic health services including mothers and children. The focus on organizational development and capacity building will benefit Yemen RC leaders, managers, volunteers and staff in terms of building up skills and competencies to ensure effective service delivery. Dissemination of principles and values will be implemented mainly with the International Committee of the Red Cross (ICRC) and, to a certain extent, as an integral part of each programme supported by the secretariat of the International Federation especially at the level of trainings based on workshops and seminars. To achieve its objectives through increasing partnerships, the Yemen RC closely works with the International Federation, ICRC and the National Societies of Denmark, Norway, Sweden, France, Italy, Germany, United Arab Emirates and potentially Qatar as well as Ministries of Health, Water/Environment, Civil Defence, OXFAM, and Islamic Relief.

The total 2009-2010 budget is CHF 2,552,856 (USD 2,333,506 or EUR 1,626,023)<sup>1</sup>. [Click here to go directly to the attached summary budget of the plan.](#)

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<sup>1</sup> The total budget represents only the net amount requested through the Secretariat for 2009 and 2010. The net amount does not include the support the Yemen RC gets through other channels including operational alliance members; bilateral partners; the intensified capacity building support through the International Federation; ICRC support in its area of competence; and the expected support from the World Bank and other partners to consolidate and enhance disaster risk reduction at community level.

## Country context

Yemen is not only the poorest country in the Middle East but it is also located in a geologically active zone susceptible to earthquakes and cyclones in the Arabian Peninsula. The earthquake that hit the governorate of Dahmar in 1982 had killed more than 3,000 and displaced more than 5,000 people. Flash floods and land slides, and even a small tremor, can often cause adverse consequences due to the low level of preparedness including weak infrastructure and quality of housing often built from mud and easily collapsible material. The nature of settlement concentrated on mountain tops and or deep valleys, especially in rural areas, accelerates the speed and intensity of damage. In addition, lack of easy access to most of the villages along mountain ranges often makes it difficult to ensure rapid response in time of emergencies.

Inter-tribal conflicts are common some times with significant humanitarian consequences. The conflict in the northern governorate of Sadaah has been going on for several years with government forces fighting against opposition groups. Currently, the Yemen RC, together with the ICRC, is providing humanitarian services to the victims of the conflict including internally displaced persons (IDPs) estimated to be more than 60,000. Mediation efforts to date did not yield the desired results and the National Society is working to strengthen the local branch in Sadaah to ensure better preparedness and response. As a major migratory route, Yemen currently provides temporary refugee for up to half a million migrants crossing over from the Horn of Africa mainly from Somalia and Ethiopia.

The overall economic performance of Yemen is low. The country ranks 153<sup>rd</sup> out of 177 countries. In addition, in terms of gender development index, the country is at the very bottom of the list, ranking 93<sup>rd</sup> out of 93 countries which highlights the high degree of gender disparity in the overall development of the country.<sup>2</sup>

Rural–urban income disparities are rapidly rising with increasing rural poverty as well social and political tension. Poverty affects more than 40 per cent of the population in rural areas and about 20 per cent in urban areas. The fact that Khat<sup>3</sup> is increasingly grown at the expense of wheat compounds the problem of poverty and food insecurity. Shortage of domestic food production and increasing prices of consumables are sparking social unrest and tension. 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 agriculture<sup>4</sup>.

Yemen has one of the highest population growth rates of about three per cent due largely to poverty and cultural attitudes, segregation between the sexes and early marriage. With an overall literacy rate of about 50 per cent, up to 46 per cent of primary school age children do not have the opportunity to go to school. The rate of enrolment for girls is much lower, standing at 30 per cent in most of the rural areas. With an average fertility rate of over six children and only about 16 per cent of the births attended by a trained health worker, Yemen has a high maternal mortality rate. Per capita drinking water is just two per cent of the global average with very low sanitation especially in the rural areas. Malaria is a major threat that affects rural communities in several parts of the country with over 800,000 cases reported annually.<sup>5</sup>

Communicable diseases and epidemics are common especially along the coastal areas. The resurgence of polio has spurred the government to undertake large scale immunization campaigns in which Yemen RC volunteers are actively involved in the process of monitoring. The national statistics compiled by the Ministry of Health in 2004 indicates the presence of 2,400 registered cases of HIV/AIDS, but studies suggest that for every reported case, 20 to 30 remain unreported.

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<sup>2</sup> United Nations Development Programme, Human Development Report 2005.

<sup>3</sup> A green leaf which most people in Yemen chew despite or because of its mild narcotic and addictive effect.

<sup>4</sup> World Bank Report

<sup>5</sup> Arab Human Development Report, 2005, One World Guide.

## Key statistical indicators<sup>6</sup>

Indicators	2006	Remarks
Population (millions)	21.2	Annual rate of increase standing at 3 %
Life expectancy at birth	62	
Under five mortality rate	100 per 1,000 live births	Improvement from 139 in 1990
Total adult literacy rate	52	Literacy for women as low as 30 %
Household income share (1995-2004 - lowest 40 %)	20 %	A system of resource distribution disfavours the majority
Household income share (1995-2004 - highest 20 %)	41 %	A system of resource distribution favouring the few
Gross domestic product (GDP) per capita (US\$)	960	45 % of the population living on less than two US\$ per day

The impact of disasters, health emergencies and epidemics often turns out to be catastrophic. Local coping capacities are low due to lack of resources including adequate awareness and knowledge. 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 is well placed to contribute more significantly to the national efforts to develop a more comprehensive disaster policy and programming working with governmental organisations and NGOs, as well as communities. Currently, the National Society chairs the Yemeni National Humanitarian Forum with a membership of 17 local and international NGOs working in disaster management and health. The National Society has also initiated a process of development of contingency plans in cooperation with relevant organizations.

## National Society priorities and current work with partners

The Yemen RC's strategy for 2007-2011 establishes a vision to scale up services and capacities in line with the Global Agenda Goals of the International Federation and the Millennium Development Goals of the United Nations. The overall goal is to enhance service delivery with increased outreach, quality and impact in a process that adequately integrates organizational development and capacity building at all levels. Aware of its limited capacities relative to its ambition to scale up services, the National Society is increasingly focusing on achieving progress through partnerships. Within the context of a well functioning National Society, the key priorities of the Yemen RC include development of human resources including leadership, management, volunteers and staff, financial/material resources as well as systems and procedures. Networking, learning and knowledge sharing also constitute some of the key elements that underpin the process of programming and partnership development.

With an increasing programme portfolio, the Yemen RC is a major player in the management of emergencies working with the ICRC in the provision of humanitarian assistance to people affected by conflicts and with the International Federation and other partners in assisting affected people of natural disasters. The National Society operates a network of clinics in its branches (currently 15) with a focus on primary health care including mother and child health care. CBHDP is emerging as a flagship programme based on the new operating model of operational alliance (OA). The National Society also focuses on promotion of the Fundamental Principles and Values including international humanitarian law (IHL) in cooperation with the ICRC and organisational development/capacity building in cooperation with the International Federation and other partners.

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<sup>6</sup> Compiled from United Nations Children's Fund (UNICEF) and World Bank Reports 2005, 2006.

## Partner Mapping

Partner	Programme Support
International Federation	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 CBHDP supported through the OA
ICRC	Disaster management (related to conflicts) and dissemination of the Fundamental Principles and Values as well as IHL
Danish Red Cross	Organisational development and capacity building through the International Federation, in addition to being an OA partner closely working with the National Society in focusing on CBHDP
Norwegian Red Cross	Disaster management, health and organisational development through the International Federation, in addition to being an OA partner closely working in focusing on CBHDP
Swedish Red Cross	Disaster management, health, organisational development, and coordination through the International Federation, in addition to being an OA partner closely working in focusing on CBHDP
French Red Cross	Bilaterally working with the Yemen RC in health and water and sanitation
Italian Red Cross	Bilaterally working with a focus on livelihoods improvement and health promotion in the Island of Socotra
United Arab Emirates Red Crescent	Bilaterally working with a focus on health and social services as well as occasional distribution of relief supplies
German Red Cross	Bilaterally supporting the Yemen RC in rehabilitation of health facilities
OXFAM	Disaster management and water and sanitation
Islamic Relief	Disaster management
Ministry of Health	Health and care
Civil Defence	Disaster management
UNICEF	Health and social services.
United Nations Population Fund (UNFPA)	Health (family planning)

With the launch of its five year strategy for 2007-2011, the Yemen RC has been increasingly interested in building up broad-based partnerships. In addition to the International Federation and the ICRC, seven National Societies including the NSs of Denmark, France, Italy, Qatar, Norway, Sweden and United Arab Emirates have signed the memorandum of understanding (MoU) confirming their commitment to supporting the implementation of the National Society's strategy.

The Movement partners work with the Yemen RC in three different ways, by being multilateral partners (the International Federation and the ICRC), bilateral partners (French RC, Italian RC, German RC, United Arab Emirates RC and potentially the Qatar RC) and OA partners (Danish RC, Norwegian RC, Swedish RC and the International Federation).

The process of partnership building is gaining momentum in both qualitative and quantitative aspects. More partners, including the German RC, are expected to formalize their partnership commitment including the signature of the MoU. Non-Movement partners, including the UN agencies, are also interested in forging partnerships with Yemen RC although the National Society is cautiously moving in recognition of its limited capacities to implement programmes.

Qualitatively, the Yemen RC is one of the four National Societies currently piloting the new operating model of OA with stronger unity of purpose and alignment of procedures and systems. The OA in Yemen is based on a process of partnering for community level impact focusing on CBHDP, as a flagship programme, working with rural and semi urban communities.

The OA Agreement, signed in May 2008 by the Danish RC, Norwegian RC and Swedish RC as well as the International Federation, aims to significantly scale-up the capacities/programmes of the National Society to deliver crucial health services to vulnerable communities. The CBHDP will be implemented initially as a two year pilot model in two districts reaching up to 10,000 beneficiaries. Based on the results of the pilot phase, the Yemen RC will replicate an improved model and scale-up community based health services in other parts of the country with an increasing number of OA partners from within and outside the region.

Effective implementation of CBHDP requires an extended outreach in terms of grassroots structures and delivery capacities. The Yemen RC, using the intensified capacity building (ICB) support from the International Federation, will address the challenge of building up a strong local level network based on sub-branch development at district and local levels. This is expected to improve the overall capacity of the National Society which, in turn, will help consolidate and expand the partnership process with increased progress and success towards scaling up of services.

## Secretariat supported programmes in 2009-2010

The logframes on the respective Global Agenda Goals are available at the country representation upon request (please see the contact details in the end of the plan).

### Disaster Management

#### a) The purpose and components of the programme

<b>Programme purpose</b>
<b>To reduce the number of deaths, injuries and impact from disasters.</b>

The disaster management programme budget is CHF 626,845 <sup>7</sup>(USD 572,984 or EUR 399,264).

<b>Programme component: Disaster Management Planning</b>
<b>Outcome: National Society capacity to plan, implement, monitor and report on disaster preparedness, response and recovery is improved.</b>
This component aims to strengthen the overall disaster management planning and implementation by the Yemen RC in a way that ensures developing and implementing disaster management related strategic and operational plans; strengthening the disaster management department at the headquarters and the disaster management focal point structures at branch level; increasing National Society role in the coordination of contingency plans; and evaluating and knowledge sharing focusing on disaster management planning and implementation.
This will be based on review and consolidation of the existing disaster management strategies and plans. The consolidated strategies and plans will be disseminated internally among Yemen RC volunteers and staff and externally to the relevant communities and partner organizations.

<b>Programme component: Organisational Preparedness</b>
<b>Outcome: Based on decentralized capacity and rapid exchange of information, the contribution to the reduction of deaths is increased.</b>
The implementation of this component will focus on improving the quality and diversity of staff and volunteers involved in disaster management, training/re-training of national/local level intervention teams and ensuring better preparedness linked to effective response including communications network and building up basic preparedness stocks in selected branches located in highly disaster prone governorates.

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<sup>7</sup> The Yemen RC is developing a proposal on local level risk reduction and community development expected to be supported by the World Bank. The disaster management budget will be substantially increased as and when this materializes.

**Programme component: Community Preparedness and Disaster Risk Reduction<sup>8</sup>****Outcome: Capacities to plan and manage disaster risk reduction (DRR) activities at the local level are increased.**

This component will focus on risk reduction at the local level by training up to 250 DRR trainers who will, in turn, train up 1,500 vulnerability and capacity assessment (VCA)/DRR facilitators at the local level. In addition, through the component, risks will be identified and micro projects that can reduce risks at the local level will be developed and implemented.

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

This component aims to enable the Yemen RC to improve the quantity and quality of disaster response increasing its contribution to the overall DRR efforts based on integrated response plans that also links to preparedness and recovery. It also aims to achieve greater quality standards based on training of staff and volunteers on Humanitarian Charter and Minimum Standard in Disaster Response (SPHERE) and other skills that can enhance quality control.

**b) Profile of target beneficiaries**

The disaster response component will enable the Yemen RC to respond to the needs of people affected from non-conflict disasters often caused by earthquakes, floods, land slides, etc. On average, the National Society annually caters to the needs of about 1,500-2,000 beneficiaries often representing up to 7-10 % of the affected population in the context of localized disasters. The assistance package consists of non-food items including tents, blankets and kitchen sets to enable the beneficiaries to cope with the immediate effects including the ones of displacement.

In addition to the training of disaster management intervention team members at national and branch level, the organizational preparedness component will establish basic preparedness stocks in four governorate branches which can benefit up to 250 families or 1,500 individual beneficiaries with a provision of non-food items including tents, blankets and kitchen sets.

The community preparedness and disaster risk reduction component will benefit up to 60,000 people through DRR micro projects designed to mitigate the effects of environmental degradation, floods, landslides, etc. It will also raise awareness and knowledge regarding risk reduction by training up to 250 DRR trainers at national/governorate level and up to 1,500 VCA/DRR facilitators at local/community level.

The beneficiaries will play a significant role in the planning and implementation of the priorities on community preparedness and DRR. They will drive the process starting from the VCA stage to the definition of priorities, programme design, implementation and evaluation.

**c) Potential risks and challenges**

Recurrent emergency assistance has the potential to generate dependency. The community preparedness and DRR component of the programme is designed in such a way that the specific micro projects focus not only on risks and disasters but also on development of projects including income generation components to improve the basis for self reliance and sustainability. The fact that the beneficiary communities themselves drive the local level DRR activities will enhance their capacity to develop local level resources including knowledge resources to overcome the danger of dependency and improve the prospect for sustainability.

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<sup>8</sup> Some of the activities, target beneficiaries, and potential risks and challenges mentioned under the community preparedness and DRR component are not added in the budget, as the World Bank proposal is pending approval.

## 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 487,065<sup>9</sup> (USD 445,215 or EUR 310,233).

#### **Programme component: HIV/AIDS**

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

The HIV/AIDS component will be implemented to enhance awareness at all levels (headquarters and branches) and consolidate the overall capacity of Yemen RC staff and volunteers to engage in care and support and contribute to the fight against stigma to protect the dignity of persons living with HIV/AIDS.

#### **Programme component: Community Based Health and First Aid**

**Outcome: Community health achieved through increased community based health development and first aid is improved.**

The community based health and first aid component will focus on the establishment of first aid facilities and services in schools with Red Crescent clubs; training of trainers on community based first aid (CBFA); development and implementation of specific interventions to promote road safety in inter-city driving and provision of technical/managerial support to the OA based CBHDP in Hajja and Hoidedah.

#### **Programme component: Psycho-social Support Programme**

**Outcome: Integration of health services during emergencies - including psycho-social support and prevention and control of epidemics during disasters - is improved.**

This component aims to promote greater mainstreaming and integration of the psycho-social support programme (PSP) in training and service delivery (CBHDP, first aid, HIV/AIDS). It also focuses on development and provision of counselling services as part of emergency health services and specific PSP interventions targeting vulnerable groups including orphans, street children, refugees and migrants.

#### **Programme component: Mother and Child Health Promotion, Malaria Prevention and Polio Eradication**

**Outcome: Mother and child health (MCH), vaccination, nutrition and immunization are improved.**

The implementation of this component will be based on review and strengthening of Yemen RC's network of clinics with increasing focus on prevention and training/re-training of staff volunteers to enable them to contribute more effectively to the MCH, polio eradication campaigns and malaria prevention programmes.

### b) Profile of target beneficiaries

The HIV/AIDS component strengthens Yemen RC's capacities with more trained staff and volunteers in each branch to promote prevention of HIV/AIDS through increased information, communication and education reaching up to 30,000 beneficiaries in terms of raising awareness. Yemen RC volunteers and staff will also provide care and support including advocacy against discrimination serving and reaching up to 3-5 per cent of persons living with HIV/AIDS in each of the governorates with large populations including Sana'a, Ibb, Taiz, Hoidedah, Hajja, Dahmar, and Aden.

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<sup>9</sup> The health and care budget does not include the specific allocation, through the OA, to support the Yemen RC's community based health development programme.

The community based health and first aid component is expected to enable the Yemen RC to establish first aid training and services in up to 150 school clubs which will provide first aid services to the school communities. The road safety activities will contribute to the prevention of loss of life and properties with increasing reduction of accidents in inter-city driving. The OA based CBHDP in Hajja and Hoidedah aims to serve up to 10,000 beneficiary communities providing vital services including health education, mother and child health, water and sanitation, literacy, micro-projects for food security, etc. The development and implementation of the programme is based on mobilization, orientation and engagement of a new cadre of grassroots volunteers.

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

The MCH promotion, polio eradication and malaria prevention component aims to reach/serve up to 30,000 mothers and children. The focus in 2009 and 2010 will enable the Yemen RC to consolidate and enhance its role in this respect and strengthen the contribution its makes to the polio eradication and malaria prevention involving committed and well trained National Society volunteers and staff.

### **c) Potential risks and challenges**

The Yemen RC is largely dependent on external support for the increasing contribution it makes in health and social services as well as in other areas of engagement. This poses a challenge in terms of sustainability and increasing community expectation. The new efforts started through the OA based CBHDP provides a stronger mechanism for effective community participation and ownership at the level of programme design, execution and supervision. This is expected to create an environment where the Yemen RC is no more perceived as a donor but a facilitator of community driven initiatives. To improve the overall prospect for sustainability, the National Society's strategy for 2007-2011 focuses on building capacities, including local resource mobilization capacities, as much as it emphasizes scaling up of services.

## **Organisational Development/Capacity Building**

### **a) The purpose and components of the programme**

<b>Programme purpose</b>
<b>To increase local community, civil society and Red Cross/Red Crescent (RC/RC) capacity to address the most urgent situations of vulnerability.</b>

The organisational development/capacity building programme budget is CHF 752,015 <sup>10</sup>(USD 687,400 or EUR 478,991).

<b>Programme component: National Society Leadership and Management Capacities</b>
<b>Outcome: The revised National Society statutes are implemented with an organizational reform leading to improved leadership and management and increasing number of members at all levels.</b>
This component will focus on implementation of the outcome of the National Society's statutory amendment and the overall organization/management review leading to improved leadership and management with clearly defined functions, structures and role/responsibilities. It will also enable the Yemen RC to reactivate/expand membership volunteering based on effective systems and procedures and undertake the mid-term review of its strategy 2007-2011, taking stock of what has been achieved and what remains to be done.

<sup>10</sup> The organisational development/capacity building budget does not include the ICB budget support through the International Federation which focuses on development of outreach with a network of sub-branches to scale up services at the local level including DRR and community based health.

**Programme component: Well Functioning National Society**

**Outcome: National Society performance is increased through scaling up services and capacities based on skilled human resources including volunteers and staff; and effective/efficient systems and procedures including financial management procedures.**

This component aims to enhance Yemen RC capacities to develop and implement efficient human resource development and utilization mechanisms including fair and transparent recruitment systems with clear job descriptions and reasonable remuneration schemes. It also addresses the need for up to date systems and procedures including financial management systems as well as administrative, logistics and communication capacities.

**Programme component: Financial Sustainability**

**Outcome: The National Society's capacity towards covering core costs as a matter of priority and scaling up resource mobilization through increasing partnerships is improved.**

With a view to increasing by up to 10 per cent of the resources from domestic sources, the implementation of this component will enable the Yemen RC to develop and implement a national resource development strategy/plan with a focus on local resource mobilization. It will also focus on training of leaders, managers, staff and volunteers on the specific skills and competencies required for effective resource development including membership fees, government subsidies, the private sector, etc. In addition, it will work on networking, promotion of good practices, learning from the experiences of other organizations and peer to peer support among Yemen RC branches.

**Programme component: Coverage of Grassroots Units**

**Outcome: Services will be scaled up and capacity building enhanced at the local level.**

This component will enable the Yemen RC to develop increased outreach and capacity at the local level to scale up services. This will be based on ICB including the development of sub-branches in consultation with community leaders and local authorities, training of volunteers at the local level and technical/material support based on needs and capacities.

**Programme component: Capacities for Programme Development and Management**

**Outcome: Capacities to plan, monitor, evaluate and report in an integrated approach is improved; including gender balance and youth participation with increasing partnerships to scale up services and capacities.**

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 activities including training of staff and volunteers on planning and management and on how to work with communities.

**b) Profile of target beneficiaries**

The organisational development/capacity building programme components described above focus on enhancing the possibility and capacity of the Yemen RC to work towards the characteristics of a well functioning National Society with solid structures and systems, and effective development and utilization of leadership, management, staff and volunteers as well as other resources and capacities. Ultimately, the extent to which this is achieved will determine the degree to which the National Society 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**

The main risks include a possible de-linkage between institutional and operational (programmatic) dimensions with an increasing tendency to invest more on programmes and less on organisational development/capacity building priorities. This will be managed through a more integrated planning and management process that increases the symbiotic relationship between the organisational development/capacity building components/outcomes and the programme components/outcomes. The CBHDP through the OA embodies an inbuilt organisational development/capacity building component which focuses on development of a new cadre of community volunteers. The same approach defines the linkage between the DRR activities at the local level and the development of grassroots volunteers who provide the engine to ensure genuine community participation and ownership.

## Principles and Values

The ICRC plays a key role as a primary partner for the Yemen RC in the implementation of the dissemination of Fundamental Principles and Values of the Movement including IHL. The limited support the International Federation provides in this respect is reflected in the integration of the basic dissemination of the Fundamental Principles and Values of the Movement in other programmes supported by the International Federation. This is based on a brief introduction of the Principles and Values as an integral part at the beginning of every seminar/workshop organized under disaster management, health and care, as well as organisational development/capacity building.

### **b) Profile of target beneficiaries**

The introduction of the Fundamental Principles and Values addresses the same target beneficiaries who benefit from the seminars/workshops organized under the different programmes of the Yemen RC. Ultimately, the possible behavioural change generated through the dissemination of the Fundamental Principles and Values will be reflected in how the Yemen RC leaders, managers, staff and volunteers carry out their duty not only in service delivery but also in the process of organisational development/capacity building.

### **c) Potential risks and challenges**

The relative roles played by the ICRC and the International Federation in the provision of support to the dissemination of the Principles and Values is based on clear understanding on the division of labour as outlined above. This underscores the fact that the dissemination of the Fundamental Principles and Values is adequately addressed and avoids potential risks in terms of duplication of efforts.

## Role of the Secretariat

The secretariat's budget for its support role is CHF 686,930 (USD 627,907 or EUR 437,535).

### **a) Technical programme support**

The programme coordinator and other staff within the country representation in Yemen will provide technical support in the planning, implementation, reporting and evaluation of all the International Federation supported programmes working together with the Yemen RC programme coordinators at national level and branch managers at the local level. The support will also include the development and effective implementation of human, material and financial resources as well as systems and procedures including financial management systems. The head of representation, working as a counterpart to the secretary general of the National Society, will provide the necessary leadership and management support to ensure that the programmes are effectively implemented and generate the expected results. The representation will support the National Society not only in terms of planning and management of the regular core programmes but also in the implementation of the change management the National Society will address as a follow up to the statutory amendment, overall management review and the mid-term evaluation of the National Society's strategy for 2007-2011.

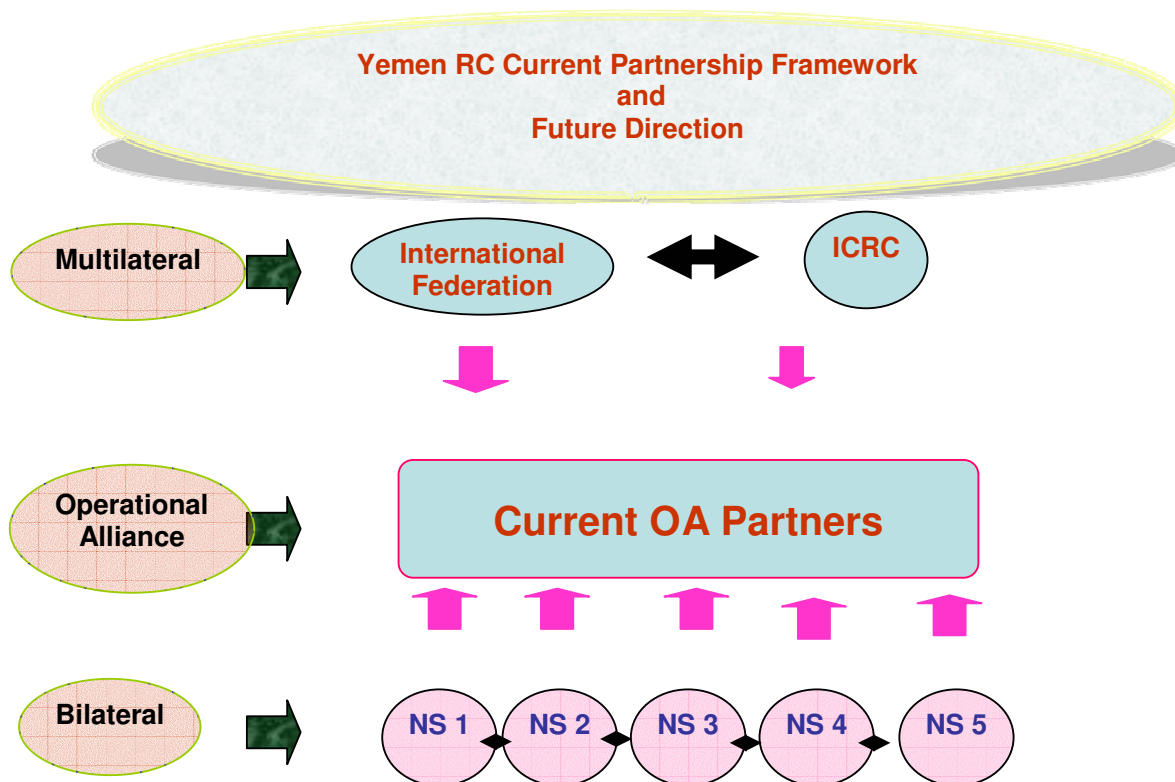
### **b) Partnership development and coordination**

The International Federation support to the Yemen RC focuses on forging and facilitating strategic and operational partnerships with Movement and non-Movement partners. Over the years, it has been actively facilitating:

- the development and implementation of plans/appeals in support of the Yemen RC on annual and bi-annual basis;
- the development and endorsement of the general MoU which has been signed by seven National Societies in addition to the International Federation and the ICRC, confirming their commitment to supporting implementation of the Yemen RC's strategy for 2007-2011;
- the evolution and implementation of the new operating model of OA supported by the National Societies of Denmark, Norway and Sweden working closely together with the Yemen RC as OA partners;
- the development of the ICB plan which has been approved by the International Federation qualifying the Yemen RC to benefit from the ICB support for three years.

Playing a key role as an architect of partnerships, the International Federation provides coordination and management support to the Yemen RC and its partners to improve consistency and coherence for all programmes implemented through multilateral channels, the new operating model of OA, and bilateral arrangements.

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 operational systems/procedures elaborated under the principles of seven ones<sup>11</sup>. The dynamic transformation of the current framework of partnership, with increased convergence towards mainstreaming the OA, is depicted as follows. This represents an important area of strategic and operational focus to enhance consistency and coherence in terms of planning and to ensure scaled up Movement action and impact in terms of service delivery.



Although the OA defines the road-map for the future, its contribution to the total partnership budget in 2008 accounts for no more than 10 per cent.

### c) Representation and Advocacy

As poverty and vulnerability are deep rooted in the country with adverse humanitarian and social consequences, the International Federation considers Yemen as an important priority that requires comprehensive support not only in terms of programme and capacity building but also in terms of representation and advocacy. The continuing advocacy by the International Federation on behalf of the Yemen RC has helped to put the National Society on the 'map' as a result of which it is receiving increasing attention from donors and partners from both within and outside the Movement. The Yemen RC is selected as one of the few National Societies where the new operating model of OA is being piloted. It has also been selected to benefit from the ICB support through the International Federation and the Department for International Development (DFID)/International Federation partnership.

<sup>11</sup> 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

With the implementation of the various initiatives in line with the National Society's strategy for 2007-2011, the International Federation will continue to position and promote the Yemen RC as one of its priorities in the Middle East and North Africa (MENA) zone where collective focus and enhanced investment will enable the National Society to scale up its capacities and services in line with the Global Agenda Goals of the International Federation.

#### **d) Other areas**

In addition to the provision of technical programme support, coordination of partnerships as well representation and advocacy support, the International Federation provides critical leadership/management support facilitating a process of organizational change in the overall effort being made to lift up the National Society's capacity to a level that matches its ambition to scale up services. This supports the overall National Society performance standards based on increasing capacity, commitment and credibility.

## Promoting gender equity and diversity

As a reflection of the socio-cultural tradition which does not favourably consider participation and contribution of women in certain aspects, participation of women within the Yemen RC policy making and programming process is quite low. Only one female member is represented at the national board which consists of nine members. The profile of employed staff and volunteers at the headquarters also reflects a situation where women do not hold key positions. More or less the same status prevails at branch level.

On the other hand, the Yemen RC strategy underscores the importance of gender equity and diversity. The National Society is stepping up efforts to overcome the challenges related to the participation of women at all levels. With gender focal points nominated and trained at headquarters and branch levels, a series of efforts are being made to raise awareness as regards to the need to improve gender balance. An increasing number of National Society policy makers, staff and volunteers at headquarters and branch levels as well as other participants from Ministries and NGOs have benefited from the gender promotion and awareness efforts coordinated by the Yemen RC.

Participants of the gender awareness workshops/seminars have, at various times, submitted to the national board a series of recommendations requesting for specific guidelines with set quotas (to achieve up to 25-30 per cent of female representation as a short term target) in the membership/volunteer and staff recruitment process. The next step will focus on consolidation of the awareness efforts leading to increased integration and mainstreaming of gender aspects in the planning and implementation of the National Society's programmes.

The International Federation supported programmes in 2009 and 2010 will enable the Yemen RC to consolidate and expand these efforts to achieve the objectives of improving gender balance in all aspects and at all levels.

In view of the deeply rooted culture of gender bias against women in terms of both socio-economic and political considerations, the continuing effort the Yemen RC makes to improve the balance goes a long way in operationalizing the Fundamental Principles and Values of the Movement with increased respect for human dignity.

## Quality, accountability and learning

In addition to the routine monitoring and reporting as part of the implementation and management arrangements, the effectiveness and impact of the programmes will be periodically monitored and evaluated through different but complementary means including the following:

- Self monitoring and evaluation by the Yemen RC to be conducted every six months with a view to tracking major trends in progress and challenges faced in the implementation. The conclusions from this will enable the National Society and its partners to take the necessary corrective actions in case of need for adjustment.
- Semi-independent monitoring and evaluation by the Yemen RC and participating National Societies to be conducted once a year to review intermediate outcomes in view of the expected

results and indicators. The conclusions from this will enable the Yemen RC and its partners to ensure the steps required in case of need for a shift of emphasis.

- Independent monitoring as part of the mid-course evaluation of the National Society's strategy for 2007-2011 to be conducted by external assessors. The evaluation will be conducted in June/July 2009 and will focus on the overall achievements made and challenges faced in the implementation of the National Society's strategy between 2007 and 2009. The recommendations from this will help to improve the planning and implementation of the National Society's strategy in the subsequent years based on lessons learnt.

The Yemen RC faces a number of continuity and sustainability challenges due to the relatively low capacities in all aspects including human, material and financial resources as well as systems and procedures. The support plan for 2009 and 2010 is based on a better prospect for quality and sustainability with the main enabling features including the following:

- Enhanced capacity consolidation and development based on implementation of the outcomes of the National Society's organization/management review and the ICB support to enable the Yemen RC to develop its outreach including development of sub-branches and local level units to scale up services.
- Integrated planning and management based on symbiotic relationships between the organisational development/capacity building components/outcomes and the programme components/outcomes.
- OAs anchoring a new spirit of cooperation leading to stronger unity of purpose and procedures with sustained commitment from the Yemen RC and its partners.
- Increasing use of participatory learning approaches (PLA) in the development of community risk reduction and community based health services, as flagship programmes for scaling up.<sup>12</sup>

The lessons learnt in the implementation of the programmes including the experiences from the specific initiatives through the OA and the ICB, will be analysed and shared both within the National Society and externally among the Yemen RC's partners. Based on the results of reviews and case studies, the Yemen RC will replicate the successful models with increased outreach, quality and impact.

How we work	
<p>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".</p>	<p><b>Global Agenda Goals:</b></p> <ul style="list-style-type: none"> <li>• Reduce the numbers of deaths, injuries and impact from disasters.</li> <li>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</li> <li>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</li> <li>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</li> </ul>
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<sup>12</sup> The PLA approach helps to ensure ownership of the primary stakeholders (beneficiaries) with an increasing role not only at the level of priority identification but also at the level of implementation, monitoring and evaluation.

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