



Yemen Humanitarian Situation Report

SITUATION IN NUMBERS

Highlights

- Fighting escalated towards the end of the month, particularly in Aden, and the expanded conflict led to the closure of all schools in Aden (198) for a whole week, depriving 185,235 students of their right to education.
- In the last seven days of January, 50 children were either killed or maimed, and most cases were documented in Sa'ada and Taizz, closely followed by Aden.
- There has been a sharp rise in probable diphtheria cases this month with a total of 923 suspected cases recorded (CFR 6.5 per cent), and over 60 associated deaths (177 per cent and 71 per cent increase from December respectively). UNICEF has now developed an integrated control and containment plan, together with WHO.
- UNICEF reached at least 82,880 people, including 39,670 children, with lifesaving mine risk education messages this month.
- As of 26 February 2018, UNICEF's response in Yemen has a 75 per cent gap in Education (US\$30.8 million required) and 74 per cent in Child Protection (US\$ 33.2 million required). Donor funding is urgently needed to help vulnerable children meet their urgent humanitarian needs.

January 2018

11.3 million

of children in need of humanitarian assistance (estimated)

22.2 million

of people in need (OCHA, 2018 Yemen Humanitarian Response Plan)

1 million

of children internally displaced (IDPs)

4.1 million

of children in need of educational assistance

400,000 children under 5 suffering Severe Acute Malnutrition (SAM)

16 million People in need of WASH assistance

16.37 million People in need of basic health care

UNICEF Appeal 2018*

US\$378 million

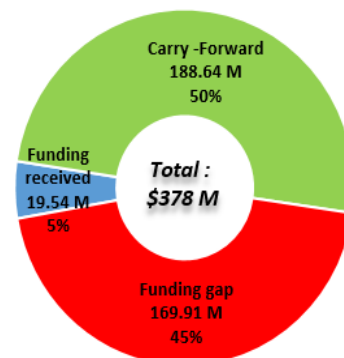
Funding Status*

US \$ 208 million

UNICEF's Response with partners

| | UNICEF | | Sector/Cluster | |
|---|---------------|----------------------|----------------|----------------------|
| | UNICEF Target | January 2018 Results | Cluster Target | January 2018 Results |
| Number of children under 5 given micronutrient interventions (MNPs) | 730,000 | 7,925 | 730,000 | 7,925 |
| Number of children under 5 receiving primary health care | 1,500,000 | 41,174 | | |
| Number of people gaining access to emergency safe water supply | 800,000 | 139,225 | 1,703,359 | 221,784 |
| Number of children and caregivers in conflict-affected areas receiving psychosocial support | 594,937 | 33,407 | 682,268 | 45,284 |
| Number of affected children receiving psychosocial support services and peace building education in schools | 429,000 | 28,000 | 1,000,000 | 28,000 |

Overall 2018 Funding Status



*The UNICEF funding for 2018 is per a revised Humanitarian Action for Children appeal soon to be published by UNICEF.

*Funds available include funding received for the current appeal year as well as the carry-forward from the previous year and additional multi-lateral funding.

Situation Overview & Humanitarian Needs

The humanitarian situation in Yemen has continued to deteriorate because of on-going conflict, collapsing basic services and economic decline. An estimated 22.2 million people (including 11.3 million children) are currently in need of humanitarian assistance, an increase of 3.4 million from the beginning of 2017.¹

The blockade on the Red Sea ports has not yet been fully lifted and there is an insufficient volume of fuel reaching the country, leading to a hike in the price of basic goods. Families and children are therefore suffering from preventable diseases and malnutrition because they cannot afford to buy food and clean water. At the end of the month, clashes erupted in Aden between the separatist Southern Transitional Council and forces affiliated with President Hadi, further impacting the humanitarian situation.

The Acute Watery Diarrhoea (AWD)/suspected cholera outbreak continued to spread amongst the population with a total of 32,745 new cases in January 2018 and 15 associated deaths, although the weekly number of cases is decreasing for the 21st consecutive week. Children under the age of five (U5) continue to represent 29 per cent of all suspected cases.

Meanwhile, there has been a sharp rise in probable diphtheria cases this month with a total of 923 suspected cases recorded (CFR 6.5 per cent), and over 60 associated deaths (this increased from 333 and 35 respectively in December 2017). 20 Governorates have reported cases, with Ibb and Al Hudaydah most heavily affected.

This month, the Country Task Force on Monitoring and Reporting (CTFMR) documented and verified that 41 children (28 boys; 13 girls) were killed and 62 children (44 boys; 18 girls) were injured because of the on-going fighting. Close to 50 per cent of the children were either killed or maimed in the last seven days of January and most cases were documented in Sa'ada and Taizz, closely followed by Aden. During January, 41 cases of recruitment and use of boys as combatants were documented and verified (CTFMR) in 11 governorates. The recruitment of boys under the age of 18 and their use by all parties to the conflict puts children at high risk of being killed or maimed, and exposes them to serious psychological harm.

The continuation of the conflict in the country is still hindering children from enjoying a safe learning environment. One such example was the escalation of conflict in Aden governorate at the end of January, which led to the closure of all schools in Aden (198) for a whole week, depriving 185,235 students of their right to education. 72 schools in Lahj governorate have been partially hit, further hindering access to education for 30,676 children. In the western governorates of Al Hudaydah and Taiz, increased population movements have been observed as 6,697 families have fled fighting in the last two months, many heading South and thus putting additional burden on an already exhausted education system, particularly in Aden.

Estimated Affected Population in Need of Humanitarian Assistance (Estimates calculated based on Humanitarian Needs Overview, December 2017)

| Start of humanitarian response: March 2015 | | | | | |
|---|-----------------|---------------|-----------------|----------------|-----------------|
| | Total (Million) | Men (Million) | Women (Million) | Boys (Million) | Girls (Million) |
| Total Population in Need | 22.2 | 5.5 | 5.4 | 5.8 | 5.5 |
| People in acute need ² | 11.3 | 2.8 | 3.7 | 3 | 2.8 |
| Internally Displaced Persons (IDPs) | 1.98 | 0.42 | 0.46 | 0.56 | 0.54 |
| People in need of assistance – WASH | 16 | 3.95 | 3.9 | 4.16 | 4.4 |
| People in need of assistance - Health | 16.37 | 4 | 4 | 4.3 | 4.1 |
| People in need of assistance – Nutrition | 7.02 | 0 | 2.3 | 2.4 | 2.3 |
| People in need of assistance – Child Protection | 6.53 | - | - | 3.34 | 3.19 |
| People in need of assistance – Education | 4.1 | 0 | 0 | 1.84 | 2.3 |

Humanitarian leadership and coordination

UNICEF continues to work in coordination with the Yemen Humanitarian Country Team (YHCT), leading the WASH, Education and Nutrition Clusters and the Child Protection Sub-Cluster, and is an active member of the Health Cluster. Sub-national level Clusters for WASH, Child Protection and Nutrition are functional in all five field offices (Sa'ada, Sana'a, Al Hudaydah, Aden and Ibb), and Education sub-national Clusters are active in Aden, Ibb and Al Hudaydah. In addition, UNICEF leads humanitarian hubs in Ibb and Sa'ada. UNICEF monitors programme implementation through field staff—where access allows—or through a third-party monitoring partner. UNICEF also leads the Rapid Response Mechanism (RRM) in Yemen in partnership with Action Against Hunger (Action Contre la Faim). The RRM ensures timely response to highly vulnerable populations in the most affected governorates of Aden, Abyan, Hodeidah, Lahj and Hajja.

¹ OCHA, Humanitarian Needs Overview, December 2017.

² Acute Need: People who require immediate assistance to save and sustain their lives.

In January, the Nutrition, WASH and Health Cluster Coordinators operationalized an Integrated Famine Risk Reduction (IFRR) approach which will be piloted in 14 priority districts in Hodaydah. In addition, the child protection sub-cluster (CPSC) and health cluster agreed to incorporate mental health partners into the psychosocial support working group under the CPSC. This will facilitate coordination in the Yemen emergency response and increase access to specialized and non-specialised mental health and psychosocial support services.

Humanitarian Strategy

UNICEF's humanitarian strategy is guided by its Core Commitments for Children (CCCs) in Humanitarian Action. UNICEF's Humanitarian Action for Children (HAC) strategy is aligned with the strategic objectives and cluster operational response plans, as detailed in the 2018 Yemen Humanitarian Response Plan (YHRP). Considering the collapse of public services, UNICEF aims to improve access to primary healthcare by providing supplies and capacity building of staff. The scale-up of community management of malnutrition remains essential, especially in hard-to-reach areas. UNICEF's WASH strategy is integrated with nutrition and food security to target immediate needs and strengthen long-term resilience of communities.

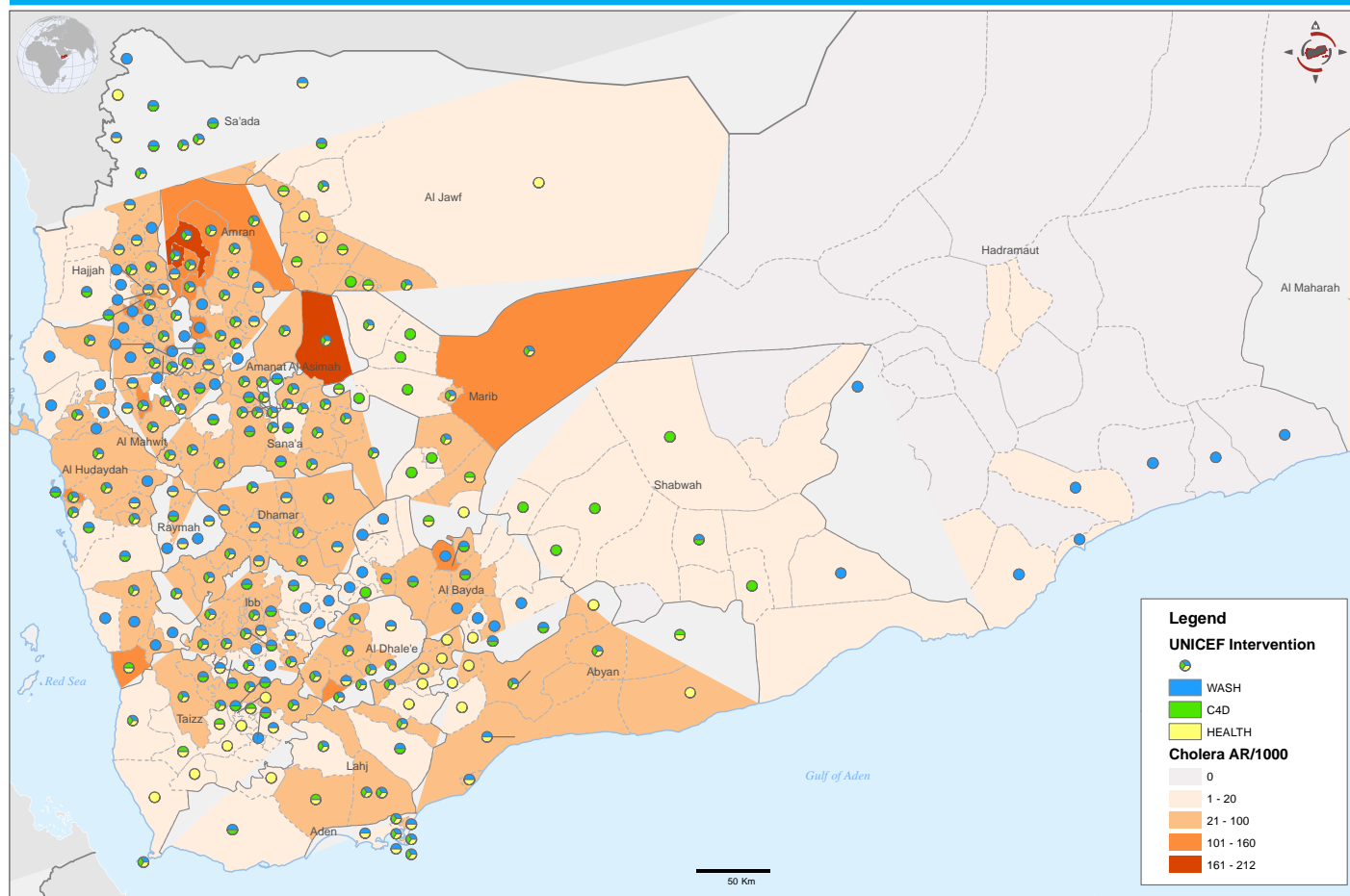
The integrated WASH, Health and C4D AWD/cholera prevention and response plan focuses on high-risk AWD areas, diarrhea treatment, chlorination of water sources, rehabilitation of waste water systems and hygiene awareness. In Child Protection, UNICEF targets the most vulnerable children in conflict-affected governorates with interventions including victim assistance, family tracing/reunification, documentation of child rights violations, mine risk awareness and psychosocial support (PSS). UNICEF also aims to provide a conducive environment and improve the quality of education to avoid further student drop-outs and retention of out-of-school children in education by rehabilitating damaged schools and establishing temporary safe learning spaces.

Summary Analysis of Programme response

AWD/cholera response

With 32,745 new cases of AWD/suspected cholera in January the number of new cases continues to gradually decline (the weekly number of cases has decreased again for the 21st consecutive week), yet UNICEF continues its integrated (particularly, Health, WASH and C4D) response strategy to the crisis. UNICEF has continued working in 2018 in coordination with the Health and WASH clusters, as well as the joint AWD/Cholera Taskforce. During January, UNICEF continued to work in partnership with WHO to support health facilities, and 632 Oral Rehydration Corners (ORCs) and 64 Diarrhoea Treatment Centres (DTCs) remain active as a result of UNICEF support and UNICEF continues monitoring and reporting to cluster partners and communities as additional sites are set up. UNICEF's integrated response also continues to ensure adequate WASH services are provided to communities, through the operationalization of the water supply systems. Disinfection and treatment of household drinking water sources in high risk AWD/cholera areas reached nearly 650,000 people in January alone.

Together with Health Cluster partners, UNICEF has been engaging in health systems strengthening and preparedness, specifically, the initial integration of cholera treatment facilities into the health system in Yemen. Emergency Operations Centres (EOC) are also now partially functional in Sana'a and Aden, while in other six governorates EOCs are also partially functional, with plans in place to ensure they become fully functional in the coming months when Information Management Officers and C4D facilitators are deployed. These interventions will be particularly important in the coming months as the country now prepares for a new wave of the AWD/cholera outbreak when the rainy season arrives in March or April 2018. A risk assessment and integrated containment plan against cholera has now also been developed and UNICEF and WHO will work together to procure the necessary quantities of Oral Cholera Vaccine (OCV) to vaccinate high risk groups in the coming months ahead of the rainy season. As of January 2018, the RRM in Yemen provided immediate emergency assistance to more than 500,000 people affected by the conflict/natural disasters and the AWD/cholera epidemic.



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Data source: GoY/CSO/unicef team

Production date: 04/02/2018

Designed by IMMAP

Health and Nutrition

Currently in Yemen, some 1.8 million children and 1.1 million pregnant or lactating women (PLWs) are acutely malnourished, including 400,000 children U5 who are suffering from severe acute malnutrition (SAM). In 2018, the UNICEF nutrition programme will build on the work of last year and further scale-up in response to the increased needs and growing capacity of nutrition partners. UNICEF expects to provide treatment for over 276,000 children U5 suffering from severe malnutrition and aims to reach nearly 4.2 million children with Vitamin A supplements. During the first month of the year, over 19,000 children between 6 and 59 months were screened for SAM through routine nutrition services and nearly 1,400 of those received treatment in fixed out-patient sites or by mobile teams. The micronutrient supplement programme for 2018 is well underway, and in this reporting period nearly 9,000 children received either micronutrient powders or Vitamin A supplements.

UNICEF also has been targeting PLWs to provide counselling on infant and young child feeding (IYCF) practices. In Sa'ada governorate, the Nutrition programme operationalized 35 new IYCF corners at selected health facilities, as part of its scale-up plan in the governorate. Throughout the country, nearly 6,000 women were reached in January with key messages to improve the health and nutrition of their young children.

As only 50 per cent of health facilities are fully functional, there is ongoing disruption of services due to the lack of payment of salaries to health personnel. In addition, an estimated 8.5 million children in Yemen need adequate healthcare. Despite the volatile situation, UNICEF maintained coverage for the Expanded Program on Immunization (EPI), and in January nearly 9,000 children were vaccinated against polio. To support this program, UNICEF helps maintain the cold chain and this month 50,000 litres of diesel was distributed to keep the cold rooms functioning at both the central and governorate level, whilst 18 solar direct drives were also installed in district vaccines warehouses.

These improvements will also support the Health programme response to the diphtheria outbreak, as outlined in the integrated control and containment plan which was developed closely with WHO in January. Difficulties in late 2017 concerning the procurement of sufficient supplies of Pentavalent and Typhoid/Diphtheria vaccines have now been resolved and in February it is expected that 2.7 million children will receive the vaccines they so urgently need. UNICEF continued to build capacities of key partners in January with the training of 48 and 120 Community Health Workers in Ibb and Sana'a respectively, increasing knowledge and skills on issues such as EPI, nutrition, reproductive health and cholera.

UNICEF continues to support mobile teams allowing them to provide critical health care for children, and in January they treated 932 children for diarrhoea, 868 for pneumonia, 163 for dysentery, 210 for malaria 262 for deworming, in addition to 1,508 children for other illnesses. Meanwhile, roaming health services reached 2,700 pregnant women with antenatal care, 1,124 with postnatal care and 1,242 with iron supplements.

Water, Sanitation and Hygiene (WASH)

At least 16 million people are in need of WASH assistance in Yemen, including 8.56 million children. In 2018, UNICEF aims to provide access to safe drinking water to over 5.5 million people, and thousands more will benefit from improved sanitation, hygiene kits and other WASH supplies. During the first month of 2018, UNICEF provided operational support, such as providing fuel to 6 Local Water and Sanitation Corporations (LWSCs) in Al Bayda, Al Hudaydah, Amanat Al Asimah, Dhamar, Hajjah and Sadaa. The operational support, together with engaging people with C4D interventions around household water treatment, allowed a total of 985,986 people, including many who live in high-risk districts for AWD/suspected cholera, to have access to a continuous supply of safe drinking water.

UNICEF also supported the rehabilitation of existing rural and urban water supply systems, complementing C4D activities, to allow internally displaced people and people living in cholera and malnutrition hotspots to benefit from a clean supply of water. These interventions were done in rural and urban areas of Al Bayda, Al Hudaydah, Al Jawf, Dhamar, Hajjah and Sadaa, benefitting a total of 1,400,000 individuals.

In environmental sanitation, UNICEF continues its support for the operation of the Waste Water Treatment Plant (WWTP) in Amanat Al Asimah and has completed the rehabilitation of three sanitation systems in Hajjah, Al Hudaydah and Hadramouth. These sanitation interventions have allowed more than 1,900,000 to benefit from a healthy living environment.

Child Protection

The conflict in Yemen has become one of the world's largest protection crises, affecting over 6.5 million children. This year, UNICEF has continued to support the referral and provision of specialized health services to children with injuries and disabilities including facilitating the access to services of the most vulnerable children by supporting their transportation and accommodation needs. In the reporting period, at least 31 children (20 boys; 11 girls) were provided with medical and other services.

Psychosocial support is a critical element of the response strategy, and at least 33,407 conflict affected people including 29,651 children (14,093 girls and 15,558 boys) and 3,756 parents (2,791 mothers, 965 fathers) were provided with psychosocial support in six governorates through fixed and mobile child friendly spaces and adolescent and youth clubs. During these activities, UNICEF reached 11,565 people including 9,322 children (4,759 girls and 4,563 boys) and 2,243 adults (1,136 women, 1,107 men) with knowledge and skills on protection during emergencies.

With the continuation of the conflict, landmines are putting many children at risk of harm and in 2017, 12 children were killed from mines, and a further 12 children were injured. Therefore, UNICEF has been working together with implementing partners to reduce this risk, and in January 2018 reached at least 82,880 people including 39,670 children (17,704 girls and 21,966 boys) and 43,210 adults (17,989 women, 25,221 men) with messages on risks associated with mines, unexploded ordnance's and explosive remnants of war in eight governorates through trained personnel and community volunteers.

UNICEF also continued implementing its case management programme in the reporting period, with 73 cases of vulnerable children being subsequently referred to individual counselling and child protection services³.

Education

Two-thirds of teachers have now been affected by the lack of salary payments and an estimated 4.1 million children are in need of some kind of educational assistance.⁴ To minimize the impact of the crisis and ensure access to educational opportunities for children in Yemen, UNICEF continues to support education interventions. UNICEF is working in collaboration with local state-run Education Offices to ensure access to education for internally displaced children by enhancing the capacity of existing schools, training teachers, enrolling children into classes and providing the necessary school equipment. For example, in the month of January, over 10,000 children received basic learning supplies, including school bag kits.

Ensuring that IDPs have an education is also a challenge because school infrastructure is not being spared by the conflict. As of the end of January 2018, 1,669 schools have been either partially or fully destroyed and the number of out-of-school children (OOSC) stands at two million. UNICEF has therefore been developing and implementing

³ Mainly legal, psychosocial support, education services, medical services, birth registration services, family tracing and reunification, economic empowerment and livelihood support.

⁴ OCHA, Yemen Humanitarian Needs Overview, Dec. 17.

innovative interventions to offer educational opportunities. In the reporting period, 3,395 OOSC in Taiz were integrated into formal education and 328 teachers and supervisors were trained on knowledge and skills enhancement. In Aden, 250 volunteer teachers were also identified to be trained and supported to provide education for IDPs and host community children.

To address the issue of non-payment of salaries (which has affected 12,240 schools in 13 northern governorates), UNICEF has stepped-up advocacy efforts with the authorities on the right to education.

Social Inclusion

Given the near collapse of the formal protection systems and the overstretching of informal social protection mechanisms, in January 2018, UNICEF launched a "Rapid Assessment of Social Protection Systems" that will generate the evidence to inform decision-making on the social protection reform during the crisis and in the post-conflict period.

The analysis of the Social Welfare Funds Beneficiary Outreach Network fieldwork exercise that assessed nearly 75,000 people in Amanat Al Asimah, Sana'a and Ibb governorates was also completed in January. A key finding is that the conflict caused more than 90 per cent of respondents to change their income sources. One of the coping strategies adopted by the surveyed households was to engage their children in labour. For instance, in Amanat Al Asimah (the governorate where the city of Sana'a is located and an area less affected by conflict), 11 per cent of the targeted households had children working. Similarly, at least 19 per cent of children were not attending schools, with lack of financial resources within the family being the main issue in this area (opposed to damaged infrastructure or teachers' salaries as in many other areas). The survey also demonstrated most vulnerable households are most affected in accessing quality social services, including health, education, water and sanitation, social protection and child protection.

In the reporting period, UNICEF also supported the Ministry of Planning and International Cooperation in publishing its Yemen Socio-Economic Update (YSEU). It focused on the need to urgently support the collapsing national social protection mechanisms as they play a critical role in addressing risks and shocks that Yemenis are facing at the moment. Donors were invited to provide, whenever possible, technical assistance and funding to expand the coverage of social assistance programmes for the poorest and most vulnerable, and to strengthen the national systems.

Communications for Development (C4D)

UNICEF's C4D programme, in partnership with government and Civil Society Organizations (CSO), continues to support community engagement interventions promoting adoption of 14 key behaviour practices,⁵ emergency outbreak response and capacity building among care givers and decision-makers. During the reporting month, approximately 325,000 people have been reached to address cholera and diphtheria outbreaks in addition to promoting 14 life-saving behaviour practices. These have been conducted by over 5,000 community mobilisers and the activities included community gatherings, festivals, speeches in mosques and health education awareness sessions.

Following a rapid assessment on diphtheria outbreak (conducted in 27 districts from nine governorates) to assess risk factors and gaps in knowledge, attitudes and practices of people, UNICEF has shared the results with all partners, including Health, WASH and Education Clusters, to inform C4D response plans.

Working together with WHO, the Ministry of Health and the Health Cluster, UNICEF provided support to finalise the Emergency Risk Communication (ERC) operational guidelines for the diphtheria response. It includes four important areas of the response including empowering communities through provision of key information and participation; providing key information for health care workers; capacity building of community volunteers who will be conducting contact tracing; and the key information and activities to address and manage rumours.

A national diphtheria awareness campaign is also underway in partnership with the Ministry of Information. Mass media activities include working with 25 mass media outlets develop and broadcast public service announcements and programmes. An animated video on diphtheria is now broadcasting in five public TV channels reaching approximately 15 million people. In addition, public awareness messages are being disseminated through social media platforms, including Facebook, twitter and WhatsApp groups.

⁵ The '14 key practices' addressed through regular C4D interventions include: uptake of antenatal care and safe delivery practices, routine immunization, infant and young child feeding including exclusive breastfeeding, prevention of malnutrition, hand washing with soap, household water treatment and storage, safe disposal of human waste, promotion of on-time enrolment at six years and girls education, as well as addressing social norms around child marriage, creating demand for Birth Registration and prevention of child trafficking and child recruitment.

Supply and Logistics

In January, the total value of supplies delivered amounted to US\$ 4,262,518, with a total weight and volume of 240 metric tons and 1,052 cubic meters respectively. This delivery was composed of one dhow which arrived in Al Hudaydah, one chartered vaccine flight to Sana'a and two logistic cluster air operations to Sana'a.

Media and External Communication

In January, UNICEF published a [report](#) marking 1,000 days of the conflict. It highlighted that more than three million children were born in Yemen since the escalation of violence in March 2015, and now the country is one of the worst places to be a child. The release was circulated widely across international and Arabic media outlets.

This month the UNICEF Regional Director for the Middle East and North Africa, Geert Cappelaere, also released a statement on the endless violence and inability of the Government to pay teachers in Yemen, which triggered wide coverage across various media outlets.

Social Media Highlights for January 2018

| TWITTER | |
|-------------------------------|---------------------------------|
| Followers | 14.38K |
| Tweets impressions | 1.1 million |
| Top tweet | 67K impressions |
| Total tweets (Arabic/English) | 86 |
| FACEBOOK | |
| Net new page likes/ followers | 1.1K |
| Total Reach | 280K |
| Key post | 30K reach |

Funding*

| Funding Requirements (as defined in Humanitarian Appeal of 2018 for a period of 12 months) | | | | | | |
|--|--------------------------|---|---|---------------------------------|--------------------|------------|
| Appeal Sector | 2018 Requirements (US\$) | Funding Received Against 2018 Appeal (US\$) | Carry Forward and Other Allocations (US\$) ** | 2018 Funds Available (US\$) *** | Funding Gap | |
| | | | | | \$ | % |
| Nutrition | 113,093,609 | 2,999,785 | 59,291,945 | 62,291,730 | 50,801,879 | 45% |
| Health | 107,264,969 | 1,327,369 | 60,729,801 | 62,057,170 | 45,207,799 | 42% |
| Water, Sanitation and Hygiene | 79,100,000 | 13,926,887 | 47,820,770 | 61,747,657 | 17,352,343 | 22% |
| Child Protection | 33,238,526 | 241,725 | 8,494,616 | 8,736,341 | 24,502,185 | 74% |
| Education | 30,840,473 | 45,089 | 7,550,770 | 7,595,859 | 23,244,614 | 75% |
| C4D | 14,553,270 | 1,000,384 | 4,755,484 | 5,755,868 | 8,797,402 | 60% |
| Total | 378,090,847 | 19,541,240 | 188,643,384 | 208,184,624 | 169,906,223 | 45% |

*The UNICEF requirement and funding received for 2018 is per a revised Humanitarian Action for Children appeal soon to be published by UNICEF.

**'Carry Forward' includes funds which were received against the 2017 HAC appeal (figures provisional and subject to change) and 'Other Allocations' includes additional contributions from multi-lateral organizations which will contribute towards 2018 Results.

***'Funds Available' as of 26 February, includes total funds received against current appeal plus Carry Forward and Other Allocations. It also includes Cross-Sectoral Costs which are vital to support programming in a high-cost operating environment such as Yemen; costs include security, field operations, monitoring, communications and visibility. Additional resources are also mobilized to strengthen social protection, WASH and health systems for short- and long-term needs, including those arising from humanitarian situations. This includes the Emergency Cash Transfer programme, mitigating the impact on communities of humanitarian and non-humanitarian shocks.

UNICEF wishes to express its deep gratitude to all public and private sector donors for the contributions and pledges received, which are making the current response possible. UNICEF would especially like to thank National Committees and donors who have contributed 'unearmarked' funding. 'Unearmarked' funding gives UNICEF essential flexibility to direct resources and ensure the delivery of life-saving supplies and interventions to where they are needed most. Continued donor support is critical to continue scaling up the response.

Next SitRep: 15/3/2018

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UNICEF HAC, 2017: www.unicef.org/appeals/yemen.html

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Annex A

SUMMARY OF PROGRAMME RESULTS

| 2018 Programme Targets and Results ⁶ | Overall Needs ⁷ | Cluster Response | | UNICEF and IPs | |
|--|----------------------------|------------------|---------------|------------------------------|----------------|
| | | 2018 Target | Total Results | UNICEF 2018 Target | Total Results |
| Nutrition | | | | | |
| Number of targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care for specified period of time | 400,000 | 276,000 | 1,390 | 276,000 | 1,390 |
| Number of targeted caregivers of children 0-23 months with access to IYCF counseling for appropriate feeding | 2,300,000 | 1,404,000 | 5,840 | 983,000 | 5,840 |
| Number of children under 5 given micronutrient interventions (MNPs) | | 730,000 | 7,925 | 730,000 | 7,925 |
| Number of children under 5 given micronutrient interventions (Vitamin A) | 4,600,000 | 4,177,000 | 693 | 4,177,000 | 693 |
| Health | | | | | |
| Number of children under 1 vaccinated against measles (MCV1) | | | | 912,560 | 7,333 |
| Number of Children under 5 vaccinated against polio | | | | 5,352,000 | 8,958 |
| Number of children under 5 receiving primary health care | | | | 1,500,000 | 41,174 |
| Number of pregnant and lactating women receiving primary health care | | | | 811,055 | 18,151 |
| WASH | | | | | |
| Number of people having access to drinking water through support to operation, maintenance and rehabilitation of public water systems | | 7,288,599 | 1,116,157 | 5,500,000 | 959,795 |
| Number of people gaining access to emergency safe water supply | | 1,703,359 | 221,784 | 800,000 | 139,225 |
| Number of people with access to adequate sanitation (through emergency latrine construction or rehabilitation and dislodging) | | 1,223,908 | 17,532 | 800,000 | 0 |
| Number of people provided with standard hygiene kit (basic and consumables) | | 2,322,981 | 43,006 | 800,000 (basic Kits) | 0 |
| | | 5,332,045 | 661,603 | 3,400,000 (consumable kits) | 648,317 |
| Number of people living in cholera high risk areas having access to household level water treatment and disinfection | | 4,202,324 | 665,868 | 3,400,000 | 648,317 |
| Child Protection | | | | | |
| Percentage of MRM incidents verified and documented from all the reported incidents | | 90% | 84% | 90% | 84% |
| Number of children and caregivers in conflict-affected area receiving psychosocial support | | 682,268 | 45,284 | 594,937 | 33,407 |
| Number of children and community members reached with lifesaving mine risk education messages | | 1,684,106 | 84,091 | 1,468,541 | 82,880 |
| Number of children reached with critical child protection services (case management focused on: family tracing and reunification, reintegration, GBV response and victims' assistance) | | 12,932 | 140 | 10,345 | 73 |
| Education | | | | | |
| Number of affected children provided with access to education via improved school environment (Temporary Learning Spaces, school rehabilitation, Equipment and Classroom Furniture) and alternative learning opportunities | 4,100,000 | 738,995 | 0 | 639,100 | 0 ¹ |
| Number of affected children receiving psychosocial support services and peace building education in schools | | 1,000,000 | 28,000 | 429,000 | 28,000 |
| Number of affected children supported with basic learning supplies including school bag kits | | 1,500,000 | 10,121 | 473,000 | 10,121 |
| C4D | | | | | |
| Number of affected people reached through integrated C4D efforts | | | | 2,200,000 (14 key practices) | 165,719 |
| | | | | 4,000,000 (04 key practices) | 325,454 |
| Number of social mobilisers trained and deployed for key behavior change in cholera high risk areas | | | | 10,000 | 5,163 |

Footnote:

Education 1: UNICEF activities under this indicator have been delayed in January and therefore results will be reported as of next month.

⁶ All results as of 31 January 2017.

⁷ Estimations as cited in the Yemen Humanitarian Needs Overview, Dec. 2018.