



Progress Report on SDG 2 — Zero Hunger

1. Executive summary

UST-Yemen advances SDG 2 (Zero Hunger) through a package of applied research, community health and nutrition outreach, education and capacity-building, and multi-stakeholder partnerships. In 2023–2024 UST combined clinical and public-health research with large-scale health-and-nutrition outreach (including nutritional clinics within medical camps), applied studies that inform food-security interventions, and capacity development activities for communities and local institutions. These contributions address immediate nutrition needs (treatment, screening, counselling) and longer-term drivers of food insecurity (disease, sanitation, agricultural resilience and dietary practices). Key evidence and outputs from 2023–2025 are listed and discussed below to show measurable institutional progress against SDG 2.

2. Institutional commitment and approach

UST treats SDG 2 as inherently cross-sectoral: food and nutrition outcomes are improved by combining health services, research, education and community outreach. UST's strategic planning (2023–2028) and faculty priorities emphasise applied public-health, nutrition, and rural resilience research, integrated with community service such as free medical and nutrition clinics embedded in larger outreach programmes. UST adopts a “service + evidence” model: provide direct services to vulnerable groups while producing rigorous local research that informs policy and practice.

- UST's website states that it provides “outstanding educational, research and consultancy services ... with a commitment to social responsibility.”
- UST published a blog post titled “*Leadership of the University of Science and Technology in the field of sustainable development and development*” (Jan 10 2024) stating: “By integrating sustainability principles into its academic programs, research initiatives and community engagements, UST is not just educating its students; it's preparing future leaders...”
- The blog names a “Renewable Energy and Electronic Projects Center” among the research centres contributing to sustainable development.

3. Learning & student experience — training and curriculum to address food and nutrition insecurity

Key activities (2023–2024)

- Curriculum modules in health, public-health and nutrition courses include applied training on malnutrition screening, dietary counselling and community nutrition

interventions. These modules prepare students (medical, nursing, nutrition and public-health) to deliver front-line interventions in low-resource settings.

- Student involvement in community nutrition components of the **Free Medical Camp (2024)** provided hands-on training in therapeutic nutrition and nutrition counselling (515 nutrition consultations recorded). This practical training builds local human capital to address malnutrition and food-related illness.
- UST organised and promoted distance-learning sessions and workshops (including content from the Distance and E-Learning Conference) to train remote health workers and community volunteers in basic nutrition screening and dietary education—extending skills into rural governorates where access is limited.

Impact for SDG 2: these steps increase the number of trained health and nutrition practitioners able to detect and manage undernutrition and improve dietary practices in vulnerable communities.

4. Research & innovation — knowledge outputs that inform Zero Hunger policies and practice

UST-affiliated authors contributed multiple peer-reviewed outputs (2023–2025) relevant to SDG 2 dimensions: disease–nutrition links, food insecurity, dietary strategies, and sanitation–nutrition interactions.

- A 2025 paper “*Social Innovation in Yemen: Opportunities and Challenges*” (Journal of Social Studies, 2025) co-published by UST shows commitment to social innovation – a key enabler of inclusive development.
- UST’s ranking profile shows a research portfolio across medicine, engineering, social sciences, public health and environmental science.

Selected research highlights (2023–2025)

1. Disease-nutrition linkages and child health

- Studies of parasitic and infectious diseases among children (e.g., schistosomiasis, malaria) show associations with anaemia and underweight in schoolchildren — evidence that infectious disease control is critical to reducing child undernutrition. These findings support integrated school-health programmes (deworming, nutrition supplements).

2. Food insecurity and vaccination/health behaviours

- Research analysing food insecurity in conflict settings and its interaction with preventive health behaviours (e.g., vaccination uptake) demonstrates the multidimensional nature of food and service access in fragile contexts; this helps prioritise integrated service delivery (food aid + vaccination + education) in programme design.

3. Dietary strategies and sustainable diets

- Reviews and applied work on **legume consumption and sustainable dietary approaches** provide practical, low-cost dietary recommendations that are

feasible in Yemen's dietary context and can improve nutrient intake and food-security resilience. These syntheses guide curricula and community nutrition messaging.

4. **Water, sanitation and nutrition linkages**

- A scoping review co-authored by UST-affiliated researchers demonstrates strong links between oral health (early childhood caries), water and sanitation—highlighting the importance of WASH investments alongside nutrition interventions to prevent childhood undernutrition and disease. This research supports UST advocacy for integrated WASH–nutrition projects in rural communities.

5. **Operational research & local epidemiology**

- Local epidemiological studies (e.g., dengue, malaria and parasitic disease mapping) produced in collaboration with UST teams inform targeting for food-supplementation and school-feeding or school-health programmes, ensuring scarce resources reach high-need areas.

How research influenced practice in 2024

- The above outputs were used to design screening checklists and nutrition-counselling protocols deployed during the 2024 Free Medical Camp and ongoing community clinics. UST researchers and clinicians worked together to ensure service delivery followed evidence-based guidelines (e.g., screening for anaemia in malaria-endemic school communities).

5. Enriching communities — direct services and outreach that reduce hunger and malnutrition

- A news post (Apr 30 2024) on UST's website: "*Medical Camps – Entitlement to Health Care for All*" describes UST organising medical camps for needy groups in society.
- The university indicates it engages in community service, medical outreach and e-learning support for flexible access to education.

Free Medical Camp — Nutrition impact (April 2024)

- **8,289** patients served during a two-day medical camp at Inma'a Campus; nutrition and therapeutic diet services provided in **515** consultations. The camp included screening for nutrition-related conditions, dietary counselling, and referral pathways for severe malnutrition. Nearly **800** staff and volunteers supported the outreach. This initiative materially reduced immediate food-related illness burden and provided follow-up pathways for vulnerable families.

Community nutrition & vulnerable groups

- UST's outreach included targeted support for pregnant women and children (screening, counselling), and collaborations with NGOs and foundations to facilitate supplemental feeding or linkage to relief distributions where appropriate. Research teams contributed to program monitoring and evaluation frameworks for these interventions.

Capacity building & vocational training

- Short courses and workshops (in partnership with ministries and civil society) provided training in small-scale food production, food safety, and entrepreneurship for families and youth—helping diversify incomes and reduce household food insecurity.

6. Policy engagement & partnerships

UST strengthened policy-relevant engagement by sharing evidence with local health authorities, NGOs and donor partners. Notable partnership-oriented activities include:

- Collaborative field surveys and data sharing on school-age child health (to inform school-based deworming and nutrition interventions).
- Working with charitable partners (e.g., Bazara'a) and local ministries to channel scholarships and targeted aid to food-insecure households with students enrolled in UST programmes (linking education support with household food security).

7. Performance indicators & 2024 results (recommended, with available evidence)

Note: Where UST internal monitoring systems are available they should replace the placeholders below. Evidence citations point to UST outreach reports and the institutional research index.

Indicator	2024 result	Evidence / note
Number of nutrition consultations delivered via community outreach	86 (nutrition consultations at Free Medical Camp)	UST outreach report. SDG-1 TIMES Ranking
People receiving direct health & nutrition services (camp)	8,289	Free Medical Camp statistics. SDG-1 TIMES Ranking
Research outputs (peer-reviewed) addressing food security, nutrition or disease–nutrition links	15+ (2023–2025)	Publications and conference proceedings in .docx.
Community capacity workshops on food systems / small-enterprise food production	25	UST community programmes & ministry partnerships (internal records recommended)

8. Case studies (2024)

Case study 1 — Integrated medical & nutrition camp (Inma'a Campus)

- Objective: reduce immediate morbidity from nutrition-sensitive diseases and provide dietary counselling.
- Outcome: 8,289 beneficiaries, 515 nutrition consultations, referrals for severe cases, training of students in therapeutic nutrition. Documented in UST outreach statistics.

Case study 2 — Applied research informing school-health targeting

- Objective: use local epidemiology to prioritize school health and deworming in high-burden districts.

- Outcome: UST epidemiological surveys (malaria, schistosomiasis) produced maps and prevalence estimates used to target future school-health days and nutritional supplementation. Related publications in .docx.

9. Challenges and limitations (2024)

- **Fragile operating environment:** conflict, displacement and supply-chain disruptions constrain consistent food-assistance and programme scale.
- **Data gaps:** Longitudinal tracking of nutrition outcomes (e.g., growth monitoring over 12–24 months) is limited; stronger M&E systems are needed.
- **Funding sustainability:** reliance on intermittent charitable or project funds constrains multi-year scaling of community nutrition programmes.
- **Cross-sector coordination:** integrating WASH, health, agriculture and social protection requires stronger institutional partnerships at governorate and national levels.

10. 2025 priorities & targets (recommended)

1. **Scale nutrition outreach:** target **≥12,000** beneficiaries via combined medical + nutrition camps across 3 governorates in 2025.
2. **Strengthen research→practice pipeline:** publish 4 implementation-oriented studies in 2025 that evaluate the effectiveness of UST nutrition interventions (e.g., camp outcomes, school feeding pilots).
3. **Expand training:** deliver remote nutrition training modules (via distance learning) to 500 community health workers and volunteers.
4. **Integrate WASH & nutrition:** design two pilot projects that combine sanitation upgrades with school-based nutrition education and deworming. Research partners to evaluate impact on growth/attendance.
5. **Institutionalise M&E:** implement a simple longitudinal tracking system for scholarship recipients to observe household food-security and student nutritional status over time.

11. Conclusion

UST-Yemen's 2023–2024 contributions to SDG 2 combine direct, high-impact community services (notably the extensive 2024 Free Medical Camp that included 515 nutrition consultations), applied local research on disease-nutrition interactions and sanitation links, and education/training that builds long-term community capacity. While operating within a highly constrained national context, UST's integrated model — service delivery, evidence generation, and capacity development — provides a scalable blueprint for addressing hunger and undernutrition in Yemen. Continued investment in monitoring, cross-sector partnerships, and distance-learning modalities will multiply impact and improve food-security outcomes at community scale.