



Reporting Period: 1– 30 April 2022

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Yemen Country Office Humanitarian Situation Report

April 2022



Highlights

- 19.5 million or 61 per cent of Yemenis have no access to safe water and 11.4 million people or 42 per cent of the population have no adequate sanitation (Food Security and Livelihoods Assessment, March 2022). In April, to address the urgent needs of the affected population, UNICEF provided fuel to 37 Local Water and Sanitation Corporations (LWSCs) in 17 governorates to sustain the supply of safe water supply to 2.48 million people.
- UNICEF, along with UNFPA and WFP, continues to reach displaced populations affected by conflict with first line response packages. In April 2022, Rapid Response Mechanism (RRM) kits were provided to 4,491 newly displaced households (31,437 individuals).
- A total of 661,286 people were reached with at least one dose of COVID-19 vaccine and 420,391 people were fully vaccinated, accounting for 4 per cent of the population of Southern governorates.
- UNICEF delivered 1,011,000 doses of Bacille Calmette Guerin (BCG) vaccine, 750,000 doses of Penta vaccine and 361,050 doses of Inactivated Polio vaccine (IPV) to a central warehouse in Sanaa.

Situation in Numbers

(OCHA, 2022 Humanitarian Needs Overview)



11.3 million
children in need of
humanitarian assistance



20.7 million
people in need



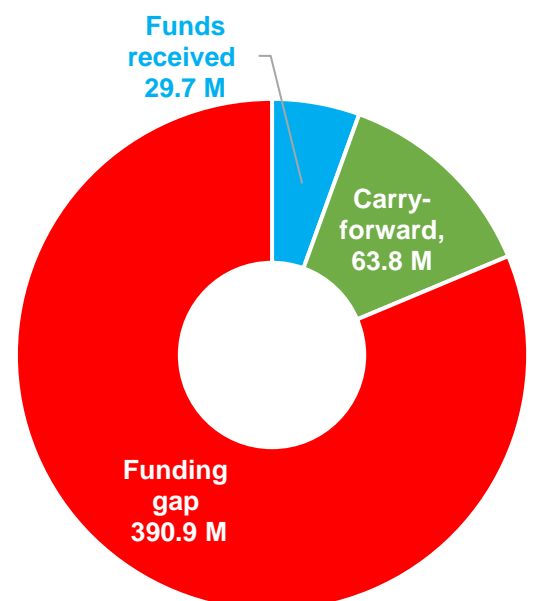
1.8 million
children internally displaced
(IDPs)

UNICEF's Response and Funding Status

Health	Measles vaccination	18%
	Funding status	7%
Nutrition	SAM admissions	15%
	Funding status	18%
Child Protection	Psychosocial support	20%
	Funding status	22%
Education	Access to education	21%
	Funding status	39%
WASH	People with safe water	44%
	Funding status	19%
Social Policy	Social economic assistance	5%
	Funding status	7%
Cross Sectoral	People reached with campaigns	37%
	Funding status	6%
RRM	IDPs with RRM kits	32%
	Funding status	44%

Funding Status

2022 Appeal: \$484.4M



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

Funding Overview and Partnerships

The Yemen Humanitarian Action for Children (HAC) which is currently aligned to the 2021 Yemen Humanitarian Response Plan (YHRP), appeals for \$ 484.4 million in 2022. 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 of 30 April 2022, UNICEF received \$ 29.7 million against the 2022 HAC appeal and \$ 63.8 million was carried forward from 2021, leaving a funding gap of \$ 390.94 million, or 81 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 Austrian Committee for UNICEF, Norway, the Republic of Korea and Saudi Arabia. Despite these generous contributions, critical funding gaps for the response are emerging from quarter two of 2022.

Situation Overview & Humanitarian Needs

The UN brokered a two-month truce that went into effect on 2 April at the start of the holy month of Ramadan. In addition to the truce, a significant milestone was achieved when the Sana'a authorities signed an Action Plan with the United Nations to protect children and prevent grave violations against them in the context of the armed conflict in Yemen. The Plan includes commitments by the authorities and their forces to identify all children under 18 years of age in their ranks, to facilitate the release and reintegration of child soldiers into their communities, to ensure provisions are made to prevent the killing and maiming of children, and to protect health and education facilities, as well as their personnel.¹

The Yemen 2022 Humanitarian Needs Overview (HNO) provides details on the main challenges faced for the people in Yemen, which include food insecurity, malnutrition, water and sanitation, and protection. In addition to the HNO, the 2022 Humanitarian Response Plan (HRP) for Yemen, published in April, guides the response required to reach the targeted 17.9 million people in need. The HRP has three strategic objectives: reducing morbidity and mortality, improving living standards and resilience, and preventing, mitigating and responding to protection risks faced by crisis-affected people, with an increased focus on multi-sector challenges. The response prioritizes the needs of the most vulnerable groups and displaced populations.

The acute food insecurity and malnutrition situation in Yemen is projected to further deteriorate in 2022 (HRP 2022). One of the factors affecting food insecurity is Yemen's economy, which is expected to further deteriorate. The Yemeni rial continues to depreciate in southern governorates. This will further drive food insecurity as Yemen relies on imports for 90 per cent of its food needs. In addition to the deteriorating economy, conflict and poor infant and young child feeding practices will continue to be the main drivers of acute food insecurity and malnutrition.

The UN Country Task Force on Monitoring and Reporting documented ten incidents of grave violations against children, 90 per cent of the incidents have been verified. These includes 12 confirmed child casualties, including three children killed (one girl, two boys) and nine boys maimed mainly due to unexploded ordnance (UXO) incidents. Three incidents of denials of humanitarian access were reported, as well as one use of a school for non-educational purposes by a party to the conflict. The majority of the incidents documented and verified were located in the Sa'ada (four incidents) and Lahij (two incidents) governorates.

Since the beginning of the epidemic in 2019, 11,819 COVID-19 cases were reported. An estimated 2,149 associated deaths and 18.2 per cent cumulative case fatality rate (CFR). Almost all the cases were reported from Hadramout, Aden, Abyan, Lahij, Al Dhale, Shabwah, Al Mahrah, Taiz, Socotra and Marib governorates.

Summary Analysis of Programme Response

Health

In response to the ongoing COVID-19 pandemic, UNICEF continued to ensure the provision of essential health and nutrition services at primary healthcare facilities (PHC), and to support Maternal and Newborn Health (MNH) hospitals. During the reporting period over 2,000 healthcare providers in more than 1000 PHC facilities and MNH hospitals in 10 governorates were provided with personal protective equipment (PPE) including gloves, masks and hand sanitizers.

UNICEF continued to support the COVID-19 vaccine supply pipeline and build on community engagement for vaccine deployment. During the reporting period, the deployment (which occurred only in the southern governorates) was very low due to Ramadan. By the end of April 2022, a cumulative total of 661,286 people were reached with at least one dose of COVID-19 vaccine of which 8,454 people were reached in April. In April, 8,107 people were fully vaccinated with either one dose of J&J or two doses of AstraZeneca vaccines, bringing the cumulative total of fully vaccinated

¹ UNICEF Press release <https://uni.cf/3KVn8u8>

people in Yemen to 420,391. This accounted for 4 per cent of the population of southern governorates. A total of 87,390 doses of AstraZeneca vaccine expired at the end of April 2022 given the low uptake.

In order to support the scale-up of the quality of the MNH services, more than 46 MNH hospitals in 20 governorates national wise were provided with packages of MNH supplies including medicines, incubators, monitors, infusion pumps, syringe pumps, laryngoscopy, warmer system for newborns, and oxygen concentrators.

Following the measles outbreak earlier in the 2022, an outbreak response was developed for the 74 high risk districts in southern governorates, and the campaign is planned for May 2022. As of the end of April 2022, a total of 1,379 suspected measles cases were reported, out of which 89 were confirmed with 15 associated deaths affecting 98 districts (71% of the districts were in southern governorates)

UNICEF delivered 1,011,000 doses of Bacille Calmette Guerin (BCG) vaccine, 750,000 doses of Penta vaccine and 361,050 doses of Inactivated Polio vaccine (IPV) for routine immunization to a central warehouse in Sanaa. As part of the ongoing Gavi supported Cold Chain Equipment Optimization Platform (CCEOP) project, UNICEF delivered a total of 401 Solar direct-drive (SDD) refrigerators for distribution and installation in 401 health facilities across the country

During the month of April, a total of 370 health workers were supported with incentives for the period covering June 2021 to March 2022.

The circulating Vaccine Derived Polio Virus (cVDPV) type 2 cases continued to rise during the reporting period with an additional 44 cases reported, bringing the cumulative total to 71 reported cases since November 2021. A total of 1.5 million doses of trivalent Oral Polio vaccine (tOPV) were moved from Sana'a to Aden for the third round of the Polio vaccination campaign. The use of these vaccines was later on rejected after multiple attempts to advocate with the Ministry of Public Health and Population (MoPHP) in Aden. These vaccines have been stored in a private facility in the south in the recommended storage temperature. The incident has been reported to the Global Polio Eradication Initiative (GPEI) through the Regional Incident Management Support Team (IMST).

Nutrition

During the reporting period, UNICEF provided deworming tablets to 198,266 children (99,110 boys, 99,156 girls), 297,331 children (149,328 boys, 148,003 girls) received micronutrient sprinkles, and 16,163 children (8,557 boys, 7,607 girls) received Vitamin A supplementation. In addition, 417,709 mothers received Iron Folate supplementation, and 913,146 mothers received infant and young child feeding (IYCF) consultations. Data was collected through 4,528 outpatient treatment programmes (reporting rate 89 per cent), along with reports received from 21,624 active Community Health and Nutrition volunteers (57 per cent reporting rate), mobile teams, and 2,457 IYCF corners.

The 2022 HNO and HRP highlight the urgent need to provide quality and timely life-saving preventive nutrition services to 6.6 million people in Yemen. In order to respond to the deteriorating nutrition crises an estimated \$ 442 million will be required to provide nutrition services to 2.5 million boys, 2.3 million girls and 1.8 million women in 2022². Through a multi-sectoral response, the nutrition cluster will address heightened nutrition needs among mothers and children with a comprehensive approach to tackle and prevent acute and chronic malnutrition in 2022. The multi-sectoral response will aim to improve the household economy through a community-based integrated approach, as well as with cash-voucher programming to improve nutrition outcomes and build resilience in alignment with the humanitarian-peace-development nexus.

Water, Sanitation and Hygiene

UNICEF WASH has a funding gap of US \$82,005,850 required to provide lifesaving water, sanitation, and hygiene services. In April, fuel delivery continued to 37 Local Water and Sanitation Corporations (LWSCs) in 17 governorates to sustain the supply of safe water supply to 2.48 million people (520,800 women, 471,200 men, 768,800 girls and 719,200 boys)

UNICEF continued to support the National Water Resource Authority (NWRA) in conducting water quality monitoring in Marib for bacteriological and physiochemical contamination. This includes collecting samples from public/private wells in host communities and water tanker/ trucking water in 23 IDP sites, benefiting 126,000 IDPs and the host communities.

UNICEF continued its integrated emergency response in Al Hudaydah governorate. This included the distribution of 2,000 Consumable Hygiene Kits (CHKs) through mobile clinic intervention in hard-to-reach areas benefiting 14,000 people (2,490 women, 2,660 men), including 8,400 children (4,340 girls and 4,060 boys). WASH Non-food items (131

² Yemen HRP 2022

basic hygiene kits, 10000 CHKs, and 21242 jerry cans) were distributed to 5,131 families in 23 IDP sites in Al Hudaydah governorate.

UNICEF together with implementing partner NWRA-Marib continued to support 7,000 IDPs through daily trucking of 369 cubic meters of water in 13 IDP sites in Marib. In Al Somaya camp, UNICEF installed 12 temporary toilets in two Temporary Learning Spaces benefiting 600 school children. As part of the exit strategy from water trucking, UNICEF rehabilitated five rural water network projects in the Dhamar governorate (Jahran, Al Hada, and Anss districts), targeting 12,593 people.

In April, UNICEF continued supporting emergency WASH interventions for IDPs in Hajjah, Al Hudaydah, Marib, Taiz, Aden, 'Amran and Dhale and Al Jawf governorates. Interventions included the provision of safe water supply through water trucking, water quality monitoring and chlorination of trucked water, rehabilitation and installation of water distribution points, distribution of basic and consumable hygiene kits, construction of emergency latrines, desludging of sewage from full pits, garbage collection and disposal, cleaning campaigns and hygiene promotion in partnership with the General Authority for Rural Water Supply Projects (GARWSP), national NGOs and private sectors. The interventions benefitted more than 2.9 million IDPs and host communities. Additionally, more than 75,000 IDPs in the northern and southern hubs benefitted from the cesspit desludging and constructing emergency portable latrines.

The WASH Cluster completed WASH severity and needs analysis to calculate the number of people in need, which fed into the Yemen HNO 2022. Data was calculated based on two nationwide assessments including the food security and livelihood assessment (2022 FSLA) and Multi-Cluster Location Assessment (MCLA 2022) assessment. The WASH cluster also developed the response plan identifying the target population and funding requirements reported in the Yemen HRP 2022.

Child Protection

In April, 20,879 conflict-affected people were reached through explosive ordinance risk education (EORE) activities, including 10,867 children (4,748 girls and 6,119 boys) and 10,012 adults (3,586 women and 6,426 men) in Abyan, Marib, and Taiz governorates. EORE was delivered in schools and child-friendly spaces by trained teachers and community volunteers.

Through a network of fixed, remote, and mobile modalities, UNICEF provided psychosocial support to 29,941 people including 23,777 children (12,060 girls and 11,717 boys) and 6,164 adults (4,193 women and 1,971 men). UNICEF's response was carried out across ten governorates which included Abyan, Dhale, Al Jawf, Al Mahrah, Al Hudaydah, Al Mahwit, Hajjah, Marib, Raymah, and Saada. These services helped children overcome the immediate and long-term consequences of their exposure to violence.

UNICEF and partners provided community-based mental health and psychosocial support to 30,352 people including 24,168 children (12,287 girls and 11,881 boys) and 6,184 adult primary caregivers (4,212 women and 1,972 men).

UNICEF continued to support referrals and the provision of critical services and victim assistance for the most vulnerable children through the case management program. Trained case managers identified 1,031 children (381 girls and 650 boys), of which 1,006 children (369 girls and 637 boys) received more than one additional service.

Education

Activities in schools for the academic calendar 2021-2022 have been finalized. The activities included the provision of learning and school supplies (school bags, school desks, PPE related supplies, etc.), construction and rehabilitation of learning spaces (minor and major rehabilitation, WASH in schools, temporary learning spaces), teacher training, and back to learning campaigns.

UNICEF continued to support national examinations for grades 9 and 12 scheduled in May. Through UNICEF's support, an estimated 500,000 children in northern governorates and around 100,000 children in southern governorates will be supported during the examination period.

UNICEF continued to improve access to equitable and inclusive quality learning for girls and boys in Yemen. UNICEF provided training to 1,628 national master trainers, education office staff, teachers, supervisors, and members of Father and Mother councils (960 male, 668 female) on safe school protocols, child-centred methods, assessment and classroom management, community participation and hygiene promotion, and psychosocial support in Aden, Abyan, and Hadramout.

UNICEF improved learning environments for 76,678 children (39,863 girls and 36,815 boys) through the rehabilitation of 108 schools in Aden, Lahij, Abyan, Ad Dali', Shabwah and Al Jawf benefiting. In Sana'a, 1,126 school desks were distributed to benefit 3,378 children (1,485 girls and 1,893 boys). In Marib, 40 Temporary Learning Spaces (TLSs) were distributed benefiting 800 children (400 girls and 400 boys).

Education cluster partners began implementation against the education targets and indicators set out in the HNO and HRP. In observance of the holy month of Ramadan, schools were closed in April.

Social Inclusion and Cash assistance

Under the Integrated Model of Social and Economic Assistance and Empowerment (IMSEA), UNICEF together with the Social Welfare Fund (SWF) started a new round of case management interventions for the Muhamasheen groups in Amanat Al Asimah governorate (Ma'ain, Bani Al-Harith, Shu'aub, Ath'thaorah, Al Wahdah, Old Sana'a city districts) and Sana'a governorate (Sanhan, Hamdan, Bani Hushaysh, Al Haymah, Al Kharijiyah). In Amanat Al Asimah 4,372 HH/cases (413 males and 3,959 females) were reached with awareness messages on hygiene best practices and COVID-19 prevention. Furthermore, UNICEF identified a total of 151 children (68 boys and 83 girls) with malnutrition issues, 749 children (392 boys and 357 girls) in need of vaccinations, as well as 719 pregnant and lactating women, identified in high need of nutrition and primary health care services. Identified cases were referred to health and nutrition services supported by UNICEF as well as government partners, and health centres.

In April, as part of the IMSEA community engagement activities, 45 adolescents (28 girls, 17 boys) were trained using a peer education approach in the Sana'a governorate aimed at activating self-initiated action in communities in order to sustain good practices, thereby promoting a positive change for themselves and their communities. As a result, a total of 155 beneficiaries (88 female and 67 male) received social change behaviour messages related to flash floods and emergency response, 144 beneficiaries (50 female, 40 male, 34 girls and 20 boys) received messages on WASH and hand washing, and 59 beneficiaries (6 female, 13 male, 17 girls, and 23 boys) received messages on financial education in Sana'a governorate.

UNICEF continued to support the Ministry of Planning in drafting and publishing the Yemen Social Economic update titled "*Livelihoods Support Concept, The Current Status - Evaluation - The Way Forward*". The report revealed the total beneficiaries from livelihood programmes implemented by UNICEF, UNDP, UNOPS, and FAO in Yemen is 3.46 million people³. According to the report, 72 per cent of assistance went to households affected by the conflict, 22 per cent went to people affected by climate change, and six per cent to people affected by COVID-19. The report highlights several recommendations for the way forward, including assets support, enhancing technical education, vocational training, support to life-saving programs during emergencies and disasters, women's livelihoods and improvements to infrastructure ensuring physical access to markets.

Social Behaviour Change (SBC) and Accountability to Affected Populations (AAP)

In partnership with the Ministry of Religious Guidance, and religious leaders (Imams and Morshydats), UNICEF scaled up engagement in mosques and in community gatherings during the holy month of Ramadan. UNICEF reached 1.25 million people, sensitizing them to essential COVID-19 prevention measures as well as key hygiene and sanitation practices.

Communication and social mobilization interventions on COVID-19 vaccination continued in southern governorates reaching an estimated 4 million people. 12 radio stations aired COVID-19 vaccine messages through flashes, public service announcements and dedicated discussion programmes. The fifth round of the COVID-19 assessments was carried out to measure knowledge, attitudes, risk perceptions and adoption of prevention practices as well as COVID-19 vaccine hesitancy. The assessment was administered by partners in all governorates and utilized quantitative and qualitative methodologies. Online social data, as well as information from the COVID-19 hotlines, were analysed for a broader perspective and to further enrich the findings of the assessment. The findings from the assessment will guide the revision of strategies, messaging and interventions related to COVID-19 vaccine demand generation and Risk Communication and Community Engagement (RCCE) efforts.

In partnership with the Ministry of Information and the Health Education Center, UNICEF developed a 30-episode radio programme to complement impersonal communication activities. The programme was aired on 11 radio stations and

³ <https://reliefweb.int/report/yemen/yemen-socio-economic-update-issue-67-december-2021-enar>

focused on key maternal, child health and nutrition practices, including feeding practices for infant and young children. In addition to the radio programme, UNICEF developed an animation series on lifesaving practices, which was broadcasted on six TV channels during the second half of Ramadan.

Commemorating the World Immunization Week, UNICEF launched a social media campaign on Facebook and Instagram to promote immunization and encourage caregivers to vaccinate their children. The campaign reported 2.4 million impressions on both platforms.

UNICEF continued to provide support to COVID-19 and Polio hotlines managed by the Ministry of Public Health and Population to further strengthen feedback systems. These hotlines enable access to health professionals who respond to peoples' queries, concerns, and medical consultations on COVID-19, COVID-19 vaccines, and Polio vaccines. UNICEF continued support to the hotline for IDPs providing a platform to raise complaints and concerns about humanitarian services provided to them. During the month, 5,612 calls were responded to through all the hotlines.

UNICEF co-leads the AAP-Community Engagement with OCHA. The interagency working group has reworked its Terms of Reference and re-organized membership to support agencies and partners in advancing AAP and community engagement in humanitarian efforts in 2022. The AAP-Community Engagement Working Group will finalize the work-plan to support partners' capacity development and conduct assessments to evaluate the functionality and effectiveness of platforms for beneficiary feedback and participation as integral parts of humanitarian response from May 2022.

AWD/Cholera Response

UNICEF continues to closely monitor the AWD/cholera situation in close coordination with WHO despite decreasing trends reported March 2022. Governorates that reported the highest number of cases included Taiz, Abyan, Lahij, Aden, Al-Dhalea, Marib, Al-Bayda, Hadhramaut, Hodeidah, Ibb, Shabwah, Al-Mahara, Al-Jawf, Dhamar, Amran. UNICEF and implementing partners continued communication and social mobilization interventions for the key lifesaving practices including AWD/Cholera prevention practices. In April, community volunteers, religious leaders, and members of Mother-to-Mother clubs reached 1.9 million people through multiple interpersonal communication activities including house-to-house visits, community meetings/events and awareness sessions in mosques.

Rapid Response Mechanism (RRM)

Displacements of civilians continued in Marib, Taiz, Hajjah and Hodeidah, as more than 5,600 households were registered as newly displaced people throughout April. The main host districts were in Hodeida, Taiz, and Marib.

UNICEF, along with UNFPA and WFP, continues to reach displaced populations affected either by conflict or climate change with first line response packages. RRM was provided across 102 districts in 20 governorates as well as 4,491 newly displaced households (31,437 individuals). UNICEF's highest reach was attained in Hodeidah, Marib, Taiz, Hajjah and Al Bayda governorates through the provision of RRM kits, which include essential hygiene items and other supplies such as 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.

As part of the Yemen humanitarian response plan, the RRM cluster is planning to reach over 588,000 newly displaced people with an integrated approach of Food, WASH, child protection and Education lifesaving needs with an estimated funding requirement of over USD 20 million.

Supply and Logistics

The fluctuation of the Yemeni Rial continues to be a bottleneck for local vendors in responding to tenders, due to the challenge in retaining offer prices. Local vendors face challenges in responding to delivery lead time, relying mainly on existing stock. They are often unable to offer items matching UNICEF specifications due to the global challenges faced in the supply chain. Once an alternative product is offered, the process of reconfirming compatibility often delays the procurement process further.

Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy in Yemen is aligned with the 2022 HNO, the HRP, and Cluster 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). UNICEF is also 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 together with WHO facilitates and promotes COVID-19 vaccination at the community and health facility levels for the frontline health care workers, elderly people, and those with chronic underlying conditions, displaced people, migrants and refugees.

UNICEF supports the inter-agency Protection against sexual exploitation and abuse (PSEA) network by hosting the network coordinator. The PSEA network, under the supervision of the UN Humanitarian Coordinator in Yemen and co-led by UNHCR, includes focal points from each member to ensure active commitments. The network has developed the strategy and action plan for 2021-2022 and the standard operating procedures (SOPs) for handling sexual exploitation and abuse (SEA) allegations. The network also initiated the UN inter-agency harmonized implementing partners' capacity assessment and development to avoid duplication of assessments of civil society organizations (CSOs) that are partnering with multiple UN agencies.

The Community Engagement and Accountability to Affected Populations Working Group (CE-AAP WG) will be reactivated in the second quarter of 2022, for an all-inclusive membership from the HCT and wider humanitarian community. UNICEF and OCHA will continue to co-chair the working group, facilitate the regular convening of the working group and ensure adequate information sharing with all the constituents of the wider humanitarian community in Yemen.

Human Interest Stories and External Media

Field update:

Therapeutic Feeding Centers: a lifeline for children with severe acute malnutrition:

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



UNICEF/UN0618957/Al-Haj

External Media

[Solar Energy Delivers Safe Water Across Yemen](#)



[Polio Immunization Campaign: a Critical Moment to Protect Yemen's Children](#)



[Improving Education Methods by Targeting Numeracy and Literacy Teaching](#)



Next SitRep: 30 July 2022

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Annex A

Summary of Programme Results⁴

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2022 target	Total results	Change since the last report	2022 target ⁵	Total results	Change since the last report
Health							
Number of children aged 0 to 11 months vaccinated against measles	20,100,000	972,142	172,535	39,451			
Number of children aged 6 to 59 months vaccinated against polio		5,535,816	2,254,810	- ⁶			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	793,500	165,764			
Number of health care facility staff and community health workers provided with personal protective equipment		25,000	13,905	2,000			
Nutrition							
Number of children aged 6 to 59 months with severe acute malnutrition admitted for treatment	400,000	366,358	49,974	1,633	N/A	49,974	1,633
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months	4,766,718 ⁷	5,023,627	10,851	409	N/A	10,851	409 ⁸
Child Protection, GBVIE & PSEA							
Number of children and caregivers accessing mental health and psychosocial support	8,600,000	900,000	181,836	29,941	1,218,253	187,176	30,352
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,000,000	-	0 ⁹			
Number of people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers		1,900,000	1,426,030	1,426,030			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,010,000	352,204	20,879			
Education							

⁴ These figures reflect the updated, approved 2022 HAC appeal.

⁵ Cluster targets are in the assessment process and not yet available.

⁶ Due to late reporting progress will be seen in May

⁷ The figure will be updated after the finalization of the 2022 Humanitarian Response Plan (HRP).

⁸ Implementing partner delayed reporting

⁹ Implementation saw delays in the planning phase. Achievements will show in future sitreps.

Number of children accessing formal and non-formal education, including early learning	8,100,000	500,000	104,403	80,856 ¹⁰	895,000	159,301	93,359
Number of children receiving individual learning materials		800,000	13,147	- ¹¹	1,200,000	42,051	1,275
Number of teachers receiving teacher incentives each month		15,000	3,771	1,629	100,000	5,183	2,289
Water, Sanitation & Hygiene							
Number of people accessing a sufficient quantity of safe water for drinking and domestic needs	15,400,000	6,800,000	3,008,783	67,989 ¹²	7,484,406	4,806,108 ¹³	4,806,108
Number of people reached with critical WASH supplies		5,910,000	435,779	3,322	N/A	-	- ¹⁴
Number of people in humanitarian situations reached with messages on appropriate hygiene practices		5,910,000	367,712	-	N/A	-	- ¹⁵
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	1,527,418	-			
Social Protection & Cash Transfer							
Number of households reached with UNICEF funded multi-purpose humanitarian cash transfers		50,000	- ¹⁶	-			
Number of people benefiting from emergency and longer-term social and economic assistance		160,000	8,279 ¹⁷	3,067			
Cross-sectoral (HCT, C4D, RCCE and AAP)							
Number of people participating in engagement actions for social and behavioural change		8,500,000	3,119,821	1,916,667			
Rapid Response Mechanism							
Number of vulnerable displaced people who received Rapid Response Mechanism kits		588,000	191,006	13,437			

¹⁰ Jan progress has been updated now due to partner late reporting

¹¹ School year 2021-2022 is now complete.

¹² In addition to the reached every month of 2,940,794 new beneficiaries have been added

¹³ Cluster targets are added from 2022 HRP, now reporting progress

¹⁴ Ibid.

¹⁵ Ibid.

¹⁶ Due to delays in obtaining clearances, the payment cycle will be conducted in June 2022/ Hence the indicator will be updated as part of June HPM.

¹⁷ The total results have been updated to include updated data for the January progress, previously not included due to partner late reporting

Annex B

Funding Status*

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022 **	Other resources used in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	125,000,000	2,694,545		5,439,422	116,866,032	93%
Nutrition	120,000,000	13,309,471		8,847,584	97,842,945	82%
Child Protection, GBViE & PSEA	37,000,000	2,030,103		6,280,602	28,689,295	78%
Education	55,450,000	-		21,801,730	33,648,270	61%
Water, Sanitation and Hygiene	100,000,000	6,549,715		12,809,255	80,641,030	82%
Social Protection	23,000,000	-		1,572,051	21,427,949	93%
C4D, Community Engagement & AAP	12,500,000	479,263		285,600	11,735,137	94%
Rapid Response Mechanism	5,950,000	1,334,098		1,282,054	3,333,848	56%
Cluster coordination	5,500,000	-		14,608	5,485,392	100%
Being allocated		3,293,139		5,434,894	-8,728,033	
Total	484,400,000	29,690,333		63,767,800	390,941,866	81%