



Reporting Period: 1-31 July 2022

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# Yemen Country Office Humanitarian Situation Report

July 2022

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for every child

## Highlights

In July, 4,347 children with severe acute malnutrition (SAM) were identified and admitted to outpatient treatment programmes (OTPs). A cumulative total of 3,204,069 children under 5 years were screened for malnutrition since the beginning of the year.

UNICEF procured 492,486 doses of DTP-HepB-Hib (Diphtheria, Tetanus, Pertussis, Hepatitis B and Haemophilus Influenza) and 750,000 doses of Tetanus (Td) vaccines for the Ministry of Public Health and Population (MoPHP) in Aden for routine immunization services.

An estimated 86,000 people were impacted by heavy rainfall and associated flooding across Yemen, with over 2,515 households displaced across affected districts. UNICEF responded through rapid response mechanisms, replacing/repair of temporary learning spaces and latrines and with the provision of hygiene kits.

The current funding gap for UNICEF is \$ 342.8 million, which is 71 per cent of the total amount required to continue providing humanitarian assistance in Yemen.

## Situation in Numbers

(OCHA, 2021 Humanitarian Needs Overview)



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

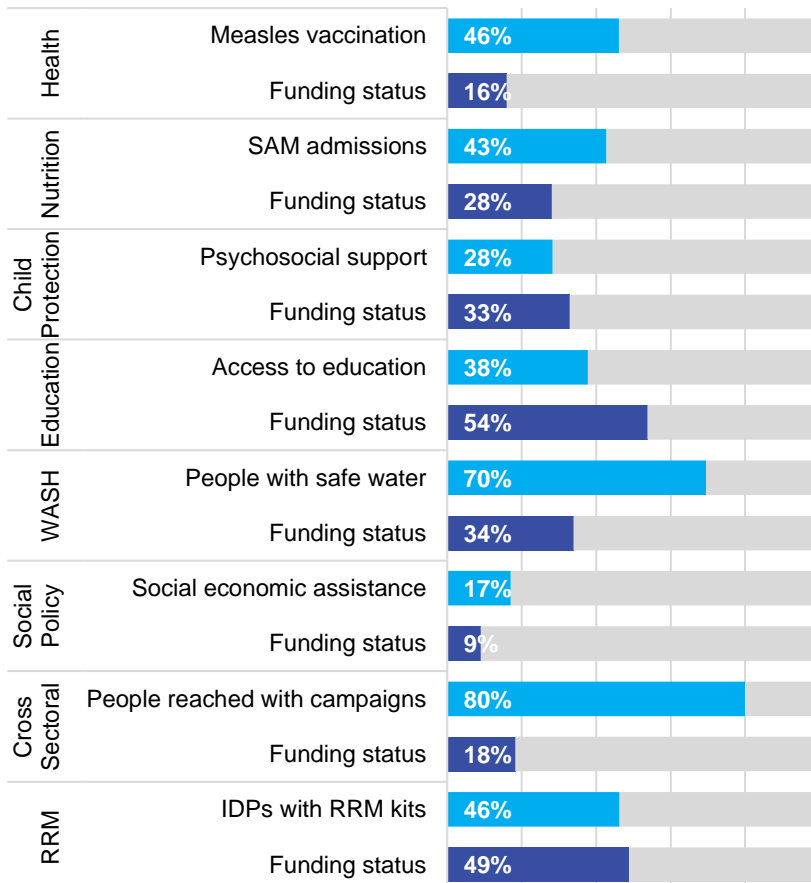


**20.7 million**  
people in need



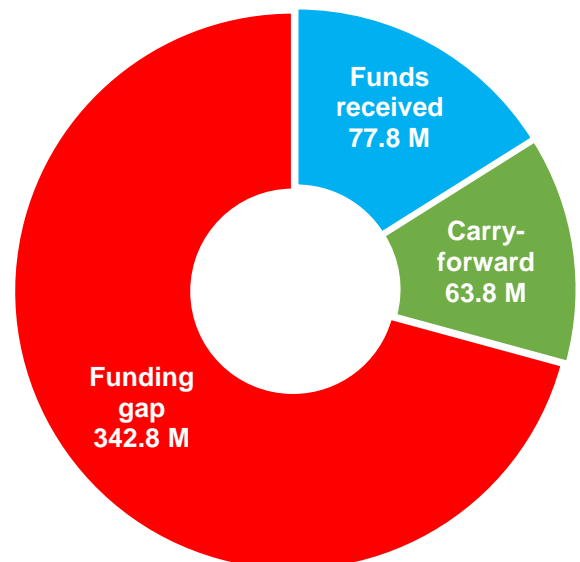
**1.8 million**  
children internally displaced

## UNICEF's Response and Funding Status



## 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 aligned with 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 31 July 2022, UNICEF received a total of \$ 77.8 million in new funding against the 2022 HAC appeal and a total of \$ 63.8 million was carried forward from 2021. This leaves a funding gap of \$ 342.8 million, or 71 per cent of the total amount required to continue UNICEF's life-saving work in Yemen. Critical gaps are seen across all sectors, with the exception of RRM response and education which remain approximately 50 per cent unfunded, all sectors have mobilized less than one-third of the required resources for the year. During the reporting period, generous contributions were received from the German Federal Foreign Office, USAID's Bureau of Humanitarian Assistance, the Yemen Global Thematic Humanitarian Response Fund, the United Nations Office of for the Coordination of Humanitarian Affairs, and the United States Fund for UNICEF. Despite these generous contributions, critical funding gaps for the response are emerging. The new resources mobilized in 2022 are significantly less than those mobilized in the same period in 2021 (more than \$ 134.7 million as of July 2021), signalling an alarming decrease in funds available for the humanitarian response.

## Situation Overview & Humanitarian Needs

The UN-brokered truce which went into effect in April 2022 continued to hold in July, marking it as the longest period of relative calm since the beginning of the conflict. Special Envoy Hans Grundberg urged the Internationally Recognized Government (IRG) and Ansar Allah (AA) to work towards renewing the truce including opening roads in Taiz. Humanitarian needs continue to rise in Yemen, due to the deteriorating exchange rate and global impacts of the war in Ukraine. Yemen imports nearly 90 per cent of all its food requirements and any disruption in the global supply chain has impact on the availability of food in-country<sup>1</sup>.

Torrential rains and flooding hit several areas across Yemen between 13 and 25 July, affecting more than 86,000 people across the country and causing extensive damage to public infrastructure, shelters for displaced people and other private property.<sup>2</sup>

During the month of July, 402 suspected cases of cholera were reported with no associated deaths, which is significantly lower when compared with the same period in 2021 (1,024 AWD/cholera suspected cases and one associated death reported). There are no reported outbreaks of cholera in Yemen. UNICEF is closely monitoring the situation in close coordination with the World Health Organization (WHO), Health and Water, Sanitation and Hygiene (WASH) clusters, including the prepositioning of supplies to ensure a quick response to a possible outbreak. Circulating vaccine derived polio virus (cVDPV) type 2 cases continued to rise, with an additional 15 cases reported in July 2022, bringing the total reported cases of cVDPV2 to 127 in 20 governorates in Yemen since November 2021.

In July, 211 COVID-19 cases were officially confirmed with two associated deaths and 13 recovered cases in the south of the country. Despite continued advocacy with authorities, the northern part of the country did not conduct any COVID-19 vaccination and no data on this has been reported.

UNICEF continues to respond to the deteriorating nutrition situation in Yemen. The Integrated Food Security Phase Classification (IPC) analysis released on 14 March 2022. The IPC analysis highlighted that approximately 2.2 million Yemeni children under the age of five are acutely malnourished, including more than 500,000 suffering from severely acute malnutrition.

During the month of July, the UN Country Task Force on Monitoring and Reporting (CTFMR) documented 19 incidents of grave violations against children, in which 79 per cent of the incidents were verified. This includes 40 confirmed child casualties, including 10 children killed (all boys) and 30 children maimed (21 boys, nine girls) mainly due to explosive devices (71 per cent), gunshots (21 per cent) and mortar shells (7 per cent) by various parties to the conflict. Most of the incidents documented and verified were in the governorates of Taiz (4), Al Hodeidah (3) and Sana'a (3).

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<sup>1</sup> Yemen: UN envoy outlines achievements and challenges in truce implementation <https://news.un.org/en/story/2022/07/1122302>

<sup>2</sup> UNOCHA Humanitarian Impact of Flooding July 2022

## Summary Analysis of Programme Response

### Health

UNICEF delivered a package of Integrated Management of Childhood Illnesses (IMCI) medicines to 12 governorates health offices<sup>3</sup> to support the service provision at the health facility level. UNICEF also supported the Ministry of Public Health and Population (MoPHP) in Aden in conducting a mop-up vaccination campaign using trivalent oral polio vaccine (tOPV) vaccines in 12 districts with low coverage to complete the polio outbreak response in the south, based on reports from the previous campaigns' independent monitors<sup>4</sup>. Despite the continued advocacy with the MoPHP to conduct the necessary outbreak response vaccination campaign in the north, no concrete progress has been recorded.

UNICEF continued to support the provision of vaccines for the routine immunization programme. In July, 492,486 doses of DTP-HepB-Hib (Diphtheria, Tetanus, Pertussis, Hepatitis B and Haemophilus Influenza) and 750,000 doses of Tetanus (Td) vaccines were delivered to the MoPHP in Aden for routine immunization services. This is the first shipment of routine vaccines UNICEF delivered to Aden based on a request from MoPHP and is expected to improve the timely delivery of vaccines to the southern governorates by eliminating the clearance process that delays vaccine shipments between the northern and southern parts of Yemen.

In order to ensure equitable coverage of essential health services, UNICEF implements Integrated Outreach (IOR) sessions to reach the maximum number of children and women with maternal newborn and child health services. Based on the availability of funds, UNICEF implements 4-6 rounds of IORs each year to reach the unreached. During the month of July, UNICEF implemented the third round of integrated outreach in the south with 8,519 children under the age of one year reached with Penta 3 dose, 6,644 children reached with Measles-containing-vaccine first-dose (MCV1) dose, 2,331 children under five given Vitamin A, 86,568 children under five received Integrated Management of Childhood Illness (IMCI) services, 2,897 pregnant and lactating women (PLW) received maternal and newborn services, and a total of 7,254 people were reached with COVID-19 vaccines during the integrated outreach in the south.

UNICEF maintained support to COVID-19 vaccine deployment in Yemen. Based on available data from MoPHP in the south, as of 15 July 2022, a total of 861,302 people had been reached with at least one dose of the COVID-19 vaccine. A total of 450,468 people (4.5 per cent) has been fully vaccinated with either two doses of AstraZeneca or Sinovac or one dose of Janssen COVID-19 vaccine since the start of the initiative in April 2021.

UNICEF has achieved the cumulative 2022 target, to provide Personal Protective Equipment (PPE) to 15,000 health workers. In July, UNICEF provided PPE to 114 health workers, surpassing the 2022 target. The provision of PPE ensures that health workers have access to the necessary tools to protect themselves and the people they serve from COVID-19 and other communicable diseases and to ensure the continuity of essential health services.

Building on the humanitarian-development peace nexus, UNICEF supported immunization supply chain management across Yemen. In July, two new walk-in cold rooms were installed in Hajjah and Al Jawf Governorates to strengthen the cold chain storage capacity, these cold rooms support the immunization supply chain across 43 districts. The solarization of the Expanded Programme on Immunization (EPI) warehouse in Hodeida has also been completed. This has been part of UNICEF's ongoing effort to expand and strengthen the quality of cold chain storage to keep vaccines at the optimum temperature.

### Nutrition

In July, a total of 78,961 children under five years (36,244 female, 42,717 male) were screened for malnutrition. Out of this total, 4,347 (1,943 female, 2,404 male) children with severe acute malnutrition (SAM) were identified and admitted to outpatient treatment programmes (OTPs) reaching 32 per cent of the annual target.

During the same period, a total of 16,333 children (8,080 female, 8,253 male) received deworming tablets, 25,172 children (12,734 female, 12,438 male) received micronutrient sprinkles and 1,980 children (872 female, 1,108 male) received Vitamin A supplementation. In addition, a total of 7,150 mothers received iron folate supplementation, and 9,514 mothers received consultations on infant and young child feeding (IYCF). Achievements are reported through 4,584 OTPs (reporting rate at 91 per cent), along with reports received from 24,605 active Community Health Nutrition

<sup>3</sup> They are including Aden, Abyan, Lahij, Al Dhalea, Shabwah, Hadramout Al Sahel, Hadramout Al-Wady, Taiz, Hodeidah, Marib, Al Maharah and Socotra.

<sup>4</sup> Data not yet available on number of children reached as of time of reporting.

Volunteers (CHNVs) (65 per cent reporting rate), 275 mobile teams, 2,652 infant and young child feeding (IYCF) corners, two integrated outreach rounds, and one polio campaign (Vitamin A) conducted in southern governorates.

## Water, Sanitation and Hygiene

UNICEF continued to support emergency WASH interventions for internally displaced persons (IDPs) and people in need of assistance in Al Bayda, Amran, Hajjah, Hodeidah, Taiz, Ibb, Marib, Saada and Sana'a governorates. The interventions focus on cholera suspected cases, malnutrition-affected families and IDPs in collaboration with government counterparts, implementing partners and the contractors/private sectors. The interventions include water trucking to 112,871 people and 55,307 children (28,569 women; 28,995 men; 27,858 girls; 27,449 boys), distribution of 2,065 hygiene kits and installation of 72 latrines for 1,296 IDPs (328 women; 333 men; 315 girls; 320 boys) in locations that were affected by cholera suspected cases and IDPs camps which were also affected by floods. Water quality monitoring and surveillance continued for water trucking and 122 IDP sites in Hajjah and Hodeidah. In addition, 42 displaced families were connected to water supply networks in Hajjah city.

UNICEF continued the provision of fuel to sustain the water supply and sanitation services to 3.6 million people (estimated 911,000 women, 925,000 men, 875,000 girls and 889,000 boys) in urban centers through support to 37 Local Water and Sanitation Corporations (LWSCs) in 17 governorates.

In 2022, UNICEF converted a cumulative total of 43 rural water wells (Marib, Amran, Dhamar, Saada, Al Jawf, Ibb). During the reporting period, UNICEF converted five rural water supply projects to solar energy as part of the fuel support exit strategy. The provision of sustainable water services reached a cumulative total of 158,919 people (40,824 men, 40,224 women; 39,223 boys, 38,647 girls) in 2022. In July, UNICEF reached 12,592 people (3,235 men, 3,187 women; 3,108 boys, 3,062 girls) in the Dhamar governorate. The interventions will reduce the dependency on fuel, as well as the carbon footprint in Yemen. UNICEF completed the rehabilitation of the Al-Mahal rainwater harvesting reservoir with a total capacity of 1,100 cubic meters in Qatabir district within the Sa'ada governorate. The reservoir will provide water supply to 1,500 people. WASH facilities have been rehabilitated in six health centres in the Hodeidah governorate.



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UNICEF with implementing partners conducted two cleaning campaigns in two IDP locations in Hadramout and Marib governorates, ensuring safe collection and disposal of 552 cubic meters of garbage, benefitting an estimated 18,354 persons.

UNICEF completed 44 hygiene promotion sessions on critical WASH messages of handwashing with soap, food safety, water safety planning, proper use of toilets and menstrual health that reached out to 576 families, or an estimated 4,620 persons. (4,646 women, 4,715 men, 4,463 girls and 4,530 boys.)

UNICEF procured and delivered two mechanical shovels to the Local Water Supply & Sanitation Corporation (LWSC) to sustain the operation and maintenance of water and sanitation services in the Lahj governorate. To strengthen the capacity of local partners in operating water and sanitation programmes, UNICEF completed 21 technical trainings for 583 technical staff from local authorities across Yemen. In addition, a lesson learned reflection workshop was conducted with 107 participants from local partners. The workshop recommended critical requirements for future considerations such as the development of three training aspect modules related to 1) corporate management, commercialization/ revenue management and technical skills 2) practical/field sessions training, documentation of and best practices, and region knowledge sharing.

## Child Protection

In the month of July, UNICEF and its implementing partners reached a total of 50,111 children and adults with child protection services across Yemen.

14,933 conflict-affected people were reached through explosive ordinance risk education (EORE) activities, including 8,475 children (3,512 girls and 4,963 boys) and 6,458 adults (2,192 women and 4,266 men) in the Saada governorate. EORE was delivered in schools and child-friendly spaces and through community campaigns.

Through a network of fixed, remote, and mobile modalities, UNICEF provided psychosocial support to 34,265 people across eight governorates (Abyan, Aden, Al Jawf, Al-Hodeidah, Hajjah, Marib, Raymah and Shabwah) including 29,679 children (14,320 girls and 15,359 boys) and 4,586 adults (3,243 women and 1,343 men). These services are aimed at helping children to build their resilience to overcome the immediate and long-term consequences of their exposure to violence.

Through the case management program, UNICEF continued to support the referral and provision of critical services and victim assistance for the most vulnerable children. A total of 913 children (293 girls, 620 boys) were identified by trained case managers, of which 829 children (260 girls, 569 boys) received more than one service.

In July, Child Protection Area of Responsibility (AoR) partners provided community-based mental health and psychosocial support to a total of 43,680 people including 34,495 children (16,951 girls, 17,544 boys) and 9,185 adults (7,500 women, 1,685 men) primary caregivers.

## **Education**

UNICEF supported the Ministry of Education with developing the Back-to-School plan for the 2022-2023 school year which will be implemented in August 2022. In the northern governorates, the school year started on 31 July and in southern governorates activities starting on 7 August. UNICEF will reach an estimated 400,000 children across Yemen with the back-to-school campaigns, through the provision of educational supplies including school bag kits, recreational kits, school-in-a-box kits, whiteboards, and markers. The campaign will be further strengthened the dissemination of messages over various media including local radio channels, TV, and social media to emphasize the importance of the continuity of learning and disseminate important messages to parents on how to overcome challenges during the registration period in schools.

As part of the capacity building support provided by UNICEF, training was provided to 128 rural female teachers in Shabwah, Abyan, Al Dhale, and Marib governorates. UNICEF provided capacity building to 50 Ministry of Education (MoE) staff (49 men) in Hadramawt, and 998 teachers, principals, and members Father and Mother councils (688 women) in Aden, Hadramawt, and Marib focusing on teaching and learning methods, safe school protocols, and psychosocial support.

UNICEF continued supporting the Ministry of Education (MoE) with the expansion of safe learning environments through the rehabilitation of 41 schools in Taiz, Hajjah and Al Mahwit governorates potentially benefiting 26,192 children (11,042 girls, 15,150 boys).

In response to the heavy rains and flooding in July, UNICEF completed initial needs assessments on damage to temporary learning facilities in Amanat al Asimah and Hodeida. In the Al-Somaya Camp (Marib), four temporary learning spaces (TLS) were completely damaged, and two partially damaged by rains and flooding. In response, UNICEF has fully replaced four TLS, rehabilitated partially damaged tents, and added reinforcements to 40 tents that were installed by UNICEF.

## **Social Inclusion and Cash Assistance**

During the month of July 2022, UNICEF supported the Social Welfare Fund (SWF) in the implementation of the cash plus project in the Amanat Al Asimah and Sana'a governorates. Cash plus is meant to support the children of the Unconditional Cash Transfer (UCT) Project beneficiaries to access social services including nutrition, health, child protection, and education as well as equipping them and their families with social behaviour change messages, to maximize the benefit of the UCT Project cash assistance. In June, the registration of cases was done. During the reporting period, data cleaning and distribution of cases among case managers was done in preparation for the actual case management. In addition, a total of 189 individuals (139 men and 50 women) from the SWF Case Referral Officers (CRO) received a two-day refresher training on Social Behaviour Change and communication skills as well as orientation on the cash plus approach and components. This will be followed by a needs assessment done at the household level to inform the referral of cases to required services. Immediately after the training, the CROs started the need assessment stage as part of the case management cycle to better identify the needs of the registered beneficiaries, in order to support children's access to complementary services, supported by UNICEF programmes. The initiative will continue - during the month of August when the CROs will conduct referrals and follow-up on cases, until cases are fully closed.

In addition, coordination workshops with service providers were held in Amant Al Asimah and Sana'a, with a total of 120 participants (20 women and 100 men) from SWF, and representatives of basic service providers. The workshop aimed to strengthen and improve the coordination and referral mechanisms between SWF and service providers. In doing so, a coordination matrix has been agreed to inform the referral pathway between the SWF case managers and services

providers. The goal is to promote and maintain the access of the most vulnerable children to complementary services especially those supported by UNICEF's programmes.

UNICEF supported the Handicap Care and Rehabilitation Fund (HCRF) in Sana'a reached a total of 467 children with disabilities through their case management support provided in 72 districts. Through case management, eligible cases are identified and registered, their needs are identified by trained social workers from HCRF who refers them to required services based on their needs. Monitoring and follow-up is then activated to ensure the case receives the required services adequately. Any challenges and/or barriers are addressed timely as they occur.

UNICEF continued support to the Ministry of Planning in drafting and publishing the Yemen Social Economic update. In July, the 70th edition entitled "Promoting the Role of Technical Education and Vocational Training (TEVT) in Development" was published. The edition presents the TEVT education status quo, partnership with the private sector, and priority solutions. To promote the role of TEVT in development, the edition recommends some key actions including enhancing the qualification and professional skills of technical and vocational teachers, increasing enrolment rates in TEVT by providing safe and healthy environment and integrating vocational classes in general education, and providing technical and financial support to ensure the technical and vocational institutions remain functional. In times of humanitarian crises and conflict, life skills and training such as TEVT is key to enhancing family resilience, and plays an essential role in improving the wellbeing for adolescents and their families.

UNICEF also supported the Ministry of Social Affairs and Labour (MoSAL) to conduct the Social Protection Consultative Committee (SPCC) monthly meeting in Sana'a. The meeting discussed the efforts and plans of capacity building for the Social Protection decision makers including SPCC members. It also reviews the intervention of the Yemen Bank of Food (YFB) to support the poor and most vulnerable. As a follow-up to the meeting a coordination meeting between YFB, SWF, HCRF, Yemen Medicine Bank (YMB), SPCC secretariate and UNICEF to discuss ways of linking different social protection beneficiaries to YFB and YMB in a more systematic and sustainable manner. It is worth mentioning that although preparation for the July meeting of the SPCC in Aden is complete, the meeting was rescheduled to early August. Such coordination and complementarity among social protection players will ensure a more inclusive and effective response to the need of the poor and most vulnerable children and their families and enhance their ability to cope with impact of the multiple crises and shocks they are facing.

### **Social Behaviour Change (SBC)**

To increase the uptake of the integrated outreach (IOR) conducted in the governorates under the control of the IRG, trained community volunteers and members of Mother-to-Mother clubs scaled up COVID-19 vaccine demand generation activities, engaging 44,510 people (30,510 women and 14,000 men) through house-to-house visits and group awareness sessions. The volunteers also promoted the utilization of the available health services particularly those related to immunization and provided information on the locations of the service delivery points. The interpersonal communication activities were reinforced with mass media through 12 radio stations that broadcasted radio flashes, public service announcements, and dedicated discussion programmes on COVID-19 and COVID-19 vaccines as well as the essential lifesaving practices, reaching an estimated four million people.

In Marib governorate, UNICEF through implementing partners continued extensive interventions of COVID-19 Risk Communication and Community Engagement (RCCE) as well as COVID-19 vaccine demand generation, engaging 13,207 people through door-to-door visits and group awareness sessions.

UNICEF continued to support MoPHP in managing accountability and community feedback mechanisms through which health professionals responded to peoples' queries, concerns, and medical consultations on the COVID-19 vaccine, as well as polio and measles vaccines. During the month of July, 5,730 calls were responded to through these hotlines. The majority of the enquiries received were in relation to vaccination centres, including vaccination registrations and concerns around the side effects of COVID-19 vaccines. Health professionals who received enquiries addressed the concerns and medical consultations on the call, while other general complaints were referred to the relevant MoPHP department for further support.

UNICEF organized capacity development sessions for 185 community engagement volunteers (55 women and 130 men) in the Sana'a hub on the principles of social and behaviour change to undertake effective interpersonal communication and social mobilization interventions. The participants were also oriented on the package of lifesaving

practices including key sanitation and hygiene practices, key maternal and child health practices, and infant and young child feeding practices.

### **Accountability to Affected Populations (AAP)**

UNICEF continued interagency work with OCHA through the Community Engagement and Accountability to the Affected Population Working Group (CE/AAP WG), co-chaired by UNICEF and OCHA. In July, the CE/AAP WG finalized the 2022 workplan.

The Complaints and Feedback Mechanism (CFM), activities for the IDP camps in Aden will restart in October, benefitting 184,818 IDPs in southern governorates, Turba, Western Coast and Marib hubs. As part of project inclusion, specific attention will be given to vulnerable/disabled IDPs to be encouraged to use the services.

The Management Information System was designed for CFM users and call center agents and expected to be complete in August. The Management Information System was designed on the results of the community needs assessment and internal consultations for the scale-up of UNICEF's CFM.

### **AWD/Cholera Response**

As part of the acute watery diarrhoea (AWD)/cholera response and given the ongoing and projected heavy rains in Yemen which increase the risk of AWD outbreaks across many governorates, UNICEF prepositioned 180 AWD kits (periphery type) in 11 Governorate Health Offices in the month of July. In the coming months UNICEF will preposition 235 AWD kits to the remaining governorates.

UNICEF continued to provide communication and social mobilization interventions with implementing partners on the essential lifesaving practices including essential AWD/cholera prevention practices. In July, community volunteers and members of Mother-to-Mother clubs reached 176,213 people (104,072 women, 72,141 men) through multiple interpersonal communication activities including house-to-house visits and community gatherings.

### **Rapid Response Mechanism (RRM)**

In July, heavy rainfall and flooding were the main trigger for displacing populations across the country. More than 2,515 households (17,605 people) were displaced across the affected districts in Marib, Al Jawf, Amran, Al Hodeidah and other governorates.

UNICEF, along with UNFPA and WFP, continued to reach displaced populations affected either by conflict or climate change with first line response packages. The Rapid Response Mechanism (RRM) reached an additional 2,340 newly displaced households (16,380 individuals) across 67 districts in 19 governorates. UNICEF reached members of households in Marib, Al Jawf, Amran, Al Hodeidah, Dhamar, Hadramout, Saada and Sana'a governorates with RRM kits that include essential hygiene items, food, family basic hygiene kits, and female dignity kits. UNICEF's RRM kits meet the most critical and immediate needs of displaced families, as they are suddenly uprooted from their homes.

### **Supply and Logistics**

In July, UNICEF delivered supplies worth US\$1,104,249, including vaccines, hygiene kits, personal protective equipment (PPE), medicines, medical equipment, and WASH equipment. These included supplies such as AWD periphery kits in response to the heavy rain and floods in July.

The fluctuation of the Yemeni Rial has continued to be a bottleneck for local vendors in responding to tenders, due to the challenge of retaining offered 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 and are required to look to an alternative product, which often results in further delays to procurement processes.

### **Humanitarian Leadership, Coordination and Strategy**

UNICEF's humanitarian strategy in Yemen is currently aligned with the 2021 Humanitarian Needs Overview (HNO), the HRP, 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 AoR. UNICEF is also an

active member of the Health Cluster and is collaborating with other UN agencies and INGOs to efficiently deliver basic lifesaving supplies and services throughout Yemen.

In the context of the COVID-19 pandemic, UNICEF together with the World Health Organization (WHO) facilitate and promote COVID-19 vaccination at the community and health facility levels for frontline health care workers, elderly people, and those with chronic underlying conditions, displaced people, migrants and refugees.

UNICEF also integrates gender-responsive initiatives to ensure protection from sexual exploitation and abuse and strengthen interventions to prevent, respond to, and mitigate gender-based violence. UNICEF supports the inter-agency Protection against Sexual Exploitation and Abuse (PSEA) network by providing 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) includes members from the HCT and wider humanitarian community. UNICEF and OCHA continue to co-chair the working group, facilitate the regular convening of the working group, ensuring adequate information sharing with all the constituents of the wider humanitarian community in Yemen.

## Human Interest Stories and External Media

Fighting a Silent Killer: Malnutrition in Yemen:

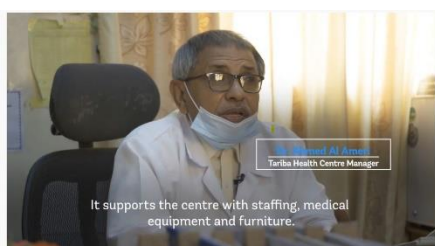
7,500 cartons of ready-to-use therapeutic food (RUTF) have been provided along with routine medication, benefiting 7,500 children under five years old in Hajjah Governorate

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



## External Media

### [EHNP/EHCP Supports 2000 Health Facilities in Yemen](#)



### [UNICEF supports “Awareness through Mothers” sessions in Yemen](#)



### [Children represent 28% of all suspected #cholera & acute watery diarrhoea cases](#)



Next SitRep: 30 November 2022



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**UNICEF HAC 2020:** [www.unicef.org/appeals/yemen.html](http://www.unicef.org/appeals/yemen.html)

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## Annex A

### Summary of Programme Results<sup>5</sup>

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2022 target	Total results	Change since the last report	2022 target <sup>6</sup>	Total results	Change since the last report
<b>Health</b>							
Number of children aged 0 to 11 months vaccinated against measles	20,100,000	972,142	448,271 <sup>7</sup>	58,977			
Number of children aged 6 to 59 months vaccinated against polio		5,535,816	1,193,223	0 <sup>8</sup>			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	1,627,697	193,457			
Number of health care facility staff and community health workers provided with personal protective equipment		25,000	14,280 <sup>9</sup>	0			
<b>Nutrition</b>							
Number of children aged 6 to 59 months with severe acute malnutrition admitted for treatment	400,000	366,358	156,578	4,347	N/A	156,578	4,347
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months	4,766,718 <sup>10</sup>	5,023,627	1,202,787 <sup>11</sup>	1,980	N/A	1,202,787 <sup>12</sup>	1,980
<b>Child Protection, GBVIE &amp; PSEA</b>							
Number of children and caregivers accessing mental health and psychosocial support	8,600,000	900,000	254,717 <sup>13</sup>	14,582	1,218,253	283,815	96,639
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,000,000	1,432,017	1,030,944 <sup>14</sup>			
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	0			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,010,000	423,041 <sup>15</sup>	14,933			
<b>Education</b>							

<sup>5</sup> These figures reflect the updated, approved 2022 HAC appeal.

<sup>6</sup> Cluster targets are in the assessment process and not yet available.

<sup>7</sup> Due to late partner reporting

<sup>8</sup> Decrease due to data cleaning

<sup>9</sup> Due to late partner reporting

<sup>10</sup> The figure will be updated after the finalization of the 2022 Humanitarian Response Plan (HRP).

<sup>11</sup> Due to late partner reporting

<sup>12</sup> Due to late partner reporting

<sup>13</sup> Slow progress due to bureaucratic approval process

<sup>14</sup> Implementation saw delays in the planning phase

<sup>15</sup> Progress is slow due to bureaucratic approval process, conflict-related security risks, and logistical impediments

Number of children accessing formal and non-formal education, including early learning	8,100,000	500,000	188,956	19,268 <sup>16</sup>	895,000	682,278 <sup>17</sup>	62,705
Number of children receiving individual learning materials		800,000	19,275 <sup>18</sup>	0 <sup>19</sup>	1,200,000	53,643	200
Number of teachers receiving teacher incentives each month		15,000	2,676 <sup>20</sup>	534	100,000	8,310	2,180

### Water, Sanitation & Hygiene

Number of people accessing a sufficient quantity of safe water for drinking and domestic needs	15,400,000	6,800,000	4,726,223	584,598 <sup>21</sup>	7,484,406 <sup>22</sup>	7,588,472 <sup>23</sup>	949,103
Number of people reached with critical WASH supplies		5,910,000 <sup>24</sup>	1,630,170 <sup>25</sup>	800,467	3,814,995 <sup>26</sup>	1,752,416	581,940 <sup>27</sup>
Number of people in humanitarian situations reached with messages on appropriate hygiene practices		5,910,000 <sup>28</sup>	2,868,201 <sup>29</sup>	2,229,684	4,750,511 <sup>30</sup>	3,650,971	2,316,516 <sup>31</sup>
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	1,639,089	107,495			

### Social Protection & Cash Transfer

Number of households reached with UNICEF funded multi-purpose humanitarian cash transfers		50,000	13,066 <sup>32</sup>	0			
Number of people benefiting from emergency and longer-term social and economic assistance		160,000	27,328 <sup>33</sup>	467			

### Cross-sectoral (HCT, SBC, RCCE and AAP)

Number of people participating in engagement actions for social and behavioural change		8,500,000	6,798,070	387,225			
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### Rapid Response Mechanism

Number of vulnerable displaced people who received Rapid Response Mechanism kits		588,000	271,978	16,380			
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<sup>16</sup> Jan progress has been updated now due to partner late reporting

<sup>17</sup> Jan progress added due to partner late reporting

<sup>18</sup> No distribution of individual learning materials took place during the school break. Back to School campaigns including distribution of school materials are currently ongoing

<sup>19</sup> School year 2021-2022 is now complete

<sup>20</sup> School year 2021-2022 complete, new school year started in July

<sup>21</sup> In addition to the reached every month of 2,940,794 new beneficiaries have been added

<sup>22</sup> Cluster targets are added from 2022 HRP, now reporting progress

<sup>23</sup> Cluster targets are added from 2022 HRP, now reporting progress

<sup>24</sup> UNICEF/HAC targets were finalized at the beginning of the year while cluster targets/HRP published in March/April. Due to decrease in funding and targeting in the Yemen 2022 HRP (April 2022) the target has been reduced downward in the mid-term review

<sup>25</sup> Due to limited available resources as WASH only received 29% of the required funds

<sup>26</sup> UNICEF/HAC targets were finalized at the beginning of the year while cluster targets/HRP published in March/April. Due to decrease in funding and targeting in the Yemen 2022 HRP (April 2022) the target has been reduced downward in the mid-term review

<sup>27</sup> Cluster targets and progress updated as of 2022 HRP

<sup>28</sup> UNICEF/HAC targets were finalized at the beginning of the year while cluster targets/HRP published in March/April. Due to decrease in funding and targeting in the Yemen 2022 HRP (April 2022) the target has been reduced downward in the mid-term review.

<sup>29</sup> Due to limited available resources as WASH only received 29% of the required funds

<sup>30</sup> UNICEF/HAC targets were finalized at the beginning of the year while cluster targets/HRP published in March/April. Due to decrease in funding and targeting in the Yemen 2022 HRP (April 2022) the target has been reduced downward in the mid-term review.

<sup>31</sup> Cluster targets and progress updated as of 2022 HRP

<sup>32</sup> Due to delays in obtaining clearances, the payment cycle was conducted in June 2022

<sup>33</sup> 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	13,291,791		6,613,944	105,094,265	83%
Nutrition	120,000,000	23,667,055		9,975,125	86,357,820	73%
Child Protection, GBViE & PSEA	37,000,000	5,537,382		6,628,261	24,834,357	67%
Education	55,450,000	7,501,314		22,322,748	25,625,938	47%
Water, Sanitation and Hygiene	100,000,000	19,246,108		14,632,258	66,121,634	71%
Social Protection	23,000,000	282,371		1,788,163	20,929,466	91%
SBC, Community Engagement & AAP	12,500,000	1,881,480		403,052	10,215,468	82%
Rapid Response Mechanism	5,950,000	1,568,744		1,337,962	3,043,294	54%
Cluster coordination	5,500,000	66,539		66,287	5,367,174	98%
Being allocated		4,796,706			-4,796,706	
<b>Total</b>	<b>484,400,000</b>	<b>77,839,490</b>		<b>63,767,800</b>	<b>342,792,710</b>	<b>71%</b>