



©UNICEF Yemen/2019/Saleh Mohammed Kassem.  
A 10-year-old girl at the 30th anniversary of the Convention on the Rights of the Child event in Aden.

# Yemen Country Office Humanitarian Situation Report



Reporting Period: 1 - 30 November 2019

## Highlights

- According to the United Nations Country Task Force on Monitoring and Reporting, 7 children were killed, 29 children were injured, and 2 boys were recruited by parties to the conflict in November.
- In November, there have been 43,831 suspected Acute Watery Diarrhoea (AWD)/cholera cases and 12 associated deaths. Over 11,000 AWD/cholera cases, a quarter of the national caseload, were treated in 328 Oral Rehydration Centres (ORC) and 70 Diarrhoea Treatment Centres (DTC).
- Between 20 October - 10 November, 26 deaths associated with dengue fever were reported from Al Hudaydah, Taizz, and Hajjah governorates. UNICEF screened and treated 222 suspected Dengue Fever cases in Al Jarahi between 13 - 18 November.
- As of November, 287,336 children with Severe Acute Malnutrition (89 per cent of annual target) were admitted for treatment in 2019.

## Situation in Numbers



**12.3 million**  
children in need of  
humanitarian assistance

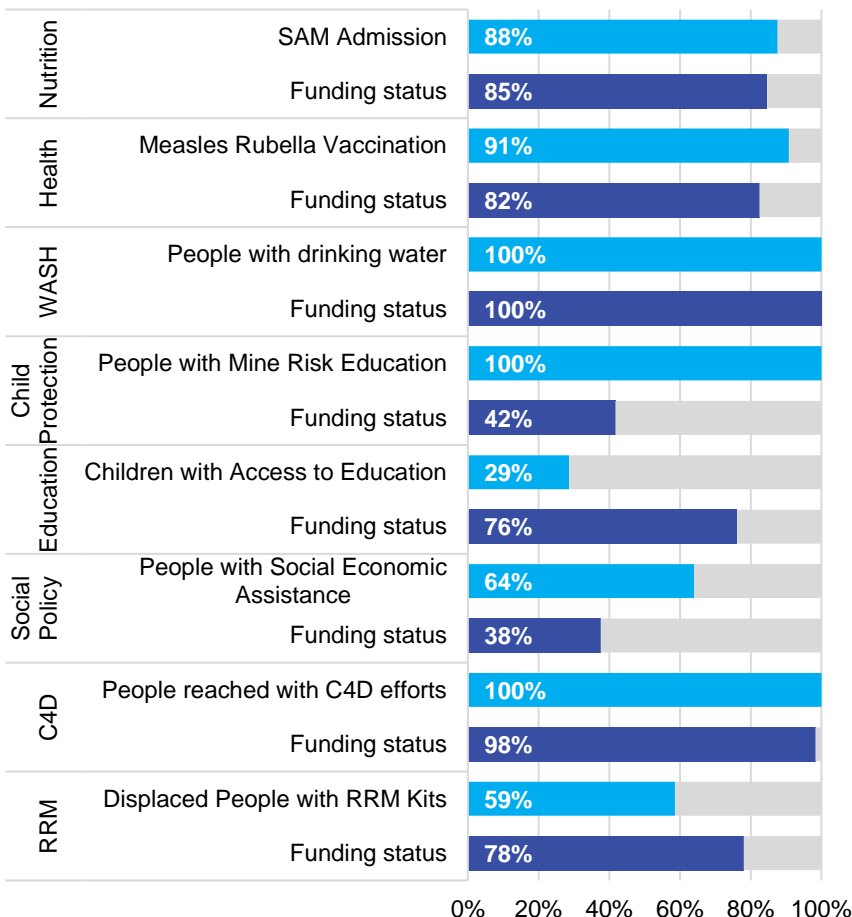


**24.1 million**  
people in need  
(OCHA, 2019 Yemen Humanitarian  
Needs Overview)



**1.71 million**  
children internally displaced  
(IDPs)

## UNICEF's Response and Funding Status\*



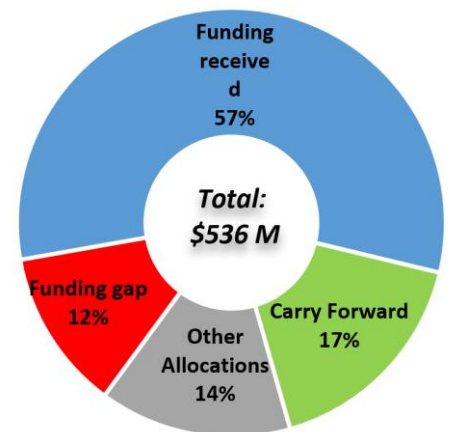
## UNICEF Appeal 2019

**US\$ 536 million**

Funding Available\*

**US\$ 471 million**

## Overall 2019 Funding Status



\*Funds available includes funding received for the current appeal (emergency and other resources), the carry-forward from the previous year and additional funding which is not emergency specific but will partly contribute towards 2019 HPM results.

\* Response indicators represent only parts of section activities, while funding status represent the sections' entire funding level.

## Funding Overview and Partnerships

Between January and November 2019, UNICEF received \$302.8 million of contributions towards the 2019 Humanitarian Action for Children (HAC) appeal, which is aligned with the Yemen Humanitarian Response Plan for 2019. UNICEF wishes to express its deep gratitude to all public and private sector donors for contributions and pledges received, which make the current response possible. In addition, UNICEF has \$167.7 million that was from other allocations or carried forward from 2018. In November, UNICEF received generous contributions of \$70 million from the Kingdom of Saudi Arabia, \$35 million from the United Arab Emirates, \$3 million from the Japanese Committee for UNICEF, \$1.1 million from Austria, \$0.1 million from the Belgian Committee for UNICEF, and \$50,000 from Croatia towards the HAC appeal; however, a funding gap of \$64.9 million remains. There is a 58 per cent funding gap to implement child protection activities as part of the HAC 2019.

## Situation Overview & Humanitarian Needs

In November, attacks on civilians continued across the country. On 6 November, airstrikes hit a key hospital which was providing free medical services to hundreds of thousands of Yemenis, destroying a large warehouse of medical supplies, however no casualties were reported. On 22 and 27 November, there were shelling attacks on Al-Raqw market in Sa'ada, killing 20 people and injuring 40 others, including five children. Casualties in the second attack on the market include Ethiopian and Somali nationals; migrants and asylum-seekers who are also suffering from the conflict<sup>1</sup>. In the reporting month, the United Nations Country Task Force on Monitoring and Reporting verified 92 per cent of cases of grave child rights violations. From the verified incidents, seven children (three girls and four boys) were killed, 29 children (five girls and 24 boys) were injured, and two boys were recruited by parties to the conflict.

During the reporting period, 43,831 suspected Acute Watery Diarrhea 'AWD'/cholera cases and 12 associated deaths<sup>2</sup> were recorded (case fatality rate [CFR] 0.03 per cent). Al Bayda, Lahj, and Sa'ada are most effected with those cholera associated deaths in November. While children under five represent 29.3 per cent of the total suspected cases, the elderly are most seriously affected where deaths are higher among the over sixty age group, indicating possible comorbidity and mortality causes. While the suspected AWD/cholera cases slightly increased in the first week of November, it has been decreasing since the second week of November. Suspected cholera cases were reported in 287 out of 333 districts in November.

Between 1 January - 10 November, the cumulative suspected dengue fever cases were 30,275, with 138 associated deaths (CFR 0.5 per cent). A total of 173 districts have reported suspected dengue cases in October 2019 with 85 new districts affected over the past month. Between 20 October - 10 November, 26 deaths of suspected dengue were reported from Al-Hudaydah, Taizz, and Hajjah governorates. Health authorities have requested all UN agencies to prioritize dengue response support in the country focusing on community awareness and prevention interventions, environmental management and medical supplies. Despite an initial slight increase in the number of AWD/cholera cases in the first week of November, the numbers however, have started to decline in the following week when the rainy season stopped and the increased number of partners' interventions contributed to a decrease in the suspected cases.

In its continuing effort to strengthen risk prevention and management measures, UNICEF conducted an audit of its operations covering the period from January 2017 to March 2019<sup>3</sup>. It is now actively implementing a series of measures to mitigate identified risks as it continues to deliver its assistance for children in the complex environment of Yemen.

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<sup>1</sup> Assistant Secretary-General for Humanitarian Affairs and Deputy Emergency Relief Coordinator Ursula Mueller - Briefing to the Security Council on the Humanitarian Situation in Yemen, 22 November 2019.

<sup>2</sup> Yemen Cholera Outbreak – Interactive Dashboard(<http://yemeneoc.org/bi/>), data as at 30 November 2019.

<sup>3</sup> Internal Audit of the Yemen Country Office, October 2019

[https://www.unicef.org/auditandinvestigation/files/2019\\_oiai\\_yemen\\_country\\_office.pdf](https://www.unicef.org/auditandinvestigation/files/2019_oiai_yemen_country_office.pdf)

## Summary Analysis of Programme Response

### AWD/Cholera Response

UNICEF supported 328 ORCs and 70 DTCs in 201 districts in 18 governorates. In November, over 11,000 AWD/cholera cases were treated in those ORCs/DTCs, representing one-quarter of the national caseload.

Over 700,000 people have been reached with first-line emergency WASH response in the high-risk areas of AWD/cholera by rapid response teams (RRTs) interventions across Yemen. The 750 RRTs' first-line response includes the household-level water disinfection, distribution of chlorination tablets, distribution of consumable hygiene kits and hygiene awareness sessions for establishing a firewall at the household level. UNICEF continued its support for the operation and maintenance of the Waste Water Treatment Plants (WWTP), by providing fuel, electricity, spare parts, alternative energy options and emergency maintenance of sewage systems, benefiting approximately 2.6 million people in high-risk AWD/cholera locations in Amanat Al-Asimah, Al-Hudaydah, Amran, Dhamar, Ibb and Taizz.

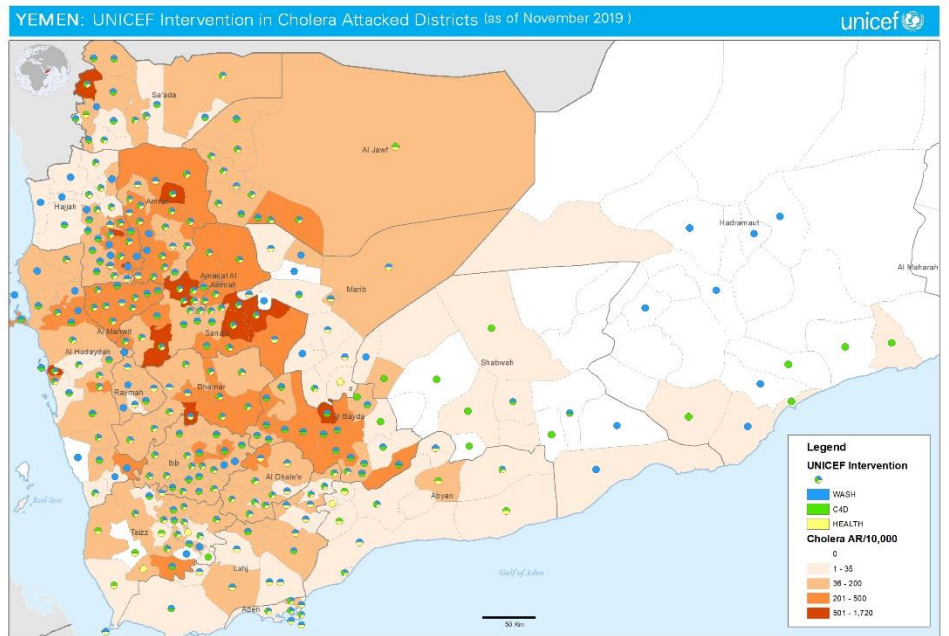
School-based cholera prevention interventions continued, following a Training of Trainers workshop for 30 school health facilitators, who conducted cascade training for school health focal persons in 128 schools. The training will strengthen the capacity of school health facilitators on cholera preventive practices, and social and behavioral change approaches. During this period, prevention activities in schools reached 30,000 children. Other prevention interventions included 41,528 house-to-house visits, 141 counseling sessions, 155 drama shows, 5,200 mosques events, 10,100 community meetings and events, 280 school events as well as 206 sessions in health facilities and 1,248 women's gatherings were facilitated in cholera affected 17 governorates<sup>4</sup>.

### Health and Nutrition

With the spike of dengue fever associated deaths since the end of October, UNICEF supported the Al-Jarahi emergency camp in Al Hudaydah through the Sana'a governorate health office with essential medicines for the treatment of dengue cases, including IV fluid and paracetamol, between 13-18 November. A total of 222 suspected cases were screened and treated from Al-Jarahi and districts around the camp. Through its partner, UNICEF supported a mobile team in Al Jarahi who provided screening and treatment of suspected cases.

Roughly 58,639 children under one were vaccinated against the major childhood diseases, and 21,523 women aged 14-59 years were vaccinated against Tetanus and Diphtheria through the third round of Integrated Outreach Activities that was conducted in Hajjah, Al-Mahweet, Raymah, Sana'a, Dhammar, Amran, Marib, Ibb, Al-Hudaydah, Al-Jawf, and Taizz. Roughly 12,968 pregnant and lactating women (PLW) received primary health care services, 52,208 children under five received services for common childhood illnesses. UNICEF initiated the Effective Vaccine Management (EVM) assessment on the performance of vaccine management, to identify gaps and recommend actions for improvement. In November, UNICEF provided training to 16 EVM country managers and assessors on vaccine management as well as setting the country profile and the assessment tool to conduct a planned EVM assessment in Yemen in March 2020. A total of 15 SMART surveys were validated by the Nutrition Cluster Thematic Working Group (TWG), in the 10 governorates covered in 2019. Of the 15 surveys, six surveys in Hajjah, Taizz and Abyan indicated a deteriorating nutrition situation either from low to medium, medium to high or from high to very high; while eight remained in the same level of classification and one indicated an improvement. It is important to note that, the 15 surveys at the governorate and livelihood levels covered districts across the country, including 25 districts out of the 45 in the Integrated Famine Risk Reduction districts. The nutrition situation in the 25 districts indicated a deterioration in 12, the same level in 12 and improvement in one.

Up to November 2019, UNICEF and its partners have scaled-up nutrition interventions in the management of severe acute malnutrition (SAM) to cover 3,958 health facilities with OTPs across the country, representing 89 per cent of all functional health



Cholera-attacked districts as of November 2019

<sup>4</sup> Ibb, Taizz, Amanat Al Asimah, Al Bayda, Amran, Dhamar, Marib, Sana'a, Al Dhale'e, Shabwah, Hadramaut, Lahj, Aden, Sa'ada, Al Jawf, Al Hudaydah, and Hajjah

facilities. This covers 332 districts from all governorates in which 178 districts have 100 per cent coverage and 138 districts' coverage is between 50 - 99 per cent. Sixteen districts have coverage less than 50 per cent, and only one district (Midi in Hajjah governorate) has no coverage due to conflict. During the reporting period, 104 mobile teams were launched in 83 districts to hard-to-reach areas with no access to health facilities. Through the interventions of these fixed and mobile sites, 281,893 children with severe acute malnutrition have been admitted for treatment nationwide between January - October. To date, UNICEF has reached 88 per cent of its annual target of children with SAM for treatment, and 79 per cent of total children with SAM. At least 191 districts reached the annual target of SAM admission while 85 districts are expected to reach the target by the end of the year. The remaining districts (57 districts) still have low coverage in which 28 per cent of them have access and security constraints due to the conflict.



©UNICEF Yemen/2019. A rural solar project in Sada'a governorates.

## Water, Sanitation and Hygiene

With the outbreak of dengue fever since the end of October, WASH Cluster partners, including UNICEF, integrated programme interventions in the dengue response to the Health Cluster. Interventions included cleaning campaigns in Taizz city, awareness sessions and dewatering of the stagnated water in Bayt Al-Faqih and Az Zuhrah districts of Al Hudaydah.

UNICEF continued its support for the operation and maintenance of the water supply systems both in major cities and rural areas to provide safe drinking, reaching 3.4 million people internally displaced persons (IDPs) in 15 major cities of Yemen. This intervention includes the provision of fuel, electricity, spare parts, solar energy, and disinfectants. Furthermore, emergency WASH services were provided

to 120,000 IDPs in Hajjah, Al Hudaydah, Ibb, Dhamar and Amran Governorates, with the installation of solar pumping units in 56 locations. From this assistance, 120,000 people in rural areas have improved access to water supply, without dependence on fuel.

World Toilet Day was celebrated on 19 November as part of this year's sanitation scale-up. UNICEF supported the WASH Awareness Centre by launching an activity/competition for seven days under the slogan "Clean toilet, Clean house", in high-cholera-affected districts in Amanat Al Asimah, Amran, Dhamar, Sana'a, Al Hudaydah, Ibb, and Hajjah.

Due to denial of access, WASH Cluster partners weren't able to conduct three field visits in Dhamar, dengue response activities in Hajjah and Dhamar, RRT activities in Maliyah district and first-line WASH response in Hayfan and Sharab Al-Rawnah districts in Taizz, and regular project visits for partners in Al- Hudaydah were not able to be implemented by WASH Cluster partners. Additionally, the threat of eviction of IDPs still poses a major challenge to the WASH Aden Sub-Cluster partners to deliver the required WASH assistance to the IDP sites in Al-Mukalla and Al Dhale'e.

## Child Protection

There are 66 children (12-17 years) who are associated with armed groups and forces and are in custody in Sana'a and require immediate release and reintegration through a structured interim care centre. UNICEF led negotiations with parties to the conflict, in order to establish a roadmap to end grave child rights violations, without any significant breakthrough. Due to the increased tension in the coastal governorates, the needs of children increased proportionately. Through the Child Protection Sub-Cluster, UNICEF provided predictable leadership to agencies responding to child protection needs. UNICEF delivered mine risk education in schools and communities, resulting in a 6 per cent increment in reach compared to October 2019 and benefitting 69,014 children (34,013 girls and 35,001 boys) and 21,939 adults (9,183 females and 12,756 males) in four conflict-affected governorates (Al-Jawaf, Aden, Hajjah, and Taizz). Psychosocial support activities reached 99,783 children (53,139 girls and 46,644 boys) and 7,988 adults (5,843 females and 2,145 males) in 16 governorates. The right to play campaign launched by UNICEF during the 30th anniversary celebration of the United Nations Convention on the Rights of the Child has contributed to the sharp increment in children reached in psychosocial support. In November, 3,550 (1,539 girls and 2,011 boys) benefited from case management services, representing a 46 per cent increment since October 2019; these children received medical care for injuries, psychological first aid, family tracing and reunification, social-economic empowerment, legal aid, and referral to schools. Access in hard-to-reach communities remained difficult due to administrative bottlenecks from the Supreme Council for the Management and Coordination of Humanitarian Affairs and Disaster Recovery at both central and decentralized levels. Due to access restriction, psychosocial support and mine risk education activities were not fully implemented in Sa'ada, Al-Jawaf, and Al Bayda. High level advocacy through the Humanitarian Coordinator and UNICEF's management was conducted.

## Education

The issue of unpaid teachers continues to be the largest challenge in the education sector which has a profound effect and impact on access to education by children in Yemen. UNICEF continued to advocate for the resumption of salaries for teachers and an accelerated Education in Emergencies response, to keep education accessible for children across the country. In November,

tendering processes and preparatory construction works were ongoing to rehabilitate classrooms or repair WASH facilities in around 990 affected schools in different governorates. Additionally, preparatory work is ongoing to distribute more than 260,000 school bag kits in various governorates. There is an insufficient number of schools and classrooms with the capacity to host IDP children due to an increase of displaced children from the conflict. UNICEF's effort to provide access to education through improved school environment and alternative learning opportunities continued; however, the activity cannot be implemented in the areas controlled by de-facto authorities, as authorities in the areas have not approved to implement the activity.

## Social Inclusion

In November, as part of the Integrated Model of Social and Economic Assistance and Empowerment (IMSEA) project, 1,205 households received educational awareness sessions focused on hygiene practices. IMSEA project is social assistance that is complemented by additional social services, inputs, and linkages to other services to augment income effects. UNICEF reviewed the challenges that were identified during field visits for both IMSEA and Cash Plus initiatives, which provide emergency cash assistance in Amanat Al Asimah Governorate. It was recommended to strengthen coordination with service providers and to improve the case management application for a better understanding of case management needs.

UNICEF, in coordination with the Social Welfare Fund (SWF), conducted the monthly Community Based Organizations (CBOs) meeting which aims to enhance the coordination between UNICEF, SWF, and CBOs to facilitate access to communities in slums. Due to social isolation and marginalization, the slum communities have their specific culture and security concerns. Therefore, it requires CBOs to inform slums to facilitate access and reach beneficiaries. Around 38 participants attended the meeting representing 21 CBOs and SWF offices at the governorate levels. UNICEF with its government counterparts and implementing partners, reviewed the achievements of the year, challenges, and lessons learned. As an outcome of the meeting, suggested mitigations for the challenges will be integrated into key activities for 2020.

## Communication for Development (C4D)

In partnership with the Ministry of Public Health and Population (MoPHP) and the Ministry of Endowment, communication and social mobilization interventions were scaled-up in response to the dengue outbreak in nine affected governorates<sup>5</sup> through community volunteers and religious leaders. The social mobilization and communication interventions promoted hygiene practices in homes and neighborhoods, the use of mosquito nets, recognizing the symptoms of dengue fever and promoting behavioral practices to prevent dengue fever, for affected family members. In the Sana'a Hub, dengue response activities reached 97,440 people on how to prevent dengue in homes and communities. Community volunteers and religious leaders also supported cleaning campaigns for the disposal of waste and stagnant water around dwellings to reduce the breeding sites for the mosquitoes that cause dengue.

C4D interventions are increasingly being hampered through interference by the authorities at the national and sub-national levels. The challenges hampering community engagement efforts include the insistence by authorities that funds for planned interventions with implementing partners should be redirected to activities deemed more important by the authorities. Additionally, implementing partners and UNICEF staff are refused permission by the authorities to conduct field monitoring visits and other community-based activities in part of Ibb, Taizz, Sada'a, and Sana'a.

## Rapid Response Mechanism (RRM)

The situation remains volatile around several frontlines across the country due to different controlling entities, resulting in challenging access issues. Main frontlines are still in Al-Dhale'e, Qata'abah, Hajjah, Abs, and Harath. The recently enforced bureaucratic procedures by the local authorities and lack of approvals for sub-agreements for some implementing partners disrupted the implementation of Rapid Response Mechanism (RRM) activities in some of the targeted areas, primarily in Hajjah and Al-Hudaydah.

In November, UNICEF along with UNFPA and WFP reached 4,809 people from 687 newly displaced families with RRM kits which include essential hygiene items and other supplies. These families have been displaced mainly due to escalations around the front lines in the governorates of Al-Dhale'e, Lahj and Hajjah. RRM kits will meet the most critical immediate needs of IDP families, which are food, family basic hygiene kits, and female dignity kits, as they are uprooted suddenly from their homes without time to take anything with them. To ensure an efficient and complementary emergency response, UNICEF partners reached 438 families (3,066 people) with emergency shelter kits in Al-Hudaydah city and 1,763 families (12,341 people) received non-food items kits in Al-Hudaydah, Lahj, Al-Dahle'e, Taiz, Aden and Ibb governorates. In addition, 648 children and 221 PLW were screened for malnutrition in Sada'a and



©UNICEF Yemen/2019. A Yemeni displaced girl receiving the Rapid Response kit in Al Jawf governorate.

<sup>5</sup> Ibb, Taizz, Al Dhale'e, Dhamar, Marib, Amran, Aden, Al Hudaydah, and Hajjah.

Lahj. UNICEF RRM consortium<sup>6</sup> reached 27,314 individuals from 3,902 vulnerable displaced families with RRM multi-purpose cash assistance (Multi-Purpose Cash Assistance ‘MPCA’) in conflict-affected areas in Al-Dhale’e (Al-Dhale’e and Toban districts), Lahj (Radfan, Al-Milah and Yafa’ districts), Hajjah (Kheran Al-Moharraq district) and Al-Hudaydah (Al-Hali district). MPCA provides the displaced families with the flexibility and dignity to choose how to cover their needs.

## Supply and Logistics

In the reporting month, supplies worth more than \$0.4 million with total weight and volume of 283 metric tons and 1,012 cubic meters respectively arrived in Yemen. The delivery was completed with one dhow to Al-Hudaydah, and two chartered flights to Sana’a. In addition, 11 trucks with supplies worth more than \$0.7 million with total weight and volume of 268 metric tons and 447 cubic meters arrived in Yemen from Salalah, Oman in November. Furthermore, \$5 million worth of supplies was delivered from UNICEF warehouses to end-user beneficiaries.

## Humanitarian Leadership, Coordination and Strategy

WASH Cluster held a sanitation workshop in Sana’a, jointly led by the TWG on sanitation and the Ministry of Water and Environment. The Workshop reviewed new emergency sanitation guidelines for Yemen, best sanitation practices in humanitarian and development context, identified challenges in implementing sanitation and explored innovation and good practices around alternative sustainable sanitation solutions. The participants of the workshop included 59 technical specialists from INGO, NNGO, UN, government and private sector.

In November, ten education projects were submitted to the Yemen Humanitarian Fund (YHF) allocation and reviewed by the Strategic and Technical Review Committees (STRC). Education Cluster submitted Education Cannot Wait First Emergency Response application for grant funding. The Cluster Strategy Task Force is meeting regularly to finalize the review of the Education Cluster strategy.

The Nutrition Cluster coordination team facilitated cluster coordination performance monitoring in Ibb where the partners validated the online survey and prepared an action plan for addressing the gaps in cluster coordination core functions and overall challenges in Ibb.

## Human Interest Stories and External Media

### A helping hand to heroes



©UNICEF/2019/Mahmoud Al-Falsatiny

Al-Sadaqa Hospital, Aden

Al-Sadaqa hospital in Aden is a lifeline to families displaced by the conflict in Yemen. Despite ongoing challenges like the procurement of medicines and vital hospital supplies, and recent civil unrest, hero health workers show up every day to keep babies alive.

<sup>6</sup> ACTED, OXFAM, Norwegian Refugee Council, Danish Refugee Council, Save the Children International led by Action Against Food

For the full Human Interest Story, click [here](#).

## Next SitRep: 28 January 2020

**UNICEF Yemen Facebook:** [www.facebook.com/unicefyemen](http://www.facebook.com/unicefyemen)

**UNICEF Yemen Twitter:** @UNICEF\_Yemen

**UNICEF Instagram:** UNICEF\_Yemen

**UNICEF HAC 2019:** [www.unicef.org/appeals/yemen.html](http://www.unicef.org/appeals/yemen.html)

### Who to contact for further information:

**Bastien Vigneau**  
Deputy Representative  
UNICEF Yemen  
Sana'a  
Tel: +967 712 223 150  
Email: [bvigneau@unicef.org](mailto:bvigneau@unicef.org)

**Bismarck Swangin**  
Chief of Communications  
UNICEF Yemen  
Sana'a  
Tel : +967 712 223 161  
Email: [bswangin@unicef.org](mailto:bswangin@unicef.org)

**Anne Lubell**  
Partnerships Specialist  
UNICEF Yemen  
Amman Outpost, Jordan  
Tel: +962 79 835 0402  
Email: [alubell@unicef.org](mailto:alubell@unicef.org)

## Annex A

### Summary of Programme Results

2019 Programme Targets and Results	Overall needs	Cluster Response			UNICEF and IPs		
		2019 Target <sup>1</sup>	Total Results	Change since last report ▲ ▼	2019 Target <sup>1</sup>	Total Results <sup>1</sup>	Change since last report ▲ ▼
<b>NUTRITION</b>							
Number of targeted children 0-59 months with Severe Acute Malnutrition admitted to therapeutic care	357,487	321,750	287,336	35,940 ▲	321,750 <sup>1</sup>	281,893	35,940 ▲
Number of targeted caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding	2,403,337	1,682,336	2,348,764	280,607 ▲	1,514,102	2,348,764 <sup>4</sup>	280,607 ▲
Number of children under 5 given micronutrient interventions (MNPs)	4,766,718	2,860,031	1,447,354	25,659 ▲	2,860,031	1,447,354 <sup>2</sup>	25,659 ▲
Number of children under 5 given micronutrient interventions (Vitamin A)	4,766,718	4,290,047	88,187	8,969 ▲	4,290,047	88,187 <sup>3</sup>	8,969 ▲
<b>HEALTH</b>							
Number of children under 1 vaccinated against measles (MCV1)					942,842	603,214 <sup>3</sup>	53,968 ▲
Children from 6 months – 15 years vaccinated in MR campaigns					13,032,803	11,837,521 <sup>1</sup>	-
Number of children under 5 vaccinated against polio					5,352,000	621,087 <sup>2</sup>	-
Number of children under 5 receiving primary health care					1,575,000	1,896,145 <sup>4</sup>	111,520 ▲
Number of pregnant and lactating women receiving primary health care					841,097	950,209 <sup>4</sup>	74,526 ▲
<b>WASH</b>							
Number of people having access to drinking water through support to operation/maintenance of public water systems		7,288,599	6,890,715	104,982 ▲	6,000,000	6,322,954 <sup>2</sup>	101,591 ▲
Number of people gaining access to emergency safe water supply		1,703,359	1,157,522	53,037 ▲	1,000,000	691,194 <sup>3</sup>	43,093 ▲
Number of people with access to adequate sanitation (through emergency latrine construction or rehabilitation)		1,223,908	825,401	21,086 ▲	800,000	626,305	12,458 ▲
Number of people provided with standard hygiene kit (basic and consumables)		2,322,981 (BHKs)	682,740	73,904 ▲	800,000	436,453 <sup>4</sup>	73,904 ▲
		5,332,045 (CHKs)	9,402,802	760,329 ▲	4,000,000	9,056,546 <sup>5</sup>	760,329 ▲
Number of people living in cholera high risk areas having access to household level water treatment and disinfection		4,202,324	23,640,199	2,257,402 ▲	3,500,000	23,402,381 <sup>1</sup>	2,257,402 ▲
<b>CHILD PROTECTION</b>							
Percentage of MRM incidents verified and documented from all the reported incidents		90%	82%	6% ▲	90%	83%	6% ▲
Number of children and caregivers in conflict-affected area receiving psychosocial support		882,268	662,692	107,870 ▲	794,825	565,682 <sup>4</sup>	107,771 ▲
Number of children and community members reached with lifesaving mine risk education messages		1,684,106	1,772,668	90,953 ▲	1,365,128	1,761,508 <sup>1</sup>	90,953 ▲
Number of children reached with critical child protection services, including case management and victims' assistance		12,932	17,119	3,592 ▲	10,345	16,600 <sup>2</sup>	3,550 ▲
UNICEF staff and implementing partners trained on Protection from Sexual Exploitation and Abuse (PSEA)					500	701 <sup>3</sup>	-
<b>EDUCATION</b>							
Number of affected children provided with access to education via improved school environment and alternative learning opportunities		891,352	738,496 <sup>6</sup>	30,334 ▲	816,566	233,807 <sup>1</sup>	-
Number of affected children receiving psychosocial support services and peace building education in schools		794,689 <sup>7</sup>	416,673	1,323 ▲	170,000	61,732 <sup>2</sup>	-
Number of affected children supported with basic learning supplies including school bag kits		1,500,000	436,176 <sup>5</sup>	33,062 ▲	996,994	163,031 <sup>3</sup>	187 ▲



Number of teachers/staff in schools (in a total of 10,331 schools) will receive incentives each month		135,359	-	-	135,359	- <sup>4</sup>	-
<b>Social Policy</b>							
Number of targeted marginalized/excluded benefiting from emergency and longer-term social and economic assistance (through case management)					175,000	111,951 <sup>1</sup>	4,608▲
<b>RRM</b>							
Number of vulnerable displaced people receiving RRM kits within 72 hours of trigger for response					2,000,000	1,176,323 <sup>1</sup>	4,809▲
Number of vulnerable persons supported with multipurpose cash transfer					350,000	170,662 <sup>1</sup>	27,314▲
<b>C4D</b>							
Affected people reached through C4D integrated efforts in outbreak response and campaigns					6,000,000	7,146,064	184,546▲
Number of community mobilisers/volunteers trained and deployed for engaging communities in social and behaviour changes practices					5,000	5,639 Reflect narrative <sup>1</sup>	769▲
<b>Footnotes</b>							
<b>Target 1:</b> The Yemen Humanitarian Appeal for Children (HAC) has been revised in April 2019.							
<b>Total Results 1:</b> Data from the field is collected and reported through Field Offices; delays in reporting figures may occur to do lengthy reconciliation. As a result, figures reported may not be an accurate reflection of the results achieved that month and results are added to the next reporting month instead.							
<b>Nutrition 1:</b> The SAM target has been revised as part of the HAC revision in April 2019 and is now higher than that of the Cluster and the minimum number of SAM children targeted under the 2019 HRP. The UNICEF target increased from 80 per cent to 90 per cent of estimated SAM caseload for 2019 (which is estimated at 357,487 cases). UNICEF contributes to 100 per cent of SAM targets at the community level.							
<b>Nutrition 2:</b> The result of this indicator appears low as it is features results from fixed health facilities and mobile teams only. However, almost half of the results of this indicator is attributed to the community health volunteers (CHVs) and the integrated outreach activities.							
<b>Nutrition 3:</b> Vitamin A supplementation will be implemented jointly with national polio campaigns; the first polio campaign is yet to take place.							
<b>Nutrition 4:</b> UNICEF is targeting 63 per cent of the total need. The overachievement of this indicator is attributed to the scale-up of IYCF interventions at health facilities and community levels. However, there is a slight possibility of double counting between different delivery platforms where mothers are receiving this service in two locations. UNICEF is working on improving the reporting tools to minimize the double counting specifically for this indicator and the screening indicator.							
<b>Health 1:</b> A nationwide Measles and Rubella vaccination campaign held in January has been very successful and reached a high number of children.							
<b>Health 2:</b> Low results as no polio campaign has taken place yet; only as part of routine vaccinations. A polio campaign is currently being planned.							
<b>Health 3:</b> The cumulative result is expected to be higher. Results are communicated from district to governorate, then processed at the national level, therefore results are communicated with delays.							
<b>Health 4:</b> This indicator has been over-achieved as UNICEF were able to provide operational cost for 18 hospitals for free maternal, newborn, and child health services.							
<b>WASH 1:</b> This year there have been a higher number of suspected cholera cases than the usual trend in previous years. Therefore, the originally planned target is much lower than the current need, and this is reflected in the over-achievement of the targets.							
<b>WASH 2:</b> Due to an upsurge and increase of expected cases of AWD/suspected cases in the first quarter of 2019, the operational plan for water supply was scaled up to ensure safe drinking water in the affected area. This has led to an over-achievement of this indicator.							
<b>WASH 3:</b> This number has not included the results on water supply chlorination in Amanat Al Asimah and Al Hudaydah, as it was not tracked during the monitoring period.							
<b>WASH 4:</b> This indicator has been under-achieved as it is based on the IDP settlements and needs which have been less than anticipated. It is expected that the reach of BHKs will increase in the rest of the year, as the IDP strategy and guidelines are reviewed.							
<b>WASH 5:</b> This year there have been a higher number of suspected cholera cases in the first half of the year than the usual trend in previous years. Therefore, the RRTs scaled up their response to deliver CHKs to break the transmission of the outbreak, resulting in over-achievement of this indicator.							
<b>Child Protection 1:</b> UNICEF was able to reach more students and community members with mine risk education messages than targeted, at lower cost. Furthermore, due to the conflict in Al Hudaydah and Hajjah, as well as displacement in Abyan and Al Dhale'e, UNICEF scaled up the intervention on MRE.							
<b>Child Protection 2:</b> There is a significant achievement for this indicator, due to an over-achievement of the provision of victims' assistance. This is in part due to large numbers of children sustaining injuries as a result of the conflict, in comparison to planned targets. Furthermore, the unit cost for victims' assistance is sometimes lower than planned when a victim does not require the full package of services, enabling partners to reach more children in need.							
<b>Child Protection 3:</b> This indicator has been over-achieved because more staff members and partners have engaged in the training than initially planned.							
<b>Child Protection 4:</b> Delays and restrictions by authorities to clear Programme Corporation Agreements for partners implementing psychosocial support in Amanat Al Asimah reduced process rate for psychosocial support.							
<b>RRM1:</b> These indicators are under-achieved due to funding gaps.							
<b>Education 1:</b> This indicator is under-achieved because the process of identification and technical assessment of affected schools is taking more time than expected. In addition, some schools within the planned target are part of a suspended grant, which is pending donor approval for reprogramming.							
<b>Education 2:</b> This indicator has low achievement because it can now be implemented in the areas controlled by the internationally recognized government only, as authorities in the areas controlled by de facto authorities have not approved it. Alternatively, UNICEF will resume the PSS interventions in the child-friendly spaces within the communities in the areas controlled by the de facto authorities.							
<b>Education 3:</b> The procurement of learning supplies is through an offshore supplier; the supplies are currently in the pipeline and more than 500,000 school bag kits during the school year 2019-2020.							
<b>Education 4:</b> Teacher incentives were not provided during the month of November.							
<b>Education 5:</b> This indicator has low achievement due to the funding gap. In addition, different requirements and priorities from different authorities limited the implementation of this activity.							
<b>Education 6:</b> The data between January - October was misreported and the correct figure is 708,162.							
<b>Education 7:</b> This target number has been misreported and has being corrected to the accurate target number.							

**Social Policy 1:** The under-achievement of this indicator is because the target was planned to include the scale up of populations in Aden along with smaller slums in Amanat Al-Asimah and Sana'a governorates. However, there have been difficulties in contracting a local implementing partner to conduct vulnerability and needs assessment (due to interference by the authorities) in these new geographic areas and the security and political developments in Aden late August delayed it further.

**C4D 1:** To respond to the increase of suspected AWD/cholera cases and to reduce the spread, UNICEF and its partners scaled up interventions especially in school settings and mosques as parts of the integrated High-Impact Intervention in the 20 sub-districts identified as hotbeds of cholera spreads. This enabled UNICEF to over-achieve this indicator

## Annex B

### Funding Status\*

Funding Requirements (as defined in the revised Humanitarian Appeal of 2019 for a period of 12 months)							
Appeal Sector	2019 Requirements (\$)	Funding Received Against 2019 Appeal (\$)	Carry Forward From 2018 (\$) ***	Other Allocations Contributing Towards Results (\$)*	2019 Funds Available (\$) **	Funding Gap	
						\$	%
Nutrition	124,678,000	58,034,362	26,969,221	20,500,890	105,504,473	19,173,527	15%
Health	85,788,673	19,630,718	26,645,256	24,487,066	70,763,040	15,025,633	18%
Water, Sanitation and Hygiene	135,000,000	114,767,843	24,988,022	19,153,893	158,909,758	-23,909,758	-
Child Protection	38,348,211	11,766,886	2,637,437	1,600,000	16,004,323	22,343,888	58%
Education	106,000,000	72,286,568	5,883,688	2,504,291	80,674,547	25,325,453	24%
Social Policy	14,009,396	1,179,895	481,960	3,600,000	5,261,855	8,747,541	62%
C4D	10,857,795	4,434,883	323,965	5,915,188	10,674,036	183,759	2%
RRM	21,000,000	14,230,782	2,163,227	-	16,394,010	4,605,990	22%
<i>Being allocated</i>	-	6,497,988	-	-	6,497,988	-6,497,988	-
<b>Total</b>	<b>535,682,075</b>	<b>302,829,926</b>	<b>90,092,776</b>	<b>77,761,327</b>	<b>470,684,029</b>	<b>64,998,046</b>	<b>12%</b>

\*This includes additional contributions from multi-lateral organizations and other donors which are focused on system-strengthening but have emergency components and will thereby contribute towards 2019 HPM results.

\*\*'Funds Available' as of 30 November 2019 and includes total funds received against the current appeal plus Carry Forward and Other Allocations. This amount includes 'Cross-Sectoral' costs which are vital to support programming in a high-cost operating environment such as Yemen (such as security, field operations, monitoring, communications and visibility), as well as the 'Recovery Cost' for each contribution which is retained by UNICEF Headquarters. 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 which is mitigating the impact of humanitarian and non-humanitarian shocks on communities.

\*\*\* The amount of carry forward was adjusted to reflect the actual values.