

Minutes of FSAC National Cluster Meeting

Date	31.03.2022
Venue	Virtual
Attendance	WFP, FAO, UNDP, OCHA, BHA, CARE, NRC, OXFAM, ACTED, SCI, ADRA, SI, GC, DRC, WC, QC, Samaritan's Purse, NFDHR, BCHR, TYF, BFD, NMO, RDP, LMMPO, SMEPS, SRA, YFCA, KFD, SHS, YLDF, NDEO, RHD, YDN, SFHRP, EDCF

Agenda

1. Action points from the last meeting
2. Presentation of the IPC AFI
3. HNO & HRP updates
4. YHF funded projects and interactions with FSAC
5. AOB

1. Action points from the last meeting

- FSAC will work on the PIN and target based on the IPC findings, taking into account the partners' capacities and plans for 2022
 - ✓ Done. More information through the IPC AFI presentation and the HNO / HRP updates
- SC 2.2.2 Enhance emergency preparedness and response capacity needs to be further discussed with OCHA to include it in the inter-sectoral section rather than in the FSAC sectoral logical framework.
 - ✓ Done. It won't be included in the FSAC sectoral logical framework

2. Presentation of the IPC AFI + Q&A

A. 2022 YEMEN NATIONAL IPC ANALYSIS RESULTS

- The presentation focused on the following:
 1. Key Concepts of IPC
 2. Analysis process & Data
 3. Main Drivers and assumptions
 4. Key findings Acute Food Insecurity (AFI) and Acute Malnutrition (AMN)
 5. Key messages
- Main Drivers and assumptions
 - Conflict, displacement and access
 - Economic Shocks – cost of minimum food basket, reduced reserves, imports, fuel, etc

- Levels of Humanitarian assistance
- Poor access to basic services – health, WASH, etc
- Impact of hazards on livelihoods – floods, frost, desert locust, FAW, etc.
- Humanitarian Assistance- 2022 Assumptions
 - Overall 13m with HFA and
 - Jan to May – assistance to 50% of the estimated caseload (13 million)
 - Jun to Dec – further reductions to 25% of the estimated caseload
- Access to Basic Services
 - Poor access to water and sanitation
 - Low immunization coverage – polio, measles, etc.
 - Disruption of health and nutrition services due to conflict, lack of salaries, fuel, etc
 - Poor child caring practices (exclusive breast feeding – 20%, MAD – 11.5%)
 - Poor access to health services leading to morbidity
 - Diarrhea 44%
 - Acute Respiratory Infections 53%
 - Fever 64%
- Impact of Hazards of Livelihoods
 - Mix of drought and floods incl. cyclone expected in 2022
 - High temperatures and dust driving livestock and human diseases
 - Floods in west and south-west coast
 - Reduced fishing activities along the coastal areas from by Apr/May due to the heavy winds
 - Availability of vegetables for most of the year
 - For pastoralists, increased availability of pasture and fodder in the projection period – reduced prices of inputs
 - Increased incidence of crop and livestock pests & diseases – desert locusts, fall armyworm (FAW), etc.
 - Landmines and conflict reducing access to land

B. IPC KEY FINDINGS

- IPC Trends (AFI)
 - Jan-Jun 2021 - 16.2 m (54%) people facing severe acute food insecurity (IPC Phase 3).
 - Jan-May 2022 – 17.4 m (54%) people facing severe acute food insecurity (IPC Phase 3).
 - Jun-Dec 2022 – 19.0 m (60%) people facing severe acute food insecurity (IPC Phase 3).
- AFI & AMN convergence (Current)
 - Both analysis have zero districts in phase 5 but pockets for AFI
 - West coast indicate highest prevalence and burden for both food insecurity and acute malnutrition
 - Areas of great concern - Hajjah, Hodeida and Taizz
 - Hadramout and Al Mahrah least vulnerable

- AFI & AMN convergence (Projected)
 - Worsening in the west and southern coast with very high food insecurity and acute malnutrition
 - Increased number of districts deteriorating to Phase 4 from Phase 3, 82 for AFI & 72 for AMN
 - Areas of great concern - Hajjah, Hodeida, Taizz, Amran, Marib, and Al Dhale
 - Phase 5 in 3 districts of Hajjah for AMN, same districts under review by FRC for AFI
 - Al Mahrah indicating low levels of vulnerability

C. Summary of the Results

- AFI:
 - 17.4 million (54%) in IPC 3+ until May 2022 and 19 million (60%) in IPC Phase 3 and above projected to Dec 2022
 - 82 districts move from Phase 3 in the current to Phase 4 in the projection period
 - Population in Phase 5 increases from 31,000 in the current to 161,000 projection from 23 districts
 - Similarities in the first 5 months of 2022 compared to same period last year – gives confidence to the analysis process and data
 - Convergence between food insecurity and acute malnutrition – both scales indicate Hajjah and Hodeida have the highest severity

- AMN
 - 2.2 million children under the age of five years, including 538,000 severely malnourished.
 - 2 million children under 5yrs stunted
 - 1.3 million pregnant and lactating (PLW) women are malnourished
 - 72 districts move from Phase 3 in the current to Phase 4 in the projection
 - Highest prevalence observed in Hajjah, Taizz and Hodeida with GAM rates ranging from 17% to 27%
 - There is need for an integrated multisectoral approach to tackle all forms of malnutrition in Yemen.

3. HNO/HRP updates

A. HRP 2022 / FSAC Logical Framework (SC 1)

SO1: Reduced morbidity and mortality of crisis-affected women, girls, boys and men through life-saving multi-sectoral humanitarian assistance

1.1. Improved food security and malnutrition through timely and integrated multisectoral life-saving response targeting women, girls, boys and men in coherence with the outcomes of Pillar 1 of Yemen Economic Framework through a wide range of partnerships.

SC 1.1.1: Increase availability and access to secure, safe and lifesaving food for the most vulnerable households through the provision of emergency assistance

Sectoral approach	Indicator
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Provision of immediate life-saving emergency food assistance Same in 2021	Number of individuals receiving emergency food assistance (in kind, cash or voucher transfers) on a monthly basis Same in 2021
Distribution of emergency agricultural, livestock and fisheries kits Same in 2021	Number of individuals provided with emergency agricultural, livestock, and fisheries kits Same in 2021

B. HRP sectoral HRP 2022 / FSAC Logical Framework (SC 2)

SO2: Improved living standards and resilience of crisis-affected vulnerable individuals through access to livelihood and essential basic services

SP 2.2. Strengthened resilience of vulnerable women, girls, boys and men through improved access to sustainable livelihoods and provision of sustainable livelihoods assistance, aiming at enhancing the household food security and income through improved agriculture productivity and access to market. In complementarity with livelihood activities stated in pillar 2 of Yemen Economic Framework

SC 2.2.1: Protect and promote livelihood and build assets to enhance resilience

Sectoral Approach	Indicator
Rehabilitation of community assets and infrastructure, provision of seasonal employment opportunities and increase of HH incomes through conditional and season specific cash transfer	Number of individuals benefiting from conditional and season specific cash transfer to rehabilitate community assets and infrastructure
Provision of support to restore livelihood assets, assistance to establish micro businesses and trainings to enhance employability	Number of individuals provided with support to restore livelihood assets, assistance to establish micro businesses and trainings to enhance employability

C. Activities, Targets and Budget

FSAC activity	Targeting logic		Target beneficiaries		Budget (USD)
Provision of immediate life-saving emergency food assistance	Jan – May	Continue with current	Jan – May	13.4M	1.7BN
	Jun – Dec	100%IPC5+100%IPC4+80%IPC3	Jun - Dec	16.7M	
Distribution of emergency agricultural, livestock or fisheries kits	15%IPC3 (overlapping with EFA)		1.8M	60M	
Rehabilitation of community assets and infrastructure, provision of seasonal employment opportunities and increase of HH incomes through conditional and season specific cash transfer	20% (overlapping with EFA and ELK)		2.3M	260M	
Provision of support to restore livelihoods assets, assistance in establishing micro businesses and trainings to enhance employability	5%IPC3 (no overlap)		0.6M	60M	

Feedback from Partners:

- In 2021, as a result of the funding constraints, FSAC partners didn't do much in terms of SO 2.
- It is important to note that, based on a decision made by the HCT, the 2022 HRP is interlinked to other framework such as the Yemeni Economic Framework, whose pillar 1 focuses on the humanitarian response while pillar 2 is aiming at enhancing resilience and supporting the economic growth.
- To enhance resilience, the FSAC HRP should be promote inter-sectoral integration, targeting and coordination.

4. YHF funded projects and interactions with FSAC

- Aim: to better manage and standardize interactions between partners and FSAC on YHF projects.
- The SOPs involve the following phases:
 - ✓ Phase 1
Soon after the signature of YHF contracts, sub-national cluster coordinators assist partners in interacting with Authorities, aiming at getting the sub-agreements signed as soon as possible
 - ✓ Phase 2
Once the sub-agreement is signed, implementation starts. Partner could face difficulties and being compelled to revise some technical aspects. It contacts FSAC and ask for technical support and / or endorsement of the review itself
 - ✓ Phase 3
Partner provides the concerned sub-national cluster coordinator with all the key information and explanations via email (whose title clearly indicates the kind of support needed e.g. YEM-19/xxx/SA2/FSAC/NGO/xxx: Request for revision) and by attaching the template properly filled in. Sub-national cluster coordinator further interacts with partner, to collect additional inputs. Within 2 days of the receipt of the template from partner, sub-national cluster coordinator informs the national coordination team
 - ✓ Phase 4
Within 1 day of the receipt of the email from the sub-national cluster coordinator, and by further interacting with him / her, the national coordination team will make the ultimate decision, by endorsing (or not) the review request from partner
 - ✓ Phase 5
Within 3 days of the receipt of the template, partner is notified – via email – about the ultimate decision made by FSAC.
If the proposed review is endorsed, partner is asked to submit it to OCHA, by keeping both the national coordination team and the sub-national cluster coordinator in cc.
If the proposed review is not endorsed, partner has the chance to call a meeting with FSAC (national coordination team + sub-national cluster coordinator), to have a better understanding of the decision made and be further advised on how to deal with experienced challenges without revising the project.

Action points

- FSAC to share the “YHF funded projects and interactions with FSAC” SoP and template for partners inputs



5. AoB

- CCT Guidelines posted on the FSAC website and will take effect on April 1, 2022. Accessible through the following link: <https://fscluster.org/yemen/document/fsac-conditional-cash-transfer>
- A deep dive discussion on FSAC 2022 HRP was requested by donors.

Action points

- FSAC to send an email to partners informing them of the CCT Guidelines, which will take effect on April 1, 2022.