´ JAN 2018 /



Photo: Giles Clarke/UNOCHA

# **MULTI-SECTOR**

# INTEGRATED RESPONSE

The 2018 HRP includes integrated multi-sector response plans to address intensified risk of famine, disease outbreaks and protracted displacement to address the inter-sector life-saving and livelihood needs in a holistic and complementary manner for a more effective response.

## Multi-sector integrated response

The 2018 HNO inter-sector needs analysis for famine prevention, cholera, and for displacement/ IDPs has identified the most severely affected districts in the country. These districts will be prioritized for multi-sector integrated response efforts by relevant clusters. Based on geographic level prioritization, targets will be identified at household, individual, community, and health facility level, depending on the type of response in the multi-sector response package. This aims to address the priority needs of the different target groups within an identified geographic area to maximize synergies and ensure complementarity among the sector interventions for a more effective response. This will be supported by integrated assessment and monitoring tools.

## Famine prevention

There has been a clear shift in Yemen towards integrated (multi-sectoral) programming in 2017 following the Integrated Food Security Phase Classification (IPC) results on acute food insecurity in Yemen in March 2017. As the risk of famine rose, there was widespread realization of the complexity of the situation that is not only related to malnutrition and food insecurity, but also to underlying causative factors emanating from other sectors. Subsequently, the WASH and Health were also integrated due to the criticality of these sectors in any famine response actions in Yemen. Advocacy was stepped up on the need for enhanced collaborative strategies which culminated in integration being an integral theme for the 2017 HPF Standard Allocations.

During the first half of 2017, an initial list of 95 districts were identified as high priority districts based on international thresholds and cut-off points from all the four clusters. Towards the end of 2017 based on new data, an additional 12 districts were added by the WASH, Nutrition, Health, and FSAC clusters to the initial list of 95 districts resulting to an expanded list of 107 districts at risk offamine. These 107 districts have been earmarked as requiring integrated programming by the four clusters in 2018. Nonetheless, based on the current resource shortfalls, capacities of partners, access challenges, almost collapsed systems, the four clusters are kickstarting the integrated famine prevention

model of programming in an initial 27 districts<sup>22</sup>. This list will be expanded gradually to accommodate all the 107 districts during 2018 contingent on successful implementation, appropriate funding levels and building on lessons learnt in the piloting phase.

A standard integrated programming response package will be implemented in the 27 districts by the four clusters at the household, health facility (HF), and community levels. It is noteworthy though that varying levels of integration will also be ongoing in all the other remaining 80 districts (at least either two or three clusters integrated responses contingent on the context).

Participating partners are mindful of potential constraints in rolling out the integrated package. These include different priorities by authorities, lack of guidance available

### At the household level the package will include

- emergency food assistance (through either general food distribution, cash or voucher transfers);
- provision of emergency agricultural (seeds, farm implements etc.), livestock (feed blocks, feed concentrates, dry fodder, restocking etc.) and fishery inputs support (nets, cooler boxes etc.);
- income generating activities;
- implementation of the minimum health service package (pre-natal and post-natal care, messaging, child vaccination, response to outbreaks, management of sick);
- providing consumable hygiene kits, jerry cans, ceramic filters;
- providing sustainable access to safe potable drinking water;
- latrine construction through community mobilization approaches;
- screening and referral of children with severe or moderate acute malnutrition and PLW with acute malnutrition.
- The possibility of providing the FSAC and WASH components through a multi-purpose cash grant will be explored.

# DISTRICTS AT HEIGHTENED RISK OF FAMINE 27 districts initially targeted with integrated famine response, out of 107 districts at heightened risk of famine

# At health facility level the package will include

- treatment of the acute malnutrition in children and women through the community management of acute malnutrition;
- targeted food distribution to care givers of malnourished children, primary and secondary health care;
- ensuring sustainable access to safe water and functional and appropriate sanitation services;
- maintenance of WASH services;

Source: HNO, December 2017

 distribution of the consumable hygiene kits and ceramic water filters to caregivers of malnourished children along with health and hygiene education.

### At community level the package will include

- mother to mother support groups for the behavior change communication on infant and young child feeding;
- blanket supplementary feeding programmes;
- sustainable access to safe drinking water and appropriate sanitation solutions (including solid waste and sewage services);
- community-based health interventions;
- mass livestock vaccinations;
- basic agro processing (e.g. sesame oil extraction), rehabilitation and resilience building through cash for work, food for work, cash for assets, food for assets schemes;
- community plots.

internationally on the opportunities for integration between the clusters within the standard integrated response package, lack of existing integrated monitoring and reporting tools, community engagement strategy, protection mainstreaming in all aspects of the integrated model, strengthening referral systems between the clusters, designing capacity building package for integrated response, defining harmonized beneficiary selection criteria for integrated response at household and community level; and development of the road map to increase sustainability of WASH services in health facilities, among others. It is envisaged that the piloting will provide a platform and opportunity to showcase how the aforementioned potential challenges can be surmounted within the Yemeni context.

# Multi-sector response to idps/returnees/host communities

This Response Plan outlines multi-sector response to IDPs/returnees/host communities in 61 high priority districts where the highest inter-sector needs severity scores converge<sup>23</sup>. While all IDPs/returnees/host communities are affected by the crisis and need some sort of humanitarian assistance, the most severe inter-sector needs converge mostly in Governorates that have districts with ongoing conflict, and districts that are hosting highest proportion IDPs and returnees.

The multi-sector response aims to provide targeted assistance to address specific needs and vulnerabilities taking into account duration of displacement and living conditions, in a manner that ensures their survival, prevents erosion of assets and upholds their dignity and self-reliance. The response will be guided by the multi-sector integrated minimum assistance package for the most vulnerable IDP/returnees and host community, which includes Shelter/NFI/CCCM, food security and agriculture/livelihood, WASH, health, nutrition, education and protection services.

The interventions in the minimum assistance package<sup>24</sup> encompass a multi-sector minimum set of emergency assistance for newly displaced including distribution of life saving food and non-food items. The multi-sector response further expands to a more medium -term support that aims at harnessing and strengthening the resilience and self-reliance of both IDPs and their host communities. This includes enhancing access to livelihoods and income generating activities to prevent further depletion of assets and to relieve the burden on host communities including through Cash for Work (CFW), Cash for Assets (CFA), and Food for Assets (FFA) activities.

As part of ensuring enhanced access to basic services including health, WASH and education, efforts will be scaled up to support existing public services in areas of displacement. Activities in IDP Hosting Sites will also shift to more targeted support to identify sustainable shelter solutions and improving basic facilities including WASH services. People living in insecure housing arrangements will be assisted by upgrading safety and habitability of spaces through cash/vouchers for shelter upgrades and rental support. Such a holistic approach aims to preserve the dignity of IDPs; improve their lives and self-reliance; while also benefiting their host communities.

The Shelter/NFI/CCCM, Health, Nutrition, Protection, Food Security and WASH Clusters, as part of an effort to systematize a more collaborative approach to assistance provision are piloting an 'integrated response' in IDP Hosting Sites. A pilot project targeting 44 districts promotes a collaborative beneficiary engagement, gap identification and response methodology in IDP Hosting sites. This will ensure that Clusters holistically and collaboratively work together to develop a response that targets the improvement of the overall wellbeing and resilience of the community and results in decreased vulnerability<sup>25</sup>.

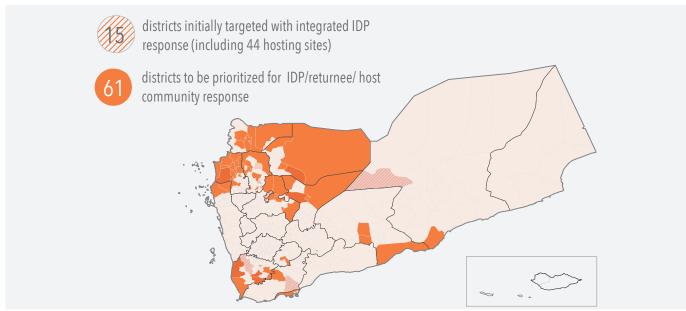
Out of the 61 high priority districts, high severity of needs for returnees is identified in Aden and Amanat Al Asimah Governorates. More than 50 per cent of the returnees (an estimated 1 million) are located in these Governorates. Immediate lifesaving and humanitarian plus assistance will be provided to returnees guided by the integrated minimum assistance package to enable them to have access to livelihoods and basic services that will ensure that their return is sustainable.

In 2018, displacement and return patterns will continue to vary based on prevailing local levels of conflict and insecurity. Escalated conflict in some parts of the country including along the west coast is likely to continue to cause additional displacements. Returns will remain precarious in many areas due to ongoing insecurity.

# Gender, Age and Protection

The integrated response involves provision of life-saving protection services for vulnerable groups, including pregnant or lactating women, children and GBV survivors, in IDP hosting sites, private settings and returnee locations. Integrated with the minimum assistance package, protection in public buildings, spontaneous settlements and collective centres will focus on avoiding exposure to further harm, particularly for women and children who are the most adversely affected by issues such as lack of privacy and higher risks of gender-based violence, child abuse and exploitation as well as integration and coordination between Community-Based Protection Networks (CBPNs) and CCCM to address privacy, safety and security risks. Protection in private settings will include protection monitoring and referral of persons with specific needs to specialized protection assistance, including psychosocial support, legal assistance on civil registration, critical child protection services such as family tracing and victim assistance as well as awareness-raising in communities. Protection in returnee locations will include facilitating reintegration and durable solutions, including issues of housing, land and property.

# DISTRICTS WITH HIGH INTER-CLUSTER SEVERITY SCORE FOR IDPS, RETURNEES AND HOST COMMUNITIES



Source: HNO, December 2017