

AMRAN

Inter-Agency Humanitarian Contingency Plan

FOR THE PERIOD APRIL – SEPTEMBER 2014

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Participating agencies and organisations: Adventist Development and Relief Agency, Al Saleh, AL AMAL , Charitable Society for Social Welfare, Executive Unit – IDPs, FAO, General Authority for Rural Water Supply Projects, Government Health Office, Humanitarian Aid and Development, Hawa Charity Development Association, International Organisation for Migration, Islamic Relief Yemen, Islamic Help, Local Water Supply and Sanitation Corporation, National Foundation for Development and Human Rights, Norwegian Refugee Council, OCHA, Oxfam, Relief International, Save the Children International, UNFPA, UNHCR, UNICEF, WFP, WHO, Yemen Family Care Association, YMCS, Yemen Red Crescent, Observers: ICRC and MSF.

The following document covers the humanitarian contingency planning for Amran Governorate. It has been prepared by OCHA in consultation with members of the humanitarian community. **The plan serves as an annex to the Yemen wide Inter-Agency Humanitarian Contingency Plan and should be read as an extension to the overall plan.** Activation of the plan can be requested by members of the Humanitarian Country Team, activation shall be approved by the Humanitarian Coordinator.

1. Context and Risk Analysis

Context

Amran is located in the north-western part of Yemen. It borders with the governorates of Sa'ada to the north, Hajjah and Al Mahwit to the west, Sana'a to the south and Al Jawf to the east. The main access route to Sa'ada in the north passes through Amran, making it a strategic location for both the Al Houthis and the government. The Governorate has an area of 9,587 square km and comprises of 20 districts. The Governorate has a total population of approximately 1,061,000¹ people, with a density of 110 per square km. Amran city, the administrative seat of the Governorate, is located 53 km north-west of the Yemen capital Sana'a by road.

Risk analysis (abridged and simplified)

The humanitarian situation in Amran remains highly complex. Following the crisis that (re)started in October 2013 between the Al Houthis and local tribesmen, the dynamics of the conflict changed in late January 2014. The main confrontation now reported to be between the Al Houthis and government forces. This does not mean that the conflict between the Al Houthis and tribesmen is over however, the latest truce signed on 6 February is still holding. The area of confrontation has also shifted, from districts in northern parts of the Governorate to the surroundings of the Governorate capital – Amran city. This is areas with higher population density and critical infrastructure (main roads and junctions) connecting northern and southern parts of Yemen.

Continued failure to reach an agreement between the Government and the Al Houthis regarding the leadership of Amran Governorate (administration and military), and the Al Houthis demonstrating their discontent by establishing protest camps close to military installations (as checkpoints) and carrying out demonstration in Amran city, means that tensions are high. Should a peaceful agreement not be reached between the conflicting parties, open conflict between the Al Houthis, government forces and tribal groups, supporting either side, might unfold.

Key challenges:

- Loss of access to internally displaced people from previous conflicts in need of assistance (halt in food distributions, drugs supplies to health facilities, distribution of non-food items etc.). In total more than 70,000 displaced people within the governorate depend on some form of life-saving assistance.
- Lack of access to people in need. Humanitarian access is already limited in many parts of Amran Governorate, in particular to areas controlled by the Al Houthis. Should the Al Houthis further expand their areas of control, access to vulnerable populations may be further reduced.
- Humanitarian indicators are already worrying. The northern areas, among the least developed areas in the country, have received little support from previous governments. Today, the socio-economic context is fragile and marginalised. Livelihoods and coping mechanisms are already stretched to the breaking point. Communities have little ability to absorb shocks caused by family sickness, displacement, poor harvests or other challenges. Facilities providing basic services are fragile and can be quickly overwhelmed and interrupted by shocks. This dual vulnerability is cause of serious concern; a worst case scenario will increase the vulnerability of already fragile households and increase pressure on already fragile basic service system.

¹ Statistics Year Book 2011 – Central Statistics Organisation. Reviewed 24 February 2013.

2. Governorate specific scenario and planning assumptions

The scenario for the contingency planning period, April to September 2014, was developed through a consultative process with cluster leads. The scenario is based on an analysis of the humanitarian, political and security situation in Amran and adjacent governorates. In consultation with the Inter-Cluster Coordination Mechanism (ICCM), it has been agreed to use the ‘worst case’ scenario as the basis for contingency planning and preparedness. The Yemen Humanitarian Response Plan for 2014 – 2015 is handling the most likely scenario.

2.1 Scenario | worst case

The humanitarian situation in Amran remains precarious. Unsolved milestones including the change of the Governor and the commander of the armed forces in Amran ignite fighting, leading to a war like situation. Conflict breaks out, starting near disputed checkpoints around Amran city. The conflict expands to other strategic areas towards Sana’a and Raydah, and spreads to areas around military installations in northern parts of the Governorate. Clashes over where certain tribal groups belong continue to keep the tension high in central parts of the Governorate. Links between tribal groups, government forces and the Al Houthis increase the potential for regional instability in the north.

Deteriorating security in large parts of Amran and adjacent governorates has severe humanitarian consequences. The operating environment, already difficult, further deteriorates. Access restrictions for humanitarian partners are imposed, directly affecting humanitarian partners’ capacity to identify and respond to needs. As insecurity spreads, substantial internal displacement occurs across southern parts of Amran Governorate and displaced people pour into Sana’a and districts between Amran (city) and Sana’a (Hamdan, Thula, Iyal Surayh and Bani Matar). Of particular concern is the status and security of internally displaced people from previous conflicts. Local government structures in conflict-affected areas become inoperative and social service delivery and trade is seriously disrupted.

2.2 Planning assumptions

2.2.1 Humanitarian consequences

In the advent of a worst case scenario, the humanitarian consequences may be:

- **About 30,000 women, girls, boys and men newly displaced within Amran Governorate**, areas under the influence (control) of the Al Houthis (Raydah-north, Iyal Surayh, As Sawd, Jabal Iyal Yazid, Kharif, Al Qafrah, Al Ashah). These are people who may be fleeing violent conflict, including conflict along inter-tribal lines, in need of life-saving assistance in form of protection, shelter, food, access to improved drinking water, non-food items as well as access to health and education services. Among these there may be IDPs being displaced for a second or third time.
- **About 120,000 women, girls, boys and men affected within Amran Governorate**, areas under the control of either part to the conflict. This includes people who are affected by disruption to their livelihoods; the discontinuance of basic social service delivery. These people may be in need of access to health care, emergency education, protection, as well as limited support to protection of livelihoods, food aid and access to improved drinking water.
- **About 50,000 women, girls, boys and men newly displaced from Amran Governorate to Sana’a and adjacent districts (Hamdan and Bani Matar)**. These are people who may be fleeing as a preventive measure (possible short term displacement) or may be fleeing violent conflict. To a large extent these people will be staying with family and friends. They will along with their host families (some 10,000 people) to some extent need life-saving assistance in form of protection, shelter, food, access to improved drinking water, non-food items as well as health and education services.

2.2.2 Approximate anticipated humanitarian interventions by cluster/sector

In the advent of the worst case scenario, the total number of women, girls, boys and men in need of humanitarian interventions by each sector will include approximately (total of displaced and affected):

90,000 people may need emergency food assistance and/or livelihoods support

200,000 people may need access to improved water and sanitation facilities

200,000 people may need protection support

35,200 children may need learning and recreational activities

23,550 children under the age of 5, pregnant and lactating women may suffer from acute malnutrition

200,000 people may need emergency health services

140,000 people may need non-food items and emergency shelter

2.2.3 Critical planning assumptions

It is anticipated that local authorities are likely to continue functioning at the immediate and low impact stage. As the conflict persists and/or intensifies, local authorities are expected to be adversely affected. If the conflict continues for one month or longer, local level government structures may become inoperative and social service delivery will be seriously disrupted. As Amran city is a likely hotspot and limited in size, a breakdown of rule of law and order could mean relocation of humanitarian staff (both essential and non-essential) for coordination and implementation of humanitarian assistance to area of response (Sana'a, Sa'adah or Hajjah).

2.3 Identified triggers for a worst case scenario

A number of triggers have been identified to indicate whether a worst case scenario is unfolding and response plans need to be activated. These are:

- Disputes over outcome of the Presidential Committee negotiations
- Escalation of localized conflicts within southern parts of the Governorate
- Increasing polarisation between Al Houthis and tribal groups
- Increased displacement
- Increased interference with humanitarian actors and humanitarian space
- Killing of key tribal/political figures
- Significant build-up of troops and armed elements North/South of Amran city

The triggers will be monitored regularly by OCHA in partnership with members of the Amran humanitarian community and – once set up – with the assistance of the Emergency Task Force (see 5.1). OCHA field staff will report on the triggers to the OCHA Coordination Unit in Sana'a and the ICCM. OCHA will also review the early warning triggers and formulate recommendations to the HCT on changes that need to be made to the Contingency Plan.

3. Preparedness

It is widely acknowledge that effective preparedness saves lives, livelihoods and money, consequently clusters are asked to undertake necessary measures to ensure preparedness. Supplies to cover up to eight (8) weeks of response for each of the six core emergency pipelines will be pre-positioned in hubs located near the areas where violence is most likely to erupt, as well as in areas where at-risk populations are likely to concentrate – Amran city and Sana'a. Surge requirements for core sectors, including in logistics and coordination will be identified and requested ready for activation. The capacity of partners to respond to a rapid increase in the caseload will be addressed by the clusters, and negotiations will be undertaken with parties for an access framework to people in need.

In addition to these measures, each cluster will take the following preparatory steps taking into account the specific needs of women, girls, boys and men affected by conflict and displacement.

Summary of cluster preparedness plans:

Sector	Preparedness actions
Education	<ul style="list-style-type: none"> • Prepositioning school supplies, bags, school-in-a-box sets, recreational materials, and essential learning items for 11,200 children • Identify the schools at risk of being affected and ensure sufficient education supplies and school tents are available in Sana'a and Sa'ada hubs • Map the capacity of local partners in Sa'ada and Amran to respond to emergencies and UNICEF to make agreements with local NGOs to respond
FSLA	<ul style="list-style-type: none"> • Stockpiling of dry food supplies in WFP warehouses in Sana'a, Hodeida and Amran city, stockpiling of emergency agriculture inputs in Sana'a • Updating the list of IDPs in Amran • Identification of safe areas where food distribution can continue in case of conflict will affect Amran city
Health	<ul style="list-style-type: none"> • Stockpiling of essential medicines and supplies in WHO/MoPHP warehouse in Sana'a • Arrange for diversion of medical teams from Sa'ada to districts in Amran to provide basic PHC services need be • Arranged for provision of basic PHC services to IDPs in Sana'a through coordination with MoPHP to ensure access to free services from government HFs
Shelter, CCCM/NFIs	<ul style="list-style-type: none"> • Maintaining information on stockpiled NFIs and shelter materials • Maintaining close coordination with partners on ground and with the Registration Task Force • Preparing draft proposals for available emergency funding mechanisms • Cluster partners to revise the need for additional staff, vehicles and equipment to provide adequate response to anticipated needs • Cluster partners to assess internal availability of relief funds • Cluster to implement CCCM and Emergency Shelter trainings (In May: Harad and Aden)
Nutrition	<ul style="list-style-type: none"> • Prepositioning 25% of nutrition supplies in the MOPH warehouse in Amran for a three months case load • Training of CHVS and health workers from government and NGOs on CMAM • Prepare for the activation of a nutrition sub-cluster in Sana'a Zone which covers Amran Governorate • Advocating for operational presence of nutrition cluster partners in Amran
Protection	<ul style="list-style-type: none"> • Establishment of referral pathway to various clusters for appropriate intervention: identify referral points and update necessary contacts • Strengthen /establish community based protection mechanisms in the high risk areas • Map and improve local partner capacity for protection services
WASH	<ul style="list-style-type: none"> • Monitor information on partner focal points and supplies/stores nationwide • Updating cluster roster of MIRA trained staff • Conducting training on Sphere standards/WASH in emergencies and cluster coordination in Arabic

4. Response – objectives and strategies

Overall goal

Mitigate the impact of conflict and insecurity by providing protection and humanitarian assistance to affected populations.

4.1 Principles and strategies

The humanitarian community aims to support the Government in mounting a timely, consistent and coordinated response. The Government is primarily responsible for the initiation, organisation, coordination, and implementation of humanitarian assistance within its territory.² The humanitarian

² See UN General Assembly Resolution 46/182 of 19 December 1991.

community, represented by the HCT, operates in support of and in coordination with local authorities whenever possible.

The goal of the partners involved in the emergency planning process is to ensure that adequate preparations are in place in the advent of a worst case scenario. Although substantial resources have already been mobilised, particularly for the assistance of newly displaced and conflict-affected people in northern Yemen, additional preparatory measures must continue to take place to ensure that the humanitarian partners are able to deal with large number of people in need of assistance if required.

UN agencies, clusters and NGO partners must jointly review the requirements needed to help vulnerable and at-risk people in the high-risk districts taking into account the specific needs of different vulnerable groups (elderly, women and children). Preparations for the worst case scenario must involve reviewing emergency stock levels of key response items and emergency fuel depots, boosting logistics and response capacity among front-line partners, particularly to address issues of mines and UXOs, in flashpoint areas.

Humanitarian assistance will be organized by observing principles of independence, humanity, neutrality and impartiality. The independent assessment of the needs will ensure that the designed response is in line with the needs of different groups of people (women, men and children) and will target the most vulnerable. The IDPs Guiding Principles, IDP National Policy, International Humanitarian Law and Human Rights Law will be the reference strategic and legal framework. The humanitarian intervention is essentially meant to save lives and protect civilians, safeguard livelihood, prevent malnutrition, and the spreading of contagious diseases. The emergency operation will be managed at the operational level by the clusters and will be as short as possible to give space for immediate recovery interventions.

Rapid inter-cluster assessments of critical life-saving needs will form the basis for response in the areas of food security, non-food items and shelter, health, nutrition, water and sanitation, protection, and education.

Clusters will respond to the emergency on the basis of plans which they have drawn up as part of the contingency exercise. See annex A.

5. Management and coordination

5.1 Amran Emergency Task Force

The coordination of preparedness and response will be ensured by the Amran Emergency Task Force (AETF) chaired by OCHA. The team will include representatives of life-saving clusters (Education, FSLA, Health, Shelter/CCCM/NFIs, Nutrition, Protection and WASH) and cluster lead emergency officers (as feasible), representative of UNDSS (as needed) and two representatives of the NGO community (one local and one international organisation). If feasible the team will work out of Amran City, if not out of Sana'a – OCHA office.

Specific responsibilities of the AETF include, but are not limited to:

- Coordination of the emergency response in cooperation with the OCHA Coordination Unit (CU) and the ICCM – *and once set up – the Emergency Operations Room (EOR)*.³
- Liaison with relevant government authorities in regard to the humanitarian response.
- Provide daily situation updates to the HCT and ICCM (*once set up – the EOR*).
- Arranging assessment teams, conducting rapid needs assessments, drafting emergency action plans and following up on their implementation.

5.1.1 General humanitarian coordination of response to the Contingency Plan

Based on the first information, partners will provide early support to people in need. Full implementation of emergency action plans, developed based on assessments, will be the responsibility of the relevant

³ Ref. the management structure for a country wide emergency response (Yemen Emergency Preparedness and Response plan).

clusters. If there are capacity gaps within a sector, the cluster lead will be responsible for covering these through re-deployment of staff or surge placements.

Cluster coordination remains the responsibility of the Yemen humanitarian cluster lead agency and/or an appointed cluster focal point in the absence of the lead agency. Overall responsibility of cluster coordination with line ministries rests with the cluster lead/focal point. Inter-cluster coordination and support to the Amran Emergency Task Force will be ensured by OCHA.

Figure 1. Rapid response matrix

Activities	Responsible
During First 24 Hours	
Activate fully the Amran Emergency Task Force (AETF) and carry out its responsibilities	Chair of the AETF/OCHA
Liaise with UNDSS and Area security Coordinator (ASC) for security	Chair of AETF, UNDSS and ASC
Liaise with local authorities	Chair of AETF/UNDSS
Deploy rapid assessment teams to affected areas	AETF
Launch emergency response based on initial information	Cluster leads/focal points
Next 48 Hours	
Mobilise emergency stocks	Cluster leads/focal points
Mobilise HQ and/or surge capacity for response	Cluster leads/focal points
Present initial assessment result to AETF and ICCM	Chair of AETF
Collect and consolidate information to situation reports	OCHA
Revise the response plans and confirm roles and responsibilities	AETF
Evaluate security situation	UNDSS
Scale up response based on needs assessments	AETF
Forward recommendations of suspension of non-priority programmes to the HCT	AETF
During First Two Weeks	
Continue to conduct needs assessments and prepare/revise action plans	AETF and UNDSS
Consolidate information (3W), analyse gaps and flow of assistance	AETF
Liaise with ICCM for revision of response plans and development of –up to – three months action plans	Cluster leads/focal points
Scale up further emergency response based on continuing needs assessments	Cluster leads
Evaluate the security situation for humanitarian operations	UNDSS, ASC and AETF

5.3 Safety and security

In accordance with globally agreed protocols, all safety and security issues will be handled through UNDSS channels and frameworks. UNDSS, through the Field Security Coordination Officer (FSCO) and the Area Security Coordinator (ASC) is responsible for ensuring UN staff safety and will network with security focal points of the UN Agencies and NGOs.

In the event of the worst case scenario and a response operation coordinated out of Sana'a, the security focal point for humanitarian agencies will be the Field Security Coordination Officer based in Sana'a (this though the Governorate normally is managed by the FSCO based in Harad).

5.3.1 Safety and security of non-UN humanitarian partners

UNDSS is committed to render security support to all NGO partners. In case of emergency, NGOs will be provided with relocation and/or evacuation depending on the security situation and availability, and based on a reimbursable basis.

5.3.2 Access and insecurity

The roads between Amran and Sana'a, Amran and Hajjah and Amran and Sa'ada are currently all classified as roads with high risk. For UN missions with international staff two armoured vehicles are required for all movement on these roads (identified as higher risk missions). All movement by UN staff to/from Amran (city) in any direction needs clearance from UNDSS.

6. Annexes

Cluster response

EDUCATION

Cluster specific operational objectives: Increased access to safe and protected learning space for children affected by conflict and displacement. | Access to essential teaching and learning material by children and teachers affected by conflict and/or displacement. | Ensure safe and secure learning environment free from violence.

Cluster planning figures: 7,200 displaced and additional 28,800 affected

Response interventions			Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Activities	By WHO (Partners)	HOW (Implementation strategies)		
Coordinate with the MoE's Education in Emergency (EiE) Committee to ensure schools in host communities admit children of IDPs without certificates	UNICEF, MoE's EiE committee, GEO, Cluster	Joint meetings between Cluster and EiE; circular memo from MoE to the GEOs and MoE monitoring	Established EiE committee including all sectors of the MoE; Established coordination mechanism between the two parties; Similar procedures have been made before	Areas not under the control of the government might not react positively to communication from the MoE
Provide education supplies, school-in-a-box sets and recreational materials to affected children	UNICEF, NFDHR, CSSW, Al-Saleh, Education Offices	Distribute supplies through the government partner or local NGOs where applicable.	UNICEF's hub in Sana'a has a stock of 1,400 school bags, 1 million exercise books, 130k pencils and 300 recreational kits.	Stock isn't sufficient to respond to the needs of 36,000 children.
Provide temporary learning spaces (TLS) for IDPs	UNICEF, Save the Children (SCI), NFDHR, CSSW, Al Saleh and Oxfam	Working with/through the Education Offices in Amran, Sa'ada and Sana'a, UNICEF will set up TLS in areas of displacement and in overcrowded host schools.	UNICEF has a hub office in Sa'ada and Sana'a. Save the Children International (SCI) have offices in Amran and Sana'a, local NGOs such as NFDHR, CSSW, and Al-Saleh have offices in Sana'a with access to the southern parts of Amran. Stocks: UNICEF has school tents in Hodeida and Aden. Warehouses: Oxfam and SCI have warehouses in Sa'ada.	UNICEF doesn't have tents in its stocks in Sa'ada or Sana'a.
Coordinate with the Education Offices through the MoE's Education in Emergency Committee to ensure teachers are available to teach in TLS.	UNICEF Sana'a Office	Regular meetings with the EiE committee communication/visit with the field.	MoE has an established cross-sectoral Education in Emergency Committee. UNICEF and the Cluster have well-established relationship and TOR for working with the MoE's committee.	Experience has shown that displaced teachers might not be easily located.

FOOD SECURITY AND AGRICULTURE SECTOR

Cluster specific operational objectives: Protect and safeguard lives and livelihoods, ensure that affected populations have adequate access to quality food as per international standards

Cluster planning figures: 30,000 displaced and additional 60,000 affected (Amran district: 20,000 displaced 40,000 affected and Iyal Surayh: 10,000 displaced 20,000 affected)

Response interventions			Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Activities	By WHO (Partners)	HOW (Implementation strategies)		

Emergency food distribution – Urgent Food Assistance to IDPs and war affected	WFP/CSSW/Hawa Charity Development Association, IRY	Registration and verification of newly displaced people in collaboration with UNHCR and through local partners. Distribution of food package on the assumption of the average Yemeni family of seven members in safe areas.	The FSAC coordinator will cover the Amran humanitarian emergency from Sana'a. WFP has enough food stock available in Sana'a and Amran to cover the first 8 weeks of emergency. WFP, FAO and other Cluster partners can use the human resources available in Sana'a in order to cover the humanitarian emergency in Amran.	Interruptions in food pipelines due to presence of armed militia. The safety along the road between Amran and Sanaa could affect the food dispatch between the two cities The limited capacity of the warehouse in Amran-- WFP can preposition only limited food quantities enough to cover 60% of the regular food needs of Amran Governorate
Emergency agriculture inputs distribution	FAO	Utilization of UNHCR IDPs list in order to identify IDPs households in need of agricultural inputs. Distribution will be done through local partners.	Funds can be reallocated from Al Jawf.	Lack of in country agriculture stocks. Lack of human resources that can be easily redeployed in Amran.

HEALTH SECTOR

Cluster specific operational objectives: Support government efforts to promote and protect health and well-being of affected people thereby minimizing mortality, morbidity and disability.

Cluster planning figures: 80,000 displaced and additional 120,000 affected

Activities	By WHO (Partners)	HOW (Implementation strategies)	Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Stockpiling of essential medicines and supplies in WHO/MoPHP warehouse in Sana'a	WHO / MoPHP	International procurement	WHO/MoPHP	Delay in arrival of medicines / supplies to the port
Rescheduling medical teams from Sa'ada to reach accessible districts in Amran to provide basic PHC services	WHO/MoPHP, SC, UNICEF, MSFF	WHO/MoPHP, SCI, MSFF and UNICEF have fixed/mobile medical teams in Sa'ada who can be diverted 2 days per week to provide PHC services	WHO/MoPHP, SCI and UNICEF, MSFF fixed and mobile medical teams	
Emergency rehabilitation and equipping (revitalization) of target health facilities for the most vulnerable people, including IDPs and host communities	WHO/MoPHP, ICRC, HAD, NFDHR/MMF	Rehabilitation of infrastructure, procurement and installation of life-saving equipment	Funds available to provide services to the northern parts of Yemen – nothing specific to Amran	Unavailability of fund in time to implement
Provision of essential life-saving health services to IDPs through fixed and mobile medical teams in Huth, Harf Sufyan, Al Qafila and Al Ashsha	WHO/MoPHP, ICRC, HAD, NFDHR/MMF	Support to health staff to provide services from fixed and mobile medical teams	Funds available to provide services to the northern parts of Yemen – nothing specific to Amran	Unavailability of fund in time to implement
Monitoring the public health risks/threats with focus to communicable diseases	WHO/MoPHP	Selection of HFs and training the health staff on case definition and disease reporting and mobilizing Rapid Response Teams for timely response to disease outbreaks	Funds are available for training and support to sentinel sites	Shortage of resources needed for stockpile and rapid response
Provision of basic PHC services to IDPs in Sana'a through mobile medical teams as well as coordination with MoPHP to ensure access to free services from government HFs	MoPHP, RI, MMF, ADRA, YMCS	Mobile medical teams provide basic PHC package of services. MoPHP coordinates with government HFs to ensure free service-provision to registered IDPs	Efforts underway by some partners to mobilize funds	Lack of fund
Conducting medical camps, targeting the most vulnerable population.	MOPHP, WHO	Conducting medical camps that provides special medical services whether medical or surgical based on identified needs.	Funds available to provide services to the northern parts of Yemen – nothing specific to Amran	Shortage of fund.

Stockpiling of reproductive health commodities at WFP and MAS Int'l warehouse in Sana'a	UNFPA, WHO, MoPHP	Selection of HFs and training health staff on MISP	RH kits are available at the warehouse in Sana'a level	
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NUTRITION SECTOR

Cluster specific operational objectives: Contribute to the prevention of death and the treatment of acute under nutrition and associated micronutrient deficiency disorders among vulnerable under 5 girls and boys, pregnant and lactating women in affected areas

Cluster planning figures: 9500 children under five and pregnant and lactating women displaced and additional, 14,200 conflict-affected children under five and pregnant and lactating women

Response interventions			Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Activities	By WHO (Partners)	HOW (Implementation strategies)		
Expansion of treatment services to Severe acute malnourished children under five	GHO, MoPHP, CSSW, UNICEF	80 % OTP (Outpatient Therapeutic Program) coverage in all over the governorate	Offices, supplies, coordination mechanisms and Human resources.	Shortage of funds. Limited presence of national and international NGOs
Deploying mobile teams	GHO, CSSW, UNICEF	Mobile clinics in areas of inability to access health services	Human, supplies and financial resources.	Mobile teams have inadequate experience to provide nutrition services
Provision of Blanket Supplementary Feeding to children 6-24 months	WFP, CSSW, GHO	70% coverage of Caseload	WFP has operation presence in Arman, CSSW and MOPHP run mobile and static health facilities respectively	Shortage of Funds
Provision of Supplementary feeding for moderate acute malnourished children under five and Pregnant and Lactating women(PLW)	WFP, CSSW, GHO	70% coverage of caseload	WFP has operation presence in Arman, CSSW and MOPHP run mobile and static health facilities respectively	Shortage of fund

PROTECTION SECTOR:

Cluster specific operational objectives: Identify violations of rights and protection gaps for IDP women, girls, boys and men, and respond with remedies and solutions; provide IDPs, host communities affected by conflict adequate lifesaving assistance; strengthen the protection environment for affected and vulnerable children from violence, abuse, exploitation and neglect

Cluster planning figures: 200,000 displaced and affected people

Response interventions			Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Activities	By WHO (Partners)	HOW (Implementation strategies)		
Advocate with the government ,local communities and International organization and share IDPs protection concerns for adequate response	UNHCR, WFP OCHA	Close coordination and Partnership		Shortage of partners
Identification and registration of vulnerable IDPs and providing protection response	UNHCR, IRY, ExU, CSSW	Through community mobilizers monitoring visit		
Provide protection counselling for PWSNs	UNHCR, IRY	Individual counselling for IDPs	Existing Community Based Protection Networks	
Establishment of community-based protection networks	UNHCR	By members of CBPNs network		

for monitoring IDPs during the crisis with focus on inaccessible areas due to security risks	IRY			
SHELTER/CCCM/NFIs SECTOR				
Cluster specific operational objectives: 1- Most vulnerable displaced population affected by conflicts receive NFIs and emergency shelter support in a timely and coordinated way; 2- Management and coordination of activities and assistance to displaced populations in Collective Centres, Camps, spontaneous settlements and hosting communities in collaboration with local authorities and other relief partners; 3- Assist the most vulnerable displaced population with emergency and transitional shelter solution and (if possible) to repair/reconstruct their houses; 4- Capacity Building of Cluster partners and affected Communities (Shelter, CCCM and emergency response); 5- Pursue gradual solutions for IDPs and hosting communities aimed to alleviate tensions and to facilitate integration/return as the situation improves				
Cluster planning figures: 80,000 displaced and additional 60,000 affected (approximately 11,430 HH and 8570 HH)				
Response interventions			Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Activities	By WHO (Partners)	HOW (Implementation strategies)		
Stockpiling of essential NFIs and emergency shelter materials	UNHCR, YRC, YFCA, CSSW, RI, ADRA	Current stocks, local and international procurement	UNHCR and Cluster partners stocks, updated information available at Cluster and online	Current NFIs immediate response capacity is around 5,000 IDP families
Provide emergency shelter and relief assistance to IDPs (tents, plastic sheeting for shelter, shelter kits)	UNHCR, YRC, YFCA, CSSW, RI, IOM, NRC, ADRA	From current stocks in Sana'a and warehoused in Amran	UNHCR and Cluster partners stocks, updated information available at Cluster and online	Limited stocks, not all materials are available in Amran. Security concerns on opening warehouses and transportation of items from Sana'a
Provide emergency cash assistance to address urgent shelter and NFIs needs, including rental subsidies in urban/semi-urbane areas to most vulnerable people	UNHCR, YRC, YFCA, CSSW, RI, ADRA, NRC, AL AMAL, IOM	Following verification exercise based on ExU IDPs lists and information gathered by partners	None	Funds are not available, needed to activate emergency funds (EF,CERF)
Distribute NFI packages	UNHCR, YRC, YFCA, CSSW, RI, ADRA	Using local cluster partners and implementing partners	UNHCR and Cluster partners stocks, updated information available at Cluster and online	Needed additional funds as the tasks are not covered by current Partner's budgets.
Assess urgent needs and register IDPs in participatory way including disaggregate data on particular needs of women, girls, boys and men	UNHCR, ExU, YRC, CSSW	In coordination with Exu and registration task force, using agreed need assessment indicators and standard assessment tools	Availability of trained staff, supporting funds may need to be allocated to cover transport and information management	
Coordinate emergency Shelter and NFIs assistance prioritizing most vulnerable cases	UNHCR, YRC, YFCA, CSSW, RI, ADRA	Through sub-cluster and national cluster coordination mechanisms	Mechanisms in place and working efficiently	
Provide camp management and coordination support. Ensure suitability of sites and adequate accessibility to relief assistance	UNHCR and IRY	UNHCR and IPs using CCCM guidelines and IASC standards	Funds available (UNHCR) for Northern Yemen, not specific to Amran	Collective Centers and spontaneous settlement could be difficult to manage due to security/access
Provide transitional shelters/cash for work for IDPs and host communities	UNHCR, YRC, YFCA, CSSW, RI, IOM, NRC, ADRA, ALAMAL	From available stocks and emergency funding mechanisms. Ensuring participatory design and implementation	UNHCR and Cluster partners' limited stocks. Mobilizing emergency funding	Additional funds needed
Provide emergency housing repair/reconstruction prioritizing the most vulnerable IDPs.	UNHCR and Implementing Partners	From available stocks and emergency funding mechanisms. Encourage self-construction repair	UNHCR and Cluster partners limited stocks. Mobilizing emergency funding	Additional funds needed.
Provide Cluster related knowledge transfer by trainings and "on the job" learning activities	UNHCR, YRC, RI, ADRA	Based in Cluster available technical resources and Partners implementation experience in Yemen	Available Cluster Partners trained Staff in CCCM and limited knowledge in Shelter	Additional funds needed

Establishment of community based response and early warning mechanisms	UNHCR, NRC, YFCA, CSSW	Following Cluster standards and best practices	Utilizing trained activists and community based structures already engaged in relief supporting activities.	Additional funds needed.
Participatory assessment of IDPs intentions to return	UNHCR, ExU, YRC	Coordinated with other clusters, when the situation allows (i.e. return safely).	Cluster Partners trained staff, using cluster's available need assessment tools and agreed indicators	Additional funds needed.
Provide emergency housing repair/reconstruction prioritizing the most vulnerable IDPs	UNHCR, YRC, YFCA, CSSW, RI, IOM, NRC, ADRA, ALAMAL	According Cluster technical guidelines and conditioned to the availability of relief funds	No funds, need to activate ERF and other emergency funding mechanisms	Additional funds needed

WASH SECTOR

Cluster specific operational objectives: Prevent outbreak of waterborne diseases, such as cholera, measles, malaria and other diarrheal diseases

Cluster planning figures: 80,000 displaced and additional 120,000 affected

Response interventions			Available resources (Offices, stocks, coordination mechanisms)	Constraints (Gaps in response capacity)
Activities	By WHO (Partners)	HOW (Implementation strategies)		
11,429 IDP families (4286 in Amran and 7143 in Sana'a) are in need of hygiene kits (one per family)	Amran: Islamic Help, HAD, NFDHR, CSSW, SCI, GARWSP and LWSSC	Relief items brought from other regional hubs Several WASH partners have contingency/emergency budgets including GARWSP. ERF projects can be developed UNICEF has Long Term Agreements to procure more hygiene kits Some organizations have volunteers that can be activated	5166 hygiene kits available across the country including 1700 in Sana'a. UNICEF LTAs in place to provide remaining required hygiene kits.	6263 hygiene kits required. Need more staff to conduct distribution of relief items along with the relevant hygiene promotion messages.
16,000 IDPs (6000 in Amran and 10,000 in Sana'a) in camps and public places need water (minimum 15 l/person/day) to be provided through trucking	Same as above	Several WASH partners have contingency/emergency budgets including GARWSP. ERF projects can be developed	Funding required; private trucks, water connections and wells exist	As this is not a relief item nothing is held in storage for example; private service must be hired. Also partners must decide whether this activity will be linked with chlorination (of water trucks) or household level water treatment and coordinate the activities accordingly.
16,000 IDPs (6000 in Amran and 10,000 in Sana'a) in camps and public places need public water storage tanks (minimum 15 l/person/day)	Same as above	Relief items brought from other regional hubs Several WASH partners have contingency/emergency budgets including GARWSP. ERF projects can be developed	500-10,000 liter plastic tanks available in stores across the country- enough for 55,200 people to deliver Sphere standard	No gap; some items may only need to be moved to Sana'a from warehouses in other cities.
16,000 IDPs (6000 in Amran and 10,000 in Sana'a) in camps and public places need public water storage tanks chlorination	Same as above	Relief items brought from other regional hubs Several WASH partners have contingency/emergency budgets including GARWSP ERF projects can be developed	173 drums (45 kilo each) of powder chlorine available in warehouses across the country including 154 in Sana'a; more than enough. Chlorine test kits used in chlorination process also available.	No gap.
184,000 affected people <i>may</i> need household water treatment	Same as above	Relief items brought from other regional hubs Several WASH partners have	995 ceramic filters available in warehouses across the country.	Under the worst case scenario there would be a gap after the first few days

		contingency/emergency budgets including GARWSP ERF projects can be developed	Producers and distributors may have another 2500-5000 in stock at any given time. 2,650,000 chlorination tablets also in stock in warehouses across the country.	however this scenario is very unlikely and there would likely be no gap. Not all conflict affected people will necessarily require this assistance. However, some households may lack a dedicated treatment container and may also require this as part of relief items. A needs assessment will have to determine this.
762 latrines to be built (286 in Amran and 476 in Sana'a) to new IDP settlements (1 latrine for 3 families- about 21 people)	Same as above	Several WASH partners have contingency/emergency budgets including GARWSP ERF projects can be developed	15 mobile toilets are prepositioned in Sana'a and Amran able to accommodate about 45 families.	Basic latrines can be constructed for about \$150/unit. All materials, mainly metal sheeting and latrine slabs, are locally available as well as designs.
Increase knowledge of good hygiene practices for 11,427 IDP families.	Same as above	Several WASH partners have contingency/emergency budgets including GARWSP. ERF projects can be developed Some organizations have volunteers that can be activated	IEC materials to target at least 5000 families are in stock.	Remaining required IEC materials can be printed- designs are ready.
16,000 IDPs require solid waste disposal facilities and collection service to reduce vector borne disease.	Same as above	Several WASH partners have contingency/emergency budgets including GARWSP. ERF projects can be developed	788 trash bins (80 liter) available in stores across the country. This is sufficient for 6304 families or about 44,128 people.	No gap though collection services will need to be provided.

B. Contact details Amran Emergency Task Force

(Note: the 2 (and in some cases 3) name is for the alternate)

Sector	Organisation/ Agency	Name	Title	SAT Phone	Mobile	Email
Coordination	OCHA	Inger-Johanne Tjoflaat	Head of Coordination Unit		712 222 836	tjoflaat@un.org
	OCHA	Jayne Mbakaya	Deputy Head of Office		712 222 842	mbakaya@un.org
Education	Save the Children (SCI)	Ahmed Taha Afif	Cluster Coordinator		711 704 022	ahmed.afif@savethechildren.org
	UNICEF	Abdullah Modhesh	Education Specialist and Education Cluster Coordinator Acting		712223022	amodhesh@unicef.org
FSL	FAO/WFP	Marco Valentini	Cluster Coordinator		737 890 412	marco.valentini@fao.org
	FAO	Eilina AlHakimi	IM Officer		738 401 773	Eilina.Alhakimi@fao.org
Health	WHO	Dr Dauod Altaf	Cluster Coordinator		736 755 570	altafm@yem.emro.who.int
	WHO	Kamal Oleri	Health Cluster Focal Point		736 300 337	olerik@yem.emro.who.int
Nutrition	UNICEF	Anteneh Dobamo	Cluster Coordinator		712 223 047	adobamo@unicef.org
	UNICEF	Nagib Abdulbaqi			712 223 365	nabdulbaqi@unicef.org
Protection	UNHCR	Hagir Musa	Cluster Coordinator		712 225 037	musah@unhcr.org
	UNHCR	Safa Algahoum	Protection Assistant Officer		712 225 041	algahoum@unhcr.org

Shelter/CCCM/NFIs	UNHCR	Walter Bruzzoni	Cluster Coordinator		712 225 114	bruzzoni@unhcr.org
	UNHCR	Adel Aladlani	Field Assistant		712 225 012	aladlani@unhcr.org
WASH	UNICEF	Derek Kim	Cluster Coordinator		733 327 989	dhkim@unicef.org
	GARWSP EU	Talal Al-Qadasi	Government co-chair		733722433	shaditalal@yemen.net.ye
	UNICEF	Sami Saeed	Emergency WASH officer		712223000	ssaeed@unicef.org
UNDSS		Muneeb Zreikat	Field Security Coordination Officer-Sana'a		+967-1-448860	muneeb.zreikat@undss.org
NGO representative	TBC - reflect the participating organisations and clusters in the response					
NGO representative	TBC - reflect the participating organisations and clusters in the response					
Observers with open invitation	ICRC					
	MSF					

C. Contact details humanitarian operational partners in Amran

Organisation/agency	Name	Title	SAT Phone	Mobile	Email	Response partner for:
Adventist Development and Relief Agency (ADRA)						Shelter/CCCM/NFIs
Al Saleh						Education
AL AMAL	Al Tayeb Ez Al Deen	Secretary General		712324117	Tayeeb3@gmail.com	Shelter/CCCM/NFIs
Charitable Society for Social Welfare (CSSW)	Walild Qutabesh			712183743		WASH, Nutrition, Education
Executive Unit – IDPs (ExU)	Mutahar AbU Shiha	Head of the Ex. Unit in Amran		713150834	idps-euamran@hotmail.com	Protection
General Authority for Rural Water Supply Projects (GARWSP)	Ali Al Shargabi	Director of GARWAP Office in Amran		771314163		WASH, Agriculture
Government Health Office (GHO)	Abdul Aziz Al Dhelei	Director of Health Office in Amran		777259459		Health, Nutrition
Humanitarian Aid and Development (HAD)						Health, WASH
Hawa Charity Development Association (HCDA)						FSL
ICRC	Julia Ungei	Head of Amran Unit		737501487		WASH, FSL, Health, Protection
International Organisation for Migration (IOM)	Nooria Shoga Al Din	Representative of IOM in Amran		737888782	Nshugaaaddin@gmail.com	Education, WASH, Health
Islamic Relief Yemen (IRY)	AbdulMaleq Al Shalali	Emergency Coordinator		773332207		Protection, Food

Islamic Help (IH)	Bashir Ahmed	Programme Manger		739133731	bashirahmed@islamichelp.org.uk	WASH
Local Water Supply and Sanitation Corporation (LWSSC)	AbdulRahman Al Moalami	Director of Office in Amran		771314163		WASH
MSF France	Francois Compan	Head of Office in Amran		777176026	Msff-amran-pc@paris.msf.org	Health, Nutrition
National Foundation for Development and Human Rights (NFDHR)	Ali Al Rasas	Head of Amran Office		711303030		Health
Norwegian Refugee Council						Shelter/CCCM/NFIs
Oxfam						Education
Relief International	Kamal Al Badani					Health, Shelter/CCCM/NFIs
Save the Children	Ismail Al Wadhaf	Acting head of Amran Office		771277137	Ismail.AWadhaf@savethechildren.org	Protection, Health, Nutrition, WASH
UNFPA	Abdullah Alhadad	Programme Coordinator			al-hadad@unfpa.org	Health
UNHCR	Gamal Yacut	Head of Amran Office		712225085	yacut@unhcr.org	Protection, Shelter//CCCM/ NFIs
UNICEF	Walid Noman	Representative of UNICEF in Amran		711684554	wnoman@unicef.org	WASH, Education, Development
WFP	Nasser Al Khawlani	Head of sub-office		738611799	nasser.alkhawlani@wfp.org	Food – Nutrition
Yemen Family Care Association (YFCA)	Nabil Al Amari					Health
YMCS	Mugahed Hazeb	Head of the Organisation		714354141	ymcsamran@gmail.com	Health – Protection
Yemen Red Crescent	Ali Al Azab	Protection Coordinator		7708343362	Alazap.yrc.amran@gmail.com	Protection - Health

D. Security focal points

Organisation/Agency	Name	Title	SAT Phone	Mobile	Email
UNDSS Harad	Janakat Abdallah	Field Security Coordination Officer-North	+88 1641499037	712222466	abdalla.janakat@undss.org
WFP Harad – Radio room	Duty radio operator (From 0800 till 2400 hrs)	Radio Operator WFP		736143335	
UNDSS Sana'a	Muneeb Zreiqat	Field Security Coordination Officer Center		712222417	muneeb.zreikat@undss.org
UNDSS Sana'a - Radio room	Duty radio operator	Radio Operator	+88 216 60650160	712222415	dssradioroom.ye@undp.org