



Reporting Period: 1-30 November 2021

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Yemen Country Office Humanitarian Situation Report

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Highlights

- As the conflict continued to intensify in Marib and along the west coast, UNICEF, in partnership with UNFPA and WFP, continued to reach displaced populations at all frontlines with first line response packages, reaching an additional newly 11,875 displaced households (83,125 individuals) across 20 districts through the Rapid Response Mechanism (RRM).
- From January to November 2021, a total of 6,841,187 children under 5 years were screened for malnutrition. Out of these, 273,049 children with severe acute malnutrition (SAM) were identified and admitted to Outpatient Treatment Programmes (OTPs).
- A total of 40,215 children received the Measles Mumps and Rubella (MMR) vaccine, 26,014 children received their third dose of the Pentavalent vaccine and 18,754 women of childbearing age (15-49 years) received the tetanus diphtheria (Td) vaccine.
- In November, fuel delivery continued in to support 34 Local Water Sanitation Corporations (LWSCs) in 15 Governorates to sustain the provision of safe water supply to approximately 2.48 million people.
- During the reporting period, 134,992 conflict-affected children (68,649 girls; 66,343 boys) and 11,687 adults (5,535 women; 6,152 men). were reached through Mine Risk Education (MRE) activities

Situation in Numbers

(OCHA, 2021 Humanitarian Needs Overview)



11.3 million

children in need of humanitarian assistance



20.7 million

people in need
(OCHA, 2021 Humanitarian Response Plan)



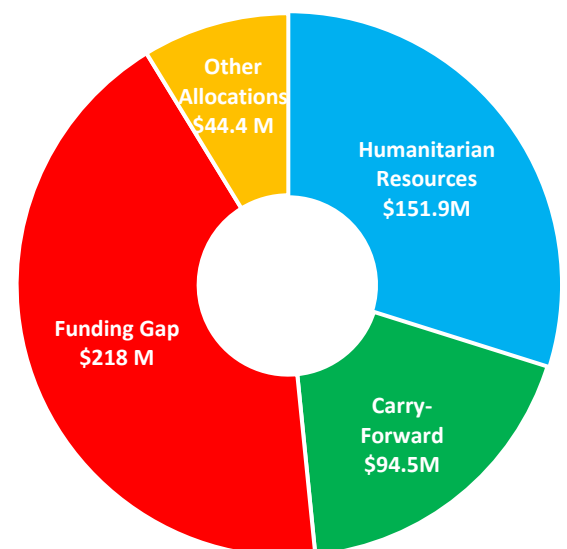
2 million

children internally displaced (IDPs) (UNICEF, 2021 Yemen Humanitarian Action for Children)

UNICEF's Response and Funding Status*

Health	Measles vaccination	76%
	Funding status	18%
Nutrition	SAM Admission	68%
	Funding status	73%
Child Protection	Psychosocial support	51%
	Funding status	52%
Education	Access to education	114%
	Funding status	60%
WASH	People with safe water	109%
	Funding status	81%
Social Policy	Social economic assistance	115%
	Funding status	39%
C4D	People reached with campaigns	128%
	Funding status	54%
RRM	IDPs with RRM kits	62%
	Funding status	82%

Funding Status 2021 Appeal: \$508.8M



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

Funding Overview and Partnerships

The Yemen Humanitarian Action for Children (HAC) revised in May 2021 and aligned with the 2021 Yemen Humanitarian Response Plan (YHRP), appeals for \$508.8 million. UNICEF's humanitarian programmes are planned for nationwide reach targeting populations in areas with the most acute needs, and the appeal integrates the COVID-19 response into programmes planned within the HAC. As UNICEF continues to actively fundraise for its 2021 HAC appeal, as of 30 November 2021, \$151.9 million has been received. A total of \$94.5 million was carried forward from 2020, with an additional \$44.4 million received from other contributions¹. This makes a total of \$290.8 million funds mobilized against the 2021 HAC and leaves a funding gap of \$218 million, or 42 per cent of the total amount required to continue UNICEF's life-saving work in Yemen. During the reporting period, generous contributions were received from the National Committee of Germany, the Government of Canada and GAVI, the Vaccine Alliance.

Situation Overview & Humanitarian Needs

Seven years into the conflict, Yemen remains one of the world's worst humanitarian crisis with 20.7 million people – 71 per cent of the total population – in need of humanitarian assistance. In November 2021, significant challenges to UNICEF's life-saving interventions persisted, including increased fighting in Marib Governorate, heavy rains destroying shelters of internally displaced persons (IDPs) and threatening infrastructure, severe acute malnutrition (SAM) and conflict-torn areas forcing families to flee from their homes. As of the end of November 2021, four million people, including two million children, continue to be internally displaced. In addition, as of late 2020, Yemen hosted approximately 138,000 migrants and 177,600 refugees and asylum-seekers. Over 90 per cent of migrants are of Ethiopian origin and are mostly in transit to Gulf countries to seek livelihood opportunities².

During the month of November 2021, the UN Country Task Force on Monitoring and Reporting (UNCTFMR) documented nine incidents of grave violations against children, of which 44 per cent were verified. The majority of verified violations this month pertained to child casualties, including three children injured (1 girl; 2 boys) by various parties to the conflict. Most of the incidents documented were in the governorates of Al Dhale'e (3) and Al Hodeidah (3).

Approximately 400,000 children under the age of five continue to face SAM, out of a total of almost 2.3 million children facing acute malnutrition. More than 15.4 million people urgently need assistance to access water, sanitation and hygiene (WASH) services. Approximately 20.1 million people need assistance to access health services. Women and children continue to be disproportionately affected with 4.8 million women, 10.2 million children, three million people with disabilities, and 2.1 million men requiring assistance to access health services. If funds for health are not received, support to hospitals will halt, resulting in an interruption of basic life-saving health services for children, mothers and their new-borns, risking their lives and wellbeing. It will also result to a lack of personal protective equipment (PPE) for thousands of health care providers and will affect COVID-19 screenings for hundreds of thousands of Yemenis. Cold chain interruption will negatively impact on immunization programmes for over ten types of lifesaving vaccines, including those for Polio, Measles, and COVID-19.

Between 1 January and 30 November 2021, a total number of 26,891 AWD/cholera suspected cases as well as 17 associated deaths were reported, with a 0.06 per cent case fatality rate (CFR). A significant decline in the number of cholera cases was observed compared with the same period of 2020 (221,847 suspected cases and 81 associated deaths, with a 0.04 per cent CFR). Despite the declining trend in cholera cases, UNICEF continues to closely monitor suspected cases and associated deaths.

As of 30 November 2021, a total number of 10,006 COVID-19 cases were officially confirmed, with 1,950 associated deaths making it 19.5 per cent CFR. Almost all the cases that were reported are from Hadramout, Aden, Abyan, Lahj, Al-Dhale'a, Shabwah, Al-Maharah, Taizz, and Marib governorates, among which the most affected were Hadramout, Aden and Taizz. After the first four cases were reported in 2020, Northern governorates ceased reporting on any new cases. The COVID-19 vaccine deployment has continued in the Southern governorates with ongoing advocacy to have the Northern governorates on board the deployment. As at the end of November 2021, a total of 500,738 people have been vaccinated with at least one dose of Covid-19 vaccine since the commencement of the deployment. Only about 2.6 per cent of the population of the South where the deployment is ongoing has been fully vaccinated as at the end of November 2021.

¹ "Other allocations" include other regular resources (ORR) against the HAC 2021.

² United Nations Yemen Common Country Analysis (CCA) September 2021

Summary Analysis of Programme Response

Health and Nutrition

Two cases of vaccine-derived poliovirus (VDPV) type 2 were reported in Taizz and Marib governorates. UNICEF and WHO are planning with Regional Offices and HQ for three nationwide polio vaccination campaigns with the trivalent oral polio vaccine (tOPV), targeting children under 10 years.

The fourth round of Integrated Outreach (IOR) activities was implemented in 11 northern governorates. During the reporting period, a total of 131,062 children under-one year received different doses of vaccines (BCG, Bivalent Oral Poliomyelitis (bOPV), Penta, Rota, Pneumococcal vaccine (PCV), Polio (IPV), Measles and Rubella (MR)). Of these, a total of 40,215 children received the Measles Mumps and Rubella (MMR) vaccine, and 26,014 children received their third dose of the Pentavalent vaccine. A total of 18,754 women of childbearing age between 15-49 years received the tetanus diphtheria (Td) vaccine. Meanwhile, a total of 81,151 children under five years age benefited from Integrated Management of Childhood Illness (IMCI).

During November, a total of 3.51 million doses of different Routine Vaccines (1.1 million doses of Bacillus Calmette–Guérin (BCG), 1 million doses of Td, 910,000 doses of Rotavirus (Rota), 500,000 doses of Inactivated polio vaccine (IPV)) were delivered in-country.

A total of 44 solar-direct drive refrigerators (SDDs) were delivered to support COVID-19 vaccine deployment, with a total of 719 SDDs installed since January 2021 in the Health Facilities (HF) in support of the EPI cold chain.

The rehabilitation works of triage areas and temporary isolation rooms in 44 facilities in 8 Governorates (Abyan, Lahj, Al-Dhale'a, Shabwah, Hadramout, Al-Maharah, Socotra, and Taizz) were supported by UNICEF throughout the reporting period. A total number of 10,965 cases were screened for COVID-19 in the UNICEF-supported triage facilities, (51.2 per cent female; 20.7 per cent children under 5 years of age). 153 suspected cases (48.3 percent females; 9.1 per cent children under 5 years of age) were referred to isolation centres. 51 cases (out of the total 153 referred cases) were admitted to isolation units/centres for further management.

In response to the nutrition situation in Yemen which suffers from persistently high acute malnutrition rates³, UNICEF supported the scaling up of the integrated Community Based Management of Acute Malnutrition (CMAM) programme. The response in 2021 has focused on the 209 priority districts that were classified with a “deteriorating” nutrition situation in the Integrated Food Security Phase Classification Acute Malnutrition (IPC AMN) analysis, released in March 2021.

From January –November 2021, a total of 6,841,187 children (3,400,451 girls; 3,440,736 boys) under 5 years were screened for malnutrition. Out of these, 273,049 children (155,275 girls; 117,774 boys) with severe acute malnutrition (SAM) were identified and admitted to Outpatient Treatment Programmes (OTPs), reaching 85 per cent of the annual target, and 76 per cent of the national SAM burden. Furthermore, 26,999 children (14,015 girls; 12,984 boys) with SAM and complications were also admitted to therapeutic feeding centres (TFCs). The cure rate for SAM treatment, at 89 per cent at the end of the reporting period, was within the acceptable minimum Sphere standard for recovery of > 85 per cent.

During the same period, a total of 2,543,370 children (1,250,278 girls; 1,293,092 boys), received deworming tablets, reaching 98 per cent of the annual target. 2,558,454 children (1,258,025 girls; 1,300,429 boys) received micronutrient sprinkles (90 per cent of the annual target), and 3,164,830 children (1,565,226 girls; 1,599,604 boys) were reached with Vitamin A through routine programmes as well as the Polio and Vitamin A campaign implemented in the northern part of the country (68 per cent of the annual target). In addition, a sum of 1,680,171 mothers (137 per cent of the annual target) received Iron Folate supplementation, and 3,013,858 mothers (175 per cent of annual target) received infant and young child feeding (IYCF) consultations.

This was attained through 4,489 outpatient therapeutic programmes (OTPs) (with a reporting rate of 87 per cent), along with reports received from 21,624 active Community Health and Nutrition Volunteers (CHNVs) (59 per cent reporting rate). 288 mobile teams conducted Mid-Upper Arm Circumference (MUAC) campaigns in 17 northern governorates through three integrated outreach rounds, 2,457 IYCF corners, and Vitamin A supplementation through the Polio campaign.

³ In partnership with the government and nutrition implementing partners

UNICEF supported the finalization of the Yemen Nutrition Information Systems (NIS) costed Detailed Implementation Plan (DIP) for 2022-2023, estimated at USD 1 million. A donor advocacy meeting on the workplan is scheduled for January 2022. UNICEF is the co-Chair of the Nutrition Information Working Group alongside the Ministry of Public Health and Population (MoPHP).

Positive progress is reported with the ongoing SMART surveys in Yemen: out of 44 planned SMART surveys, 7 were completed for the northern governorates and 11 in the southern governorates, reaching 75 per cent achievement. By the end of the reporting period, a total of 15 SMART surveys were at the data collection stage and 2 were planned to start enumerators training mid-December. 6 SMART surveys were planned but have not yet started. Three out of these six were constrained, and actions have been taken to proceed with the implementation of the remaining surveys in December.

Child Protection

During the reporting period, 146,679 conflict-affected people were reached through MRE activities, including 134,992 children (68,649 girls; 66,343 boys) and 11,687 adults (5,535 women; 6,152 men) in nine governorates (Aden, Al Hodeidah, Amran, Hajjah, Ibb, Lahj, Sana'a, Amanat al Asimah, and Taizz). MRE was delivered in schools and child-friendly spaces, and throughout community campaigns while using COVID-19 preventative measures. 276,299 women and girls were reached with GBV risk mitigation activities and received gender responsive hygiene kits.

Through a network of fixed and mobile child-friendly spaces (CFS), UNICEF provided psychosocial support to 46,501 people across 12 governorates (Abyan, Aden, Al Bayda, Al Hudaydah, Al Jawf, Hadramout, Lahj, Hajjah, Raymah, Sa'ada, Marib, and Amanat Al Asimah) including 37,732 children (20,161 girls; 17,571 boys) and 8,769 adults (5,011 women; 3,758 men).

UNICEF continued to support the referral and provision of critical services for the most vulnerable children through the case management program. 729 children (277 girls; 452 boys) were identified by trained case managers, out of which 706 children (263 girls; 443 boys) received more than one service.

The Child Protection Area of Responsibility (CP AoR) provided primary caregivers with community-based mental health and psychosocial support by CP AoR partners, reaching a total of 47,458 people including 38,563 children (20,565 girls; 17,998 boys) and 8,895 adults (5,137 women; 3,758 men). The CP AoR conducted a capacity needs assessment aiming to identify needs and gaps amongst the CP AoR's members. Psychosocial distress, child labour, domestic violence, and other harmful practices were identified as the most frequent risks for children in the communities. Responders reported the need to receive more capacity building on Child Protection Minimum Standards in Humanitarian Action (CPMS) and psychosocial support (including Psychological First Aid & CFS programming). The CP AoR is planning to build member capacity in the first quarter of 2022.

Education

During the month of November, UNICEF supported the Ministry of Education (MoE) in the rollout of a package of training modules targeting teachers, caregivers, students and education personnel, benefitting 5,090 persons (29 per cent females) in Sana'a City and 12 northern governorates (Al-Bayda, Al Hodeidah, Al-Jawf, Al-Mahweet, Amran, Dhamar, Hajjah, Ibb, Raymah, Sada'a, Sana'a, and Taizz). The training included selected modules including:

- i) Active Learning and Classroom Management (795 teachers; 497 females),
- ii) Safe School Protocols (1,570 teachers; 328 females), and
- iii) Planning and School Leadership (1,072 Student Council Members; 450 girls; 1,653 Father-Mother Council members; 200 females). Trainings in southern governorates will start in December 2021.

As part of the Education in Emergencies (EiE) response, UNICEF signed an agreement with the Norwegian Refugee Council (NRC), and with the National Foundation for Development and Humanitarian Response (NFDHR), aiming to provide 14,000 children (60 per cent girls) in four districts in Marib governate with continued access to education and child protection services over a 12-month period. UNICEF seeks to scale up its response for the IDP children of Marib governorate, among the most vulnerable having been displaced already twice or three times due to the current wave of escalation of the conflict.

In addition, UNICEF provided 25 Temporary Learning Spaces (TLS) in Taizz, benefitting 1,500 children (681 girls; 819 boys); 13,081 School-Bag Kits (SBKs) (1 per child) in Aden, Al Hodeidah, Lahj, and Marib; and Personal Protective

Equipment (PPE) (e.g. masks, hand sanitizer and thermometers) in 698 schools in Abyan, Al-Dhale'a, Aden, Al Hodeidah, Lahj, Marib, Shabwah, and Taizz, benefitting around 30,000 children. UNICEF continues to support the rehabilitation of WASH facilities in school, critical component to ensure children can access a safer learning environment. The rehabilitation of WASH facilities in 45 schools was concluded, benefitting 37,827 children (19,998 boys; 17,829 girls) in Abyan and Al Hodeidah.

The Education Cluster conducted a workshop on Accountability to Affected Persons (AAP) on 20-22 November, training 40 staff members from the MoE and national NGO partners.

Water, Sanitation and Hygiene (WASH)

UNICEF continued emergency response activities during the reporting period, including water trucking, water quality monitoring (WQM), chlorination activities, the installation of prefabricated (prefab) emergency latrines, the distribution of basic and consumable hygiene kits, and hygiene promotion sessions for IDPs in Marib in collaboration with the General Authority of Rural Water and Sanitation Projects (GARWSP), Local Water Sanitation Corporations (LWSCs) and Tabassam. UNICEF also supported the installation, repairs and rehabilitation of water distribution points, the desludging of sewage from full pits, and hygiene promotion in partnership with the GARWASP Emergency Unit (EU), as well as several National NGOs. The interventions benefitted more than 227,000 IDP's and 20,000 individuals from host communities.

During November, fuel delivery continued to support 34 LWSCs in 15 Governorates to sustain the provision of safe water supply to approximately 2.48 million people, with the support of the Yemen Humanitarian Fund's Reserve Allocation. In addition, UNICEF supported Crisis and Disasters Response Sustainable Committees (CDRSCs)/Rapid Respond Teams (RRTs) in the integrated response to AWD/suspected cholera and malnutrition cases through the provision and distribution of hygiene materials and conducting hygiene awareness sessions and trainings., benefitting a total of 263,711 people, through the operation of the in Ibb, northern Taizz, Al-Dhale'a, Hodeidah, Raymah, Mahweet, Raymah Al-Jawf, Sa'ada, Amanat al Asimah, Marib, Sana'a, Dhamar, Amran, and Al Bayda governorates. These interventions included the distribution of different WASH supplies, including basic hygiene kits, consumable hygiene kits, plastic water tanks size 1,000 and 2,000 litre, purification chlorine tablets,, hygiene promotion, and the chlorination of water storages at the household level, complemented with water quality monitoring and the chlorination of water supply sources.



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The WASH Cluster organized the Humanitarian Programme Cycle (HPC) partners' briefing workshop, and discussed strategic pillars for 2022 as well as mitigation measures on sustaining WASH services in IDP sites. The Annual Cluster Team meeting successfully developed strategic pillars for 2022, revised the WASH Thematic Framework, and drafted the Annual Work Plan for the Global WASH Cluster Strategic Advisory Group (SAG) review. The cluster also supported the Integrated Water Resources Management workshop in Aden in close collaboration with the WASH section. The Humanitarian Response Plan (HRP) funding level was increased to 13.8 per cent, compared to 12 per cent in September 2021. However, significant funding shortages continue to pose major challenges for the continued provision of life-saving WASH response activities into early 2022.

Social Protection and Inclusion

During the reporting period, UNICEF continued to implement the Community Shielding Project, which supports individuals who are at high risk of being infected by COVID-19 and have a limited protection capacity. As part of this project, UNICEF implemented the Humanitarian Cash Transfer (HCT) Initiative, which provides cash to the most vulnerable in Taizz City to help them cope with the extended impact of COVID-19 by improving family economic conditions. As a result, 2,971 households (HHs) (90 per cent of the targeted 3,000 HHs) from vulnerable populations were reached in three districts during the reporting period (Salah, AlQaherah, and Almudafer).

UNICEF continued prioritizing and supporting the most vulnerable people and communities, a with focus on vulnerable communities in Amanat Al Asimah and Sana'a through the Integrated Model of Social and Economic Assistance and Empowerment (IMSEA) project. During the reporting period, total of 6,666 HH/cases (5,339 HH in Amanat Al Asimah; 1,327 HH in Sana'a) were supported by the Social Welfare Fund (SWF) and were referred to complementary services

(WASH, health and nutrition, child protection, food, etc.) This included 2,491 children (1,160 girls; 1,331 boys) who received their birth certificates in Amanat Al Asimah and Sana'a. In addition, 132 malnourished children were referred to access nutrition services, and 526 children/babies received vaccinations through referral to government health centres. 233 pregnant and lactating women were referred to health centres in Amanat Al Asimah and Sana'a.

115 boys and girls were referred to Ministry of Social Affairs and Labor (MOSAL) child protection case managers to receive psychosocial support. In addition, SWF, with support from UNICEF, continued to advocate and coordinate with the Ministry of Education (MoE) to support vulnerable children access schools for free. A total of 1,200 HH were referred to UNICEF's WASH implementing partners to receive consumable hygiene kits (CHKs) in Amanat Al Asimah and Sana'a.

In November and as part of the IMSEA community engagement activities, the second component of institutional capacity building for vulnerable Community Based Organizations (CBOs) was finalized. As a result of the training, CBOs will be able to provide needed support to vulnerable communities in accessing social services. In addition, 23 cleaning campaign initiatives were implemented, benefiting 1,607 beneficiaries in Amanat Al Asimah and Sana'a. Volunteer peer educators in the marginalized areas reached 90 of their peers on the importance of education and 67 peers on the personal hygiene initiative in Sana'a governorate. As part of the economic empowerment component of IMSEA, a community-based savings fund was established to service 55 beneficiaries in four slums in Sana'a governorate, and 10 girls received vocational training in tailoring and making accessories.

UNICEF continued to support the Ministry of Planning in evidence generation activities. In November, a special analysis was prepared on "The Socio-economic Impact of COVID-19 on Yemen and Mitigation Policy Options". The analysis highlighted the COVID-19 impacts on several sectors and noted that roughly 15 per cent of the functioning health system has been re-purposed for COVID-19, contributing to a reduction in overall health coverage by 20-30 per cent. 55 schools were repurposed as quarantine centres for suspected COVID-19 patients. The analysis also showed that the ratio of remittances to GDP shrank dramatically in 2020, (from 22.8 per cent in 2019 to 11.1 per cent in 2020).

Communication for Development (C4D)

The Oral Cholera Vaccination (OCV) campaigns conducted in six districts of Al Dhale'e and Lahj and in 4 districts in Taizz were supported with communication and social mobilization interventions which reached 750,000 people. These interventions included the mobilization of community volunteers and religious leaders to promote the vaccination campaign in the targeted districts, supported with vehicles mounted with megaphones, communication materials as well as airing of mass media messages through local radio stations.

Polio and Measles Mumps and Rubella (MMR) vaccination interventions in the IDP camps in Marib governorate were supported with community engagement interventions through community volunteers and roaming megaphones, reaching 12,555 IDP families.

Communication and social mobilization interventions to support COVID-19 vaccination uptake continued in 13 governorates under the control of the Internationally Recognized Government (IRG) where vaccinations are being rolled out through multiple approaches including mass media messaging and other community engagement activities. The COVID-19 vaccination drive has been rolled out through subsequent campaigns being supported by Risk Communication and Community Engagement (RCCE) interventions. Mass media support for the vaccination campaign was provided through 25 Radio stations and six TV channels that aired campaign messages through flashes, public service announcements and dedicated discussion programmes. An estimated five million people were reached through these activities. Community volunteers also supported mobile vaccination activities targeting students and staff in universities.

Religious leaders continued engagement with people to sensitize them to COVID-19 prevention practices and physical distancing guidelines, engaging 218,953 people through various activities in mosques, schools, community gatherings, and women's social events. Additionally, community volunteers reached 240,896 people with COVID-19 messages through house-to-house visits and Mother-to-Mother sessions.

RCCE interventions to support the integrated multi-sectoral shielding initiative continued in 6 districts in Aden and Taizz to ensure that high-risk households have the knowledge and skills to adopt COVID-19 prevention behaviours to reduce human to human transmission and protect the highest risk individuals from infection. Trained volunteers in the targeted districts reached 43,172 people through house-to-house visits.

To strengthen feedback systems, UNICEF continued supporting hotlines managed by the Ministry of Public Health and Population (MoPHP) whereby health professionals respond to peoples' queries, concerns, and medical consultations on COVID-19. UNICEF also continued the support for the hotline for IDPs to enable them to raise their complaints and concerns about humanitarian services provided to them. In November, 4,760 calls were responded to through these hotlines. Community volunteers including religious leaders and members of Mother-to-Mother clubs continued engaging their communities through WhatsApp groups created by the volunteers as an additional platform for two-way communication. Approximately 60,000 people were engaged through WhatsApp groups.

AWD/Cholera Response

Implementing partners continued to support communication and social mobilization interventions for AWD/Cholera prevention. Community volunteers, religious leaders, and members of Mother-to-Mother clubs reached 358,604 people with messages on AWD/Cholera and essential family practices for child survival through house-to-house visits, community meetings/events and awareness sessions in mosques and schools.

Two rounds of Oral Cholera Vaccination (OCV) prevention campaigns were planned in 10 districts of 3 southern governorates. The first round started 27 November in Al Dhale'a (1 district) and Lahj (5 districts). As of 30 November, a total of 150,070 of the target population received their first dose of OCV. The campaign in Taizz is planned for 4 districts in December 2021. A total of 761,904 people over one years are targeted for the overall campaign.

Rapid Response Mechanism (RRM)

Conflict continued to intensify across several frontlines in the country, mainly in Marib and the along west coast during the reporting period. The ongoing conflict has triggered widespread displacement to overcrowded internally displaced persons (IDP) sites in Marib City and Marib Al Wadi, straining public services, infrastructure, and humanitarian assistance. According to the International Organization for Migration (IOM) Displacement Tracking Matrix (DTM), more than 46,000 people have been displaced in Marib since September 2021 – many for the fourth or fifth time – and displacement sites in Marib have witnessed a nearly ten-fold increase in new arrivals. This has led to the displacement of more than 2,000 IDPs towards different districts in Hodeidah and Taiz governorates.

UNICEF, along with UNFPA and WFP, continued to reach displaced populations at frontlines with first line response packages. Rapid Response Mechanism (RRM) reached an additional 11,875 newly displaced households (83,125 individuals) across 20 districts. The highest reach was in Marib, Hodeidah, and Taizz governorates, with RRM kits that included essential hygiene items and other supplies including food, family basic hygiene kits, and female dignity kits. RRM kits have met the most critical and immediate needs of displaced families, as they are uprooted suddenly from their homes.

Supply and Logistics

In Hodeidah, the Yemen Standardization, Metrology, and Quality Control Organization (YSMO) continued to prohibit imports of supplies with less than 50 per cent of their remaining shelf life. YSMO continues to require the shipping of Ready-to-Use Therapeutic Food (RUTF) exclusively in refrigerated containers despite recommendations from manufacturers and the Ministry of Public Health and Population (MoPHP) that refrigerated containers are not required. This requirement increases shipping costs up to 200 per cent. However, this requirement is being reviewed as a result of strong advocacy efforts by UNICEF and WFP.

The Supreme Council for the Management and Coordination of Humanitarian Affairs (SCMCHA) continued to require UN/INGO organisations to exclusively contract vendors registered with SCMCHA, limiting the sourcing and competitive selection of vendors in northern Yemen. The commercial market in southern Yemen is still limited and highly dependent on vendors based in the north. To ensure the availability of essential supplies, price competitiveness and timeliness of procurement, sub-regional markets are being explored.

Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy in Yemen is aligned with the Humanitarian Needs Overview, the Humanitarian Response Plan, and Clusters and programme priorities. UNICEF continues to work in coordination with the Yemen Humanitarian Country Team, leading the WASH, Education and Nutrition Clusters and the Child Protection Area of Responsibility (AoR), and is an active member of the Health Cluster and is collaborating with other UN agencies and INGOs to efficiently deliver basic life-saving supplies and services in areas impacted by increasing armed violence.

In the context of the COVID-19 pandemic, UNICEF developed a COVID-19 preparedness and response plan in April 2020. The response plan also aligns with the UN's and the government's three priorities for Yemen: case management, RCCE, and the continuation of health programmes beyond the COVID-19 response – and UNICEF leads the last two priorities. The plan builds on the WHO-led National Preparedness and Response Plan and considers lessons learned from other affected countries. The first half of 2021 involved close coordination with GAVI, The Vaccine Alliance, and WHO to roll out the COVAX vaccine campaign in Yemen. UNICEF continued its RCCE response with campaigns to address disinformation on the vaccine, as well as to continue digital engagement and rumour monitoring.

UNICEF leads the inter-agency PSEA network by hosting the network coordinator. The PSEA network under supervision of HC, and co-led by UNHCR, has refreshed focal points from each member (30 organization as of end of November, including UN agencies, INGOs and local NGOs) to make sure each member's active commitments. The network has developed the strategy and action plan for 2021-2022. Also developed the standard operational procedure (SOP) on handling SEA allegation. The network also initiated UN inter-agency harmonized IP capacity assessment and development, in order to avoid duplication of assessment towards CSOs which are partners to multiple UN agencies.

Human Interest Stories and External Media

Field Update:

Peer Education: A Participatory Approach to Empowering the Most Vulnerable People

The program seeks to raise awareness among participants of key issues related to health, education, and economic matters while exchanging knowledge and experience.

To read more about this intervention, click [here](#).



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External Media

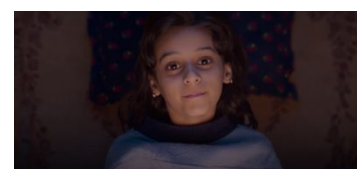
[Rapid Response Teams \(RRTs\)](#)



[Supporting Rural Female Teachers](#)



[World Children's Day: Reem's Dream](#)



Next SitRep: 31 December 2021

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Who to contact for further information:

Philippe Duamelle
Representative
UNICEF Yemen
Sana'a
Tel: +967712223363
Email:
pduamelle@unicef.org

Mohamed Aboelnaga
Chief of Communications
UNICEF Yemen
Sana'a
Tel : +967712223161
Email:maboelnaga@unicef.org

Anne Lubell
Partnerships Manager
UNICEF Yemen
Amman Outpost, Jordan
Tel: +962 79 835 0402
Email: alubell@unicef.org

Annex A
Summary of Programme Results⁴

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2021 target	Total results	Change since the last report	2021 target	Total results	Change since the last report
Health							
Number of children aged 0 to 12 months vaccinated against measles	20,100,000	972,142	735,805 ⁵	82,129			
Number of children aged 6 to 59 months vaccinated against polio		5,535,816	3,800,313 ⁶	0 ⁷			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	2,549,543	232,654			
Number of health care facility staff and community health workers provided with personal protective equipment		15,000	15,873	0 ⁸			
Nutrition							
Number of children aged 6 to 59 months with severe acute malnutrition admitted for treatment	321,558	320,108	217,041	915	320,108	217,041	915
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months	4,766,718	4,663,454	3,140,467 ⁹	975	4,633,443	3,140,467	975
Child Protection, GBVIE & PSEA							

⁴ These figures reflect the updated, approved 2021 HAC appeal.

⁵ This underachievement is due the remaining data not yet incorporated for the months of November and December 2021 that will increase the achievements at the end of the year.

⁶ The last polio campaign was conducted in May 2021 for only northern governorates (14 governorates). The Polio National Immunization Day is planned for the end of November, increasing the target.

⁷ There was no progress in November because this indicator is planned to be achieved through National campaigns. The first campaign was held in May and the second is anticipated to be conducted in the last quarter of the year.

⁸ This indicator depends on the available supply and demand raised by MoHP. UNICEF's available supply of the PPE exceeded the target by 6 per cent. Based on a discussion between MoHP and UNICEF, MoHP requested to distribute the available supply of PPE to healthcare facilities' staff.

⁹ Vitamin A supplementation is usually provided with Polio campaigns in Yemen. However, this year, there was only one Polio campaign conducted in April 2021 in the northern governorates (only 14 governorates). Another round of Polio campaign is expected to be conducted in December 2021.

Number of children and caregivers accessing mental health and psychosocial support		900,000	462,929 ¹⁰	46,501	990,000	486,756 ¹¹	47,458
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions	8,600,000	6,100,000	5,321,017 ¹²	276,299 ¹³			
Number of people with access to safe channels to report sexual exploitation and abuse		500,000	1,400,000	0 ¹⁴			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,160,000	5,683,936 ¹⁵	146,679			
Education							
Number of children accessing formal and non-formal education, including early learning		500,000	567,618 ¹⁶	0 ¹⁷	790,750	710,705	7,270
Number of children receiving individual learning materials	8,100,000	800,000	222,346 ¹⁸	13,081	872,000	365,653	25,856
Number of schools implementing safe school protocols (infection prevention and control)		1,000	537 ¹⁹	308	4,600	1,056	326
Number of teachers receiving teacher incentives each month		86,000	2,162 ²⁰	0	181,603	6,435 ²¹	260
Water, Sanitation & Hygiene							
Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	15,400,000	6,800,000	7,380,257 ²²	16,512	8,826,986	7,770,336	225,710

¹⁰ The underachievement was due the remote modality, which reduced the number of beneficiaries reached from what it was expected in the planning phase. Also, it was due from the decision not to host any activities in the schools during the breaktime, in order to avoid any confusion with "summer camps" hosted by the authorities.

¹¹ The speed of the implementation of the activities by partners was delayed and resulted in slow progression towards the target.

¹² In the October Situation Report, the total result didn't include the monthly change. The total amount for October 2021 is 5,044,718 and the correction has been reflected in this report.

¹³ The speed of the implementation of the activities by partners was delayed and resulted in slow progression towards the target.

¹⁴ The target of this indicator has been met and the total result was overachievement by 280 per cent as explained in the June update. This indicator depends heavily on the PMU payment cycle which was last quarter.

¹⁵ The two National campaigns reached 256 per cent of the target. People were reached via remote MRE messages using different platforms. Despite the fact that TV flashes and SMS have national coverage, only the percentage of people in need was taken into consideration to avoid duplication. The below description shows how the beneficiaries were calculated under each platform:

- SMS were disseminated via 3 telecommunication companies (Saba Phone, Yemen Mobile, and MTN). Only the beneficiaries reached through one company was calculated to avoid duplications. One of the companies sent SMS to 5,113,929 people.
- For TV flashes, it was taken into consideration the number of people living in rural areas and the availability of electricity, and 459,829 people were reached (20% of the targeted population).
- For Radio flashes, 9 governorates were covered reaching 15% of the targeted population under these governorates.

¹⁶ National grade 9 + 12 exams were successfully completed in July 2021, allowing more than 520,00 children nationwide to continue with their formal education. Due to this strategic intervention, target was moderately overachieved.

¹⁷ National grade 9 + 12 exams were successfully completed in July 2021, allowing estimated 600,000 children to continue with their formal education. The final report is currently under review by the MoE, therefore there was no change during the reporting period.

¹⁸ Due to global supply chain issues, individual learning sales orders are on backorder waiting for distribution in 2022.

¹⁹ A comprehensive large-scale capacity development initiative for teachers, school-based staff, FMCs, Student Councils etc. is scheduled to be done 15 August - 15 December 2021. The initiative includes training on the implementation and follow-up on safe school protocols. Reporting against this indicator will be earliest done in Q4 2021, with final figures to be reported after data cleaning by Q1 January 2022. The activity was delayed due to agreement process with MOE but will be completed by December 23, 2021. In addition to the above, it is worthwhile to mention the following, as partial contribution to safe school operations: Estimated 4,415 exam centers (schools) were provided with 84,250 masks (southern governorates), 77,238 bottles of 500 ml hand sanitizers and 43,360 soaps bars during the implementation of the National Examination process. These numbers are being reported only in the narrative sitrep and not as part of the HPM indicators.

²⁰ The reduced achievement is due to sufficient funds not being mobilized for continuing incentive payments on a national scale. Whilst UNICEF has some funds for teacher incentives (under the REAL Project) these are very localized and will cover 12,000 teachers only of the estimated 171,000 teachers not in receipt of a regular salary since 2016 (of which UNICEF's RWP targets 86,000).

²¹ It was determined that one of UNICEF's partners had made an error in the previous reporting period, hence the decrease.

²² The overachievement was due to fuel distribution to the water wells, enabling UNICEF to reach a higher target than initially planned.

Number of people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services		5,910,000	5,144,206	263,711	4,529,704	5,735,994	294,188
Number of people in humanitarian situations reached with messages on appropriate hygiene practices		5,910,000	5,114,206	263,711	5,767,919	6,231,921	294,188
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	4,143,245 ²³	6,169			
Social Protection & Cash Transfer							
Number of households reached with humanitarian cash transfers across sectors		40,000	30,784 ²⁴	2,971			
Number of people benefiting from emergency and longer-term social and economic assistance		150,000	171,751 ²⁵	17,826			
C4D, Community Engagement & AAP							
Number of people participating in engagement actions for social and behavioural change		8,000,000	10,227,589 ²⁶	639,817			
Rapid Response Mechanism							
Number of vulnerable displaced people who received Rapid Response Mechanism kits		672,000 ²⁷	417,466 ²⁸	83,125			

²³ Overachievement is due to the large number of people reached through UNICEF supported emergency interventions which includes the maintenance of collapsed sewage pipelines, as well as cleaning and dislodging sewage systems in the cities like Sana'a.

²⁴ Underachievement is due to lack of funding.

²⁵ The target set was based on the number of beneficiaries reached through previous cycles of cash plus and IMSEA case management. Due to a higher interest from the community to benefit from the initiative which led to a higher number of registrations, UNICEF succeeded to reach a higher number of beneficiaries than initially planned.

²⁶ The overachievement was due to scaling up COVID RCCE and mobilizing over 6,000 religious leaders who are able to reach large numbers of beneficiaries through group communication in mosques, schools, community gatherings, etc.

²⁷ The target number have increased to reflect the collaborative response in 2021 where UNICEF and partners complement each other's efforts to reach more people who receive the RRM kits.

²⁸ The target was set by the Inter Agency members based on previous annual displacements trends, however in 2021, displacements were lower than 2020 and 2019. Only in Quarter 4, 2021, due to the escalation across several frontlines, the number of newly displaced responded to by the RRM increased resulting in RRM achieving a 20% increase towards the target in just two months.

Annex B Funding Status

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other Allocations Contributing Towards Results (\$) ²⁹	Resources available from 2020 (Carry-over)	\$	per cent
Health	123,460,800	11,070,306		11,430,984	100,959,510	82%
Nutrition	119,875,500	70,889,497		16,978,141	32,007,862	27%
Child Protection, GBViE & PSEA	33,287,000	10,547,067	752,354	5,968,984	16,018,595	48%
Education	84,760,000	14,752,453	15,465,561	20,937,582	33,604,404	40%
WASH	100,000,000	25,070,405	28,278,451	27,425,386	19,225,758	19%
Social protection & cash Transfers	21,240,000	6,153,458		2,046,070	13,040,472	61%
C4D, Community Engagement & AAP	12,320,000	308,802		6,424,852	5,586,346	45%
Rapid Response Mechanism	6,878,200	2,737,056		2,923,215	1,217,929	18%
Cluster Coordination	7,000,000	1,040,694		307,112	5,652,194	81%
Being Allocated	-	9,318,265			-9,318,265	
Total	508,821,500	151,888,003	44,496,366	94,442,326	217,994,805	43

²⁹ 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 2021 HPM results.