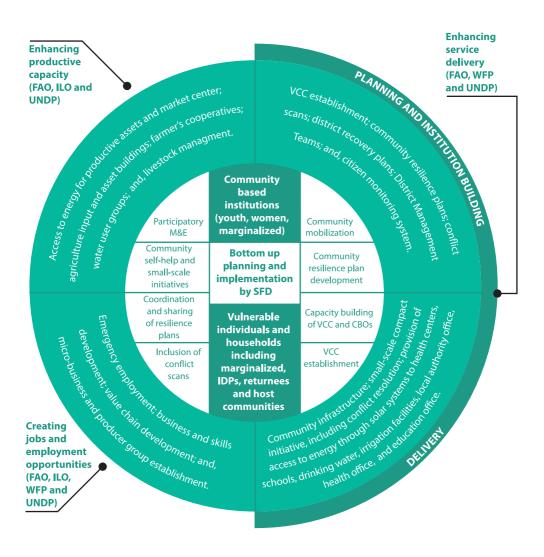








COMMUNITY-BASED RESILIENCE BUILDING MODEL IN CRISIS CONTEXT IN YEMEN



Facilitated and Implemented by



in Collaboration with



Village Cooperative Council (VCC)

SFD TAMKEEN approach

Abbreviation Index: ERRY: Enhanced Rural Resilience in Yemen | SFD: Social Fund for Development | VCC: Village Cooperative Council | CBOs: Community Based Organizations | IDPs: Internally Displaced Persons | DMTs: Districts Management Teams | IPC: Integrated Food Security Phase Classification

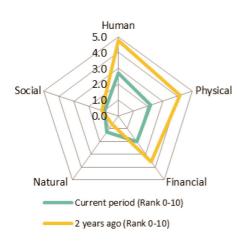
EXPECTED RESULT

Inclusive community-based governance system is strengthened to develop community resilience plans and community prioritized actions identified and supported.

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Local Governance Intervention Baseline - 2017 (random samples from 8 districts)





Source: ERRY Baseline 2017 from Abyan, Hajjah, Hodeidah and Lahj

Baseline Findings

- The human, physical and financial asset have significantly eroded.
- Targeted districts under ERRY are in IPC4 classification.
- Targeted districts have experienced two waves of cholera outbreak.
- Targeted governorates, except Abyan, have the highest number of IDPs and returnees.
- Local authorities have stopped receiving funding since early 2016.
- Government institutions are unable to prioritize services based on the Annual Plan, and therefore community institutions have become dysfunctional.

INTERVENTIONS

Establishment and capacity building of Village Cooperative Councils (VCCs)

213

VCCs established in the targeted communities

2,178

Members in 213 VCCs

50%

VCC members are women

Facilitation of Community Resilience Plan development 213

Community resilience plans developed by VCCs, including the priorities of communities on basic services, employment, income generation, etc.

Implementation of self-help initiatives and small-scale block grants 414

Self-help initiatives were implemented by communities as a result of resilience planning 321

Small-scale project grant initiatives were implemented by VCCs and targeted communities, benefiting 56,175 individuals

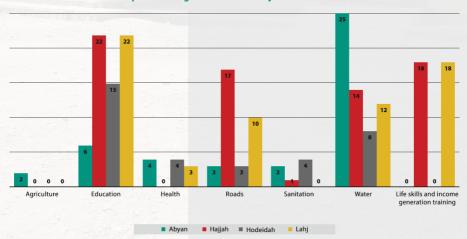


IMPACT I

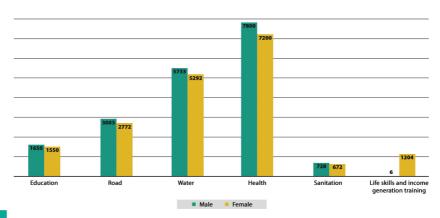
- The community-level bottom up planning has focused on physical, financial and human resource areas to build the capacity of affected communities. These assets were listed as the worst performer according to the baseline.
- Clean water, community infrastructure, education and skills development are the common priorities across four governorates. Access to clean water remains the top priority because target areas were affected by cholera outbreaks and other water-borne diseases.

Source: ERRY UNDP Database and Quarterly Reports 2017 and 2018

Sector priorities at governorate-level by affected communities







Community Infrastructure Rehabilitation and Construction

- 321 small-scale project grants indicate significant levels of female and male engagement in community planning and implementation. The presence of women in the VCCs has influenced the needs prioritization with basic services topping the community projects.
- 119 classrooms were rehabilitated, maintained and constructed, benefiting 3,500 students.
- 3,000 meters of road were paved.
- 15 health units were rehabilitated and/or constructed, benefiting more than 15,000 people.
- 65 water interventions were implemented; 24 wells rehabilitated and/or constructed; 12,000 meters of water pipe networks established; and, 17 water tanks rehabilitated, maintained and/or constructed to improve access to drinking water.
- **750** meters of sanitation pipes were installed benefiting 500 individuals (80 HHs). 360 HHs benefited from the 250 septic tanks dug.
- More than 1,521 women and 149 men have received training and capacity building on life skills and income generation.



321SMALL-SCALE PROJECT GRANTS PROVIDED





3,000METERS OF ROADS BUILT

15
HEALTH UNITS CONSTRUCTED





65
WATER INTERVENTIONS
IMPLEMENTED

750METERS OF SANITATION PIPES WERE INSTALLED





MORE THAN 1,670 PEOPLE WERE TRAINED



EXPECTED RESULT

Functions, financing and capacity of local authorities enabled to deliver improved basic services and respond to public priorities.

INTERVENTIONS

Establishment of District Management Teams (DMTs) in the targeted districts 8

District Management Teams were established and trained for the district recovery plan development 249

Members in District Management Teams consist of executive and local council representatives

Development of district recovery plan and implementation

8

District recovery plans were developed and validated with the support of DMTs 8

District-level priority projects were implemented: health, education and water were the key priorities identified by the districts

IMPACT I

District recovery project implemented by local authority

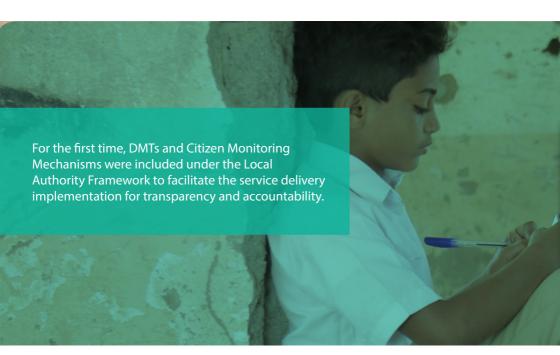
Governance	District	Sector	Beneficiaries Reached
Abyan	Khanfir	Education	800
Abyan	Lawdar	Education	750
Hajjah	Ku'aydinah	Health	8,314
Hajjah	Bani Qa'is	Health	2,191
Hodeidah	Az Zhuorah	Education	650
Hodeidah	Bajil	Education	550
Lahj	Habil Jabr	Water	44,080
Lahj	Tuban	Health	9,360
	Total Beneficiaries		66,695

Preparation (formation of District Management Teams)

Monitoring and Evaluation Process of district recovery plan development and implementation Assessment (collection of sectoral data including conflict scans)

Implementation (validation and prioritization of sectors) Planning (preparation of district recovery plans)

IMPACT II





EVIDENCE



ERRY Joint Programme and Implementing Partners































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