



Reporting Period: 1– 31 August 2022

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# Yemen Country Office Humanitarian Situation Report

August 2022



## Highlights

UNICEF continued to provide essential lifesaving interventions to 82,878 people in flood-affected regions and communities, including IDPs, through water trucking, provision of hygiene kits, cholera tables, and desludging latrines.

In August, UNICEF provided psychosocial support to 55,176 individuals, including 48,539 children to children, to help address the immediate and long-term consequences of their exposure to violence.

By the end of August, UNICEF had trained 3,500 community health care workers to provide primary health care services. An estimated 1.5 million people, including 360,000 children under five and 350,000 women of reproductive age, accessed essential primary health care services.

## Situation in Numbers

(OCHA, 2022 Humanitarian Needs Overview)



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



**23.4 million**  
people in need

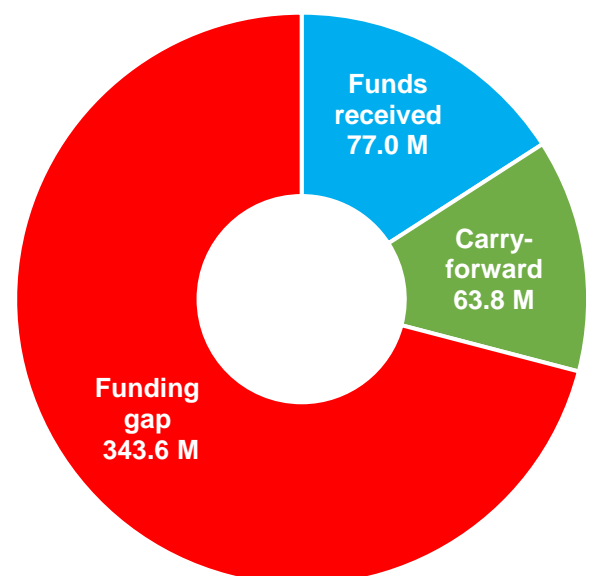


**2.2 million**  
children internally displaced  
(IDPs) (UNICEF, 2022 Yemen  
Humanitarian Action for Children)

## UNICEF's Response and Funding Status

Health	Measles vaccination	51%
	Funding status	16%
Nutrition	SAM admissions	34%
	Funding status	28%
Child Protection	Psychosocial support	34%
	Funding status	33%
Education	Access to education	45%
	Funding status	54%
WASH	People with safe water	70%
	Funding status	34%
Social Policy	Social economic assistance	49%
	Funding status	9%
Cross Sectoral	People reached with campaigns	98%
	Funding status	19%
RRM	IDPs with RRM kits	59%
	Funding status	49%

## Funding Status 2022 Appeal: \$484.4M



## Funding Overview and Partnerships

The Yemen Humanitarian Action for Children (HAC), which is aligned to the 2021 Yemen Humanitarian Response Plan (YHRP), appeals for \$484.4 million in 2022. UNICEF's humanitarian programmes have nationwide reach, targeting populations in areas with the most acute needs. All COVID-19 related activities are integrated into programmes planned within the HAC. As of 31 August 2022, UNICEF received a total of \$77 million in new funding against the 2022 HAC appeal and a total of \$63.8 million was carried forward from 2021<sup>1</sup>. This leaves a funding gap of \$343.6 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 Education and Rapid Response Mechanism (RRM) funding targets. During the reporting period, generous contributions were received from the French Committee for UNICEF, the Yemen Global Thematic Humanitarian Response Fund and the Arab Gulf Program for Development (AGFUND). Despite these contributions, new humanitarian resources mobilized in 2022 are much lower when compared to the situation one year ago (over \$273.7 million in August 2021).

## Situation Overview & Humanitarian Needs

The UN-brokered truce that came into effect in April was extended for a second time until 2 October. In addition to the truce, an expanded proposal was shared by UN Special Envoy for Yemen, Hans Grundberg. This proposal includes a mechanism for both parties to begin regular payments to civil servant salaries and pensions, opening roads in Taiz, resumption of flights between Sanaa airport and select destinations, as well as increasing the number of fuel ships entering the Hudaydah ports<sup>2</sup>.

Since the beginning of 2022, Yemen has faced two extreme weather conditions: extreme drought in the first half of the year and torrential rains and flooding from July 2022. Weather reports indicate that the drought ranged from moderate to severe between January to June, with the third driest period on record in the last forty years further exacerbating the food and malnutrition crises in Yemen<sup>3</sup>. In August, challenges to UNICEF's lifesaving interventions included heavy rains destroying IDP shelters and threatening critical infrastructure, and an increase in severe acute malnutrition (SAM).

During August, 556 *suspected* cases of acute watery diarrhoea (AWD)/Cholera were reported, although the Ministry of Health reported no *confirmed* cholera cases during the month. UNICEF is closely monitoring the situation in coordination with WHO, Health and WASH clusters, and prepositioning supplies to ensure a quick response to possible outbreaks.

In August, 308 COVID-19 cases were officially confirmed (with 166 recovered cases in the south). No associated deaths were reported. There are no COVID-19 vaccinations reported in the northern part of the country.

The United Nations Country Task Force on Monitoring and Reporting (UN CTFMR) documented 18 incidents of grave violations against children, of which 83.3 per cent were verified. This includes 20 confirmed child casualties, including five children killed (four boys, one girl) and 15 children maimed (12 boys, three girls) mainly due to explosive devices (72.7 per cent), mortar (nine per cent), gunshot (nine per cent), artillery (nine per cent) while (9 per cent) due to mortar by various parties to the conflict. There was also military use of a hospital by a party to the conflict and two incidents of humanitarian access denial were reported. Most of the incidents documented and verified were in the following governorates: Hodeida (4); Shabwah (3); Taiz (3); Sa'ada (2); Marib (2); and Aden (1).

## Summary Analysis of Programme Response

### Health

As part of UNICEF's response, 994 health workers were provided with Personal Protective Equipment (PPE) in August to help protect health workers and the people they serve from COVID-19 and other communicable diseases, and to maintain the continuity of essential health services.

UNICEF supported over 1,955 Primary Health Care (PHC) facilities in all governorates with operational funds, thereby ensuring the availability of essential health workers, water, electricity (or alternative energy sources), stationery and cleaning supplies to support an emergency response, if required.

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<sup>1</sup> Actual amount is lower in August 2022 compared to July 2022 due to grant classification

<sup>2</sup> UN News - <https://news.un.org/en/story/2022/08/1123832>

<sup>3</sup> Food and Agriculture Organization "Agrometeorological UPDATE", August 2022 Issue

UNICEF continued to scale-up Maternal Newborn and Childhood service provision at the community and facility levels. 117 health workers (HWs) in four governorates (Taiz, IBB, Rayma, Abyan) were trained in neonatal care, 105 community midwives (CMWs) in four governorates (Taiz, IBB, Rayma, Hodeida) were trained on Community Based Maternal Newborn Care (CBMNC) and nearly 50 HWs in the Amran governorate were trained on Basic Integrated Management of Childhood Illnesses (IMCI). Furthermore, a package of Maternal and Newborn Health (MNH) medicines was delivered to ten MNH hospitals in seven governorates (Aden, Abyan, Lahij, Shabwah, Hadramout, Taiz & Marib) to support service provision.

UNICEF continued to support the Routine Immunization Programme in Yemen through the provision of vaccines. In August, a total of 500,000 doses of Bacille Calmette-Guerin (BCG), 353,850 doses of Inactivated Polio Vaccine (IPV), 1,013,800 doses of Pentavalent Vaccine (PCV), 346,500 doses of Rota and 793,000 doses of Measles-rubella (MR) vaccines were delivered to Sana'a and Aden for the routine Q4 immunization distribution.

As part of UNICEF's response to improve immunization supply chain systems and manage/optimize vaccine delivery, storage and safeguard vaccine potency for children in Yemen, UNICEF procured and distributed a total of 336 units of solar direct drive (SDD) refrigerators.

In August, UNICEF completed integrated outreach in the north (third round) and south (fourth round), vaccinating 34,119 children under one with three doses of the combined diphtheria, tetanus toxoid and pertussis vaccine (Penta3) and Measles-containing-vaccine first-dose (MCV1) doses. UNICEF also provided 110,918 children under-five with Integrated Management of Childhood Illness services and 31,263 women were reached with reproductive health services.

UNICEF continues to support the Ministry of Public Health and Population (MoPHP) COVID-19 response plan in Yemen with deployment of vaccines. A total of 8,462 people were reached with at least one dose of COVID-19 vaccine during the month of August, bringing the cumulative total to 701,276 people who have received at least one vaccination.

UNICEF continues to support community health workers (CHWs) in Yemen, through provision of capacity building to locally selected female candidates. As of August, 580 CHWs in the Abyan, Lahij, Hadramout and Taiz governorates have completed their training. The total number of trained CHWs supported by UNICEF has increased to more than 3,500 CHWs across the country. Since the beginning of 2022, CHWs have reached more than 1.5 million people with PHC services, including 360,000 children under five and 350,000 women of reproductive age.

## Nutrition

In partnership with the MoPHP, and implementing partners, UNICEF is providing prevention and scale-up of the integrated Community Management of Acute Malnutrition (CMAM) programme in Yemen. Since the beginning of the year, a total of 3,923,173 children (1,951,685 boys, 1,971,488 girls) under five years were screened for malnutrition. Of these, 187,561 children (83,242 boys, 104,319 girls) with SAM were identified and admitted to Outpatient Treatment Programmes (OTPs), reaching 39 per cent of UNICEF's response target. Furthermore, 21,752 SAM children (10,394 boys, 11,358 girls) with complications were also admitted to therapeutic feeding centres.

In 2022, 688,802 children (347,037 boys, 341,766 girls) received deworming tablets and 979,282 children (491,276 boys, 488,006 girls) received micronutrient sprinkles. Since the beginning of 2022, a cumulative total of 1,218,872 children (617,078 boys, 601,794 girls) received Vitamin A supplementation. In addition, a total of 1,140,776 mothers received Iron Folate supplementation and 2,324,268 mothers received infant and young child feeding (IYCF) consultations. The results of the achievement are collected through 4,592 OTPs (90 per cent reporting rate), along with reports received from 24,447 active community health nutrition volunteers (CHNVs) (61 per cent reporting rate), 275 mobile teams, 2,652 infant and young child feeding (IYCF) corners, three integrated outreach rounds and a polio campaign (Vitamin A) conducted in the southern governorates.

During the reporting period the nutrition cluster participated in the updated analyses for Integrated Food Security Phase Classification (IPC) on acute malnutrition. The IPC analyses, conducted in southern governorates, show a further deterioration of malnutrition in districts affected by weather events (floods and drought), crises in Ukraine and shortage of food supplies.

In August, the nutrition cluster joined the OCHA-led inter-cluster mission to Hajjah, Abse and Hodeida to assess response and gaps in Abbs (Matwalah, Deer Al Hessi, Durainah, Alaolia, Alsofla, Abbs Hospital). Several meetings were

held with stakeholders from the Hajjah and Hodeidah Health Offices, Hajjah the Supreme Council for the Management and Coordination of Humanitarian Affairs (SCMCHA) and nutrition cluster partners in Hajjah and Hodeidah.

## Water, Sanitation and Hygiene

Heavy rain and flooding in August caused damage to sewer and water networks in several governorates. The IDP camps in Marib, Taiz, Hodeida, Hajjah, Aden and coastal areas were severely affected. As part of the emergency response, UNICEF continued to provide essential lifesaving interventions to flood-affected regions and IDP areas through water trucking, provision of hygiene kits, cholera tables and desludging latrines. UNICEF provided 94,605 m<sup>3</sup> of water through water trucking to 40,379 people (10,373 men, 10,220 women, 9,966 boys, 9,820 girls) in Hodeida and Hajjah at Al Hali, Az Zuhrah, Abbs and Aslem districts/ IDPs Camps, Marib-Majzer, Mahiliah and Taiz.

As part of the flood response, UNICEF distributed basic hygiene kits (BHK), consumable hygiene kits (CHK) and chlorine tablets to 82,877 people (21,290 men, 20,977 women, 20,455 boys, 20,155 girls) in Hodeida, Hajjah, Hadramout, Marib, Al Bayda, Amran, Dhamar and Sana'a.

In August, UNICEF provided WASH support to IDP settlements in Hodeida, Hajjah, Marib, Shabwa, Hadramout and Sa'ada, Taiz. UNICEF conducted water quality monitoring for 655 water points in IDPs settlements located in Hodeida and Hajjah which benefited 21,276 people (5,466 men, 5,385 women) including 10,425 children (5,251 boys, 5,174 girls). As part of the clean-up campaign, 849 cesspits of latrines tanks were dislodged in Marib, Shabwa, Hadramout, and Sa'ada which benefited 16,988 people (4,364 men, 4,300 women, 4,193 boys and 4,131 girls).

As part of its ongoing hygiene awareness and promotion campaign, UNICEF reached 20,000 IDPs (5,138 men, 5,062 women, 4,936 boys and 4,864 girls) with hygiene promotion during NFI distributions. In Taiz IDP camps (Dimnat Khadir and Al Taizyah), UNICEF installed 24 gender sensitives latrines benefiting 436 people (111 men, 109 women; 107 boys, 109 girls).

In August, UNICEF continued to focus on the longer-term sustainability of water supply and sanitation (WSS) infrastructure in Yemen. Ten WSS infrastructures have been rehabilitated through the installation of solar pumping units that provide water to communities in the Hadramout, Shabwah, Sa'ada, Al Jawf, Hodeida and Hajjah governorates.



©UNICEF/Yemen/2022 - Rainwater Harvesting Reservoir Sa'ada

To address water scarcity and the depletion of groundwater sources in Yemen, UNICEF completed construction of four rain harvesting mega reservoirs at nine new distribution points in Sa'ada. The rain harvesting reservoirs will provide communities with access to water that can be utilized during dry seasons or droughts when water is scarce and mitigate the depletion of groundwater sources.

As of August, 8.3 million people (63 per cent of the HRP target population) were reached by WASH sector response activities. In addition, WASH partners extended humanitarian WASH support to the flood-affected population with the distribution of hygiene kits, water trucking and desludging latrines reaching 9,908 households in three governorates.

## Child Protection

In August, UNICEF provided 48,415 conflict-affected people 13,387 adults (9,250 men; 4,137 women) including 35,028 children (20,735 boys; 14,293 girls) with explosive ordinance risk education (EORE) activities in the Al Bayda, Marib, and Sa'ada governorates. EORE messages were delivered in schools and child-friendly spaces, and through community campaigns integrated with COVID-19 preventative measures.

Through a network of fixed, remote and mobile modalities, UNICEF provided psychosocial support in coordination with the Ministry of Education, the Ministry of Social Affairs and Labor, Benevolence Coalition for Humanitarian Relief, Millennium Development Foundation and the Norwegian Refugee Council. In August, 55,176 people across seven governorates (Al Jawf, Al Hodeida, Hajjah, Marib, Rayma, Sa'ada and Shabwah) including 48,539 children (25,698 boys, 22,841 girls) and 6,637 adults (3,190 men, 3,447 women) were reached. These services helped children overcome the immediate and long-term impacts of their exposure to violence.

Through the case management program, UNICEF continued its support for the referral and provision of critical services and assistance for vulnerable children. In August, 3,274 children (1,826 boys, 1,448 girls) were identified by trained case managers out of them 2,148 children (1,288 boys; 860 girls) received more than one service.

In August, the CP Area of Responsibility (AoR) conducted training on reporting and data entry targeting Information Management Officers (IMOs) and data clerks in national non-governmental organizations. The training aimed to increase the capacity of local partners, improve reporting skills and increase communication with the CP AoR. In total, 11 participants took part including two women. To promote gender equity and equality, female NGO workers will be encouraged to take part in future capacity-building activities.

## Education

UNICEF continued to improve access to and enrolment in safe learning environments through the implementation of non-formal education, rehabilitation of damaged schools and establishment of temporary safe learning spaces.

In August, schools across Yemen reopened for the 2022-2023 school year. There is an estimated 2.4 million school-aged girls and boys out of school, as well as 870,000 displaced Yemenis who have had their education abruptly interrupted due to multiple displacements<sup>4</sup>. To ensure the continuation of education for children in Yemen, UNICEF launched the Back-to-Learning campaign for the 2022-2023 school year. The media campaign was launched in the north and south of Yemen through the dissemination of messages over various media platforms, including local radio, TV and social media channels. The Back-to-Learning campaign emphasizes the importance of education for children and disseminates important information to parents on how to overcome challenges during the registration process in schools. The ongoing campaign also included the dissemination of posters to alert students and the community about returning to school in a safe manner.

In August, as part of the capacity building support provided by UNICEF, training was provided to 1,522 (709 women, 813 men) education office staff, teachers, school management staff and members of Father and Mother councils on safe school protocol, psychosocial support, school management and active learning in Abyan, Aden, Hadramawt, Marib, Shabwah and Taiz governorates.

UNICEF continued to support MoWE in creating conducive learning environments for children through the rehabilitation of WASH facilities in 25 schools in the Amant Al Asimah, Sana'a and Amran governorates, benefiting 34,376 children (15,052 boys; 19,324 girls). Additionally, 1,575 school desks were distributed to benefit 3,825 children (1,584 boys; 2,241 girls) in Sana'a, Amran and Hajjah governorates. In Ibb governorate, 10 temporary learning spaces (tents) with whiteboards were distributed benefiting 200 children (80 boys; 120 girls), while 12,626 children (6,556 boys; 6,070 girls) were supported at the individual level through the distribution of school bag kits, and 8,299 children (5,762 boys; 2,537 girls) were supported at the school level through the distribution of recreational kits and school-in-box.

## Social Inclusion and Cash Assistance

In August 2022, as part of the 5th cycle of the Cash plus initiative, UNICEF together with the Social Welfare Fund (SWF) began implementation of case referral activities for the Unconditional Cash Transfer Project (UCT) beneficiaries in Amanat Al Asimah and Sana'a governorates among three targeted districts (Bani Harith, Al Thawrah, Al Husn). Nearly 8,000 (7,988) households, comprising 48,868 individuals (12,927 men, 15,525 women, 10,443 boys, 9,973 girls,) were registered and their needs were assessed with the overall aim of supporting and referring access to basic services.

Key findings from the assessments highlighted that a total of 6,435 individuals (28 men, 1,789 women, 2,372 boys, 2,246 girls) were identified as requiring health and nutrition services, which includes 2,115 pregnant and lactating women, and 56 children with malnutrition. Furthermore, 3,966 children (2,051 boys; 1,915 girls) needed birth certificates, 4,100

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<sup>4</sup> OCHA Yemen Humanitarian Response Plan 2022

children (1,952 boys; 2,148 girls) were not enrolled in schools and 526 children (280 boys; 246 girls) have dropped out of schools/education. The identified cases are being referred to the government implementing service providers (schools, birth registration offices etc.), to access complementary health, nutrition, education, WASH, and child protection services. Case managers are following up with service providers to ensure referred cases are provided with required services.

As part of the scaling up the Integrated Model of Social Economic Assistance (IMSEA) to include additional governorates, a training workshop for the case management field team was conducted in Aden. A total of 86 staff were trained on UNICEF supported technical and programmatic areas including case management, referral standard operating procedures, data collection, code of ethics, and project reporting mechanisms and tools.

UNICEF continued to provide support to the Handicap Care and Rehabilitation Fund (HCRF) in Sana'a to reach more children with disabilities as part of the cash plus approach support. In August, a total of 2,812 people (595 women, 966 men; 747 boys, 504 girls) were provided with case management support in 159 districts. Through case management, eligible cases are identified and registered. The needs of each individual are identified by a trained social worker from HCRF, who then refers individuals to the required services. Monitoring and follow up is undertaken to ensure each case receive their required services and challenges and/or barriers are addressed as they occur.

In August, UNICEF supported the Ministry of Social Affairs and Labour (MoSAL) in conducting the Social Protection Consultative Committee (SPCC)<sup>5</sup> monthly meeting in Aden and Sana'a. UNICEF presented the Social Protection Strategic Framework (SPSF) development plan, which was endorsed by the committee. A technical steering committee was assigned to support the implementation process. Social Welfare Fund (SWF) presented the joint capacity building and engagement plan that was developed by SWF and Social Fund for Development (SFD) with support from UNICEF (as part of the UCT transition efforts). This plan, which aims at preparing SWF to assume responsibility for the UCT project when conditions allow, also provides strategic opportunities to inform the development of the SPSF, leveraging some of the enhanced components of the project for wider social protection system enhancement. This includes, for example, the Management Information System (MIS) and the possibility of establishing interlinkages between various national databases, and establishment of a unique code for beneficiaries to enhance coverage, avoid duplication in targeting and reduce inclusion and exclusion errors.

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

In August, UNICEF continued social mobilization interventions to increase uptake of the integrated outreach response (IOR) conducted in the Sa'ada governorate and the governorates in the south. Trained community volunteers and members of Mother-to-Mother clubs scaled up vaccine demand generation activities (with a focus on COVID-19 vaccines). During the month, the integrated outreach response reached 277,017 people through house-to-house visits and group awareness sessions. Volunteers also promoted utilization of available health services, particularly those related to immunization, and provided information on the locations of service delivery points.

UNICEF also support COVID-19 vaccine demand generation interventions through mass media messages that were aired on 12 radio stations via broadcasted radio flashes, public service announcement, and dedicated discussion programmes on COVID-19 and COVID-19 vaccines, as well as essential lifesaving practices. An estimated 4 million people were reached.

In the Hodeida, Mahwit, Rayma, Sa'ada, Al Jawf and Hajjah governorates, religious leaders (Imams and Morshydats) were mobilized to scale up engagement in mosques and in community gatherings to sensitize people to the lifesaving practices with a focus on key hygiene and sanitation practices, reaching 987,392 people (739,417 men; 247,975 women).

UNICEF continued extensive interventions of COVID-19 Risk Communication and Community Engagement as well as COVID-19 vaccine demand generation, engaging 18,260 people through door-to-door visits and group awareness sessions in the Marib governorate.

In Sana'a, Dhamar, Al Baidya, Amran and Amanat Al Asimah governorates, 21,559 IDP families were engaged with messages on the key hygiene practices through integrated activities with WASH for the distribution of hygiene kits and

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<sup>5</sup> SPCC is a platform/forum that was established in 2018 with support from UNICEF to facilitate and coordinate social protection policy and programming and maintain strategic dialogue on SP. It is chaired by MoSAL and deputy-chaired by the Ministry of Planning and International Cooperation (MoPIC); different social and economic ministries, NGOs, the UN agencies, and the private sectors are members of the Committee.

chlorine tablets. The flood emergency response in Al Jawf was supported through washable masks and communication materials for distribution among the affected people.

UNICEF continued to provide support to MoPHP-managed hotlines by strengthening feedback systems and responding to 6,859 calls. These hotlines enable access to health professionals who respond to peoples' queries, concerns and medical consultations on COVID-19 and COVID-19 vaccines, as well as Polio and Measles vaccines.

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

The Community Perception Survey of Humanitarian Response in Yemen, led by UNICEF, was initiated as part of the implementation of the Community Engagement and Accountability to the Affected Population (CEAAP) workplan. The survey will assess community perceptions on the quality of humanitarian assistance they receive as well as determine information needs and gaps in the humanitarian response. UNICEF developed the questionnaire tool and shared it with working group members for their feedback. Field implementation will be conducted through the cluster partners starting from October 2022.

UNICEF's MIS platform for Complaints and Feedback Mechanism (CFM) is under development. The platform takes into considering information and data needs of each programme, to verify and take corrective actions and timely decision making. In August, UNICEF carried out capacity building sessions for the CFM call center, enabling appropriate responses to general queries and feedback related to health interventions. These capacity building sessions were focused on CFM concepts, health interventions and the MIS platform.

### **AWD/Cholera Response**

UNICEF continued communication and social mobilization interventions on the essential lifesaving practices including AWD/Cholera prevention practices. In August, religious leaders, community volunteers, and members of Mother-to-Mother clubs reached 1,268,668 people (848,838 men, 419,830 women) through multiple interpersonal communication activities including awareness sessions in mosques and schools, puppet theatres, house-to-house visits, and community gatherings.

In August, 685 AWD kits, periphery drug type arrived in Yemen as part of UNICEF's AWD/Cholera response. In total of 415 kits were prepositioned in 26 governorate health offices within 22 governorates nationwide and 270 kits were repositioned as contingency stock.

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

In August, heavy rainfall resulting in torrential floods continued to be the main driver for population displacement across Yemen. 94 per cent of the newly displaced population registered caseload was due to heavy rains and floods, with 6 per cent due to armed conflict. More than 15,017 households (105,119 people) were displaced across 21 governorates including the main flood-affected districts in Marib, Al Jawf, Hajjah, Amran, Hodeida and other governorates.

UNICEF, UNFPA and WFP through 12 cluster implementing partners, continued to reach displaced populations affected either by conflict or climate change with first-line response packages, reaching over 10,000 households across 151 districts in 21 governorates.

In August, 10,454 newly displaced households were reported including 73,178 people of which 61 per cent are children. UNICEF provided RRM kits in Marib, Al Jawf, Amran, Hodeida, Hadramout and Sana'a governorates. RRM kits include essential hygiene items and other supplies including food, family basic hygiene kits, and female dignity kits meeting the most critical and immediate needs of displaced families, as they are suddenly uprooted from their homes.

### **Supply and Logistics**

In August, UNICEF delivered supplies worth \$1,939,931.52 including school bag kits, tents, recreation kits, primary health kits, furniture, printed materials, WASH supplies and equipment.

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 aligned with the 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 Area of Responsibility (AoR). UNICEF is also an active member of the Health Cluster and collaborates with other UN agencies and INGOs to efficiently deliver basic lifesaving 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. 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. UNICEF continued its RCCE response with campaigns to address disinformation on the vaccine, as well as to continue digital engagement and rumor monitoring.

UNICEF leads the inter-agency protection against sexual exploitation and abuse (PSEA) network by hosting the network coordinator. The PSEA network, under 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.

## Human Interest Stories and External Media

Training Health Workers Improves Children Immunization Services:

Training health workers on immunization best practices, vaccines storage, and archiving data increases the quality of immunization services provided to children.

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



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## External Media

[Developing Facilitators' Skills to Provide Psychosocial Support to Conflict-Affected Children](#)



[Life Skills Training Revives Hope for Out-of-School Students](#)



[Evaluation Training Programmes for Better Educational Outcomes](#)





## Next SitRep: 15 December 2022

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## Annex A

### Summary of Programme Results<sup>6</sup>

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2022 target	Total results	Change since the last report	2022 target	Total results	Change since the last report
<b>Health</b>							
Number of children aged 0 to 11 months vaccinated against measles	21,900,000	972,142	492,596 <sup>7</sup>	44,325			
Number of children aged 6 to 59 months vaccinated against polio		1,250,000	1,193,223 <sup>8</sup>	0 <sup>9</sup>			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	1,815,681	187,984			
Number of health care facility staff and community health workers provided with personal protective equipment		15,000	15,156	876			
<b>Nutrition</b>							
Number of children aged 6 to 59 months with severe wasting admitted for treatment	8,100,000	484,639	164,207 <sup>10</sup>	7,629	N/A	164,207	7,629
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months		4,730,449	1,211,972 <sup>11</sup>	9,185	N/A	1,211,972 <sup>12</sup>	9,185 <sup>13</sup>
<b>Child Protection, GBVIE &amp; PSEA</b>							
Number of children and caregivers accessing mental health and psychosocial support	8,800,000	900,000	309,893 <sup>14</sup>	55,176	1,218,253	348,614	64,799
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,000,000	1,479,304 <sup>15</sup>	47,287			
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 <sup>16</sup>	0			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,010,000	471,546 <sup>17</sup>	48,505			
<b>Education</b>							

<sup>6</sup> These figures reflect the revised, 2022 HAC appeal

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

<sup>8</sup> Achievements are in line with 2022 revised HAC target

<sup>9</sup> Decrease due to data cleaning

<sup>10</sup> Achievements correspond to funds received against the HAC

<sup>11</sup> Ibid

<sup>12</sup> Ibid

<sup>13</sup> Ibid

<sup>14</sup> Achievements correspond to funds received against the HAC

<sup>15</sup> Implementation saw delays in the planning phase

<sup>16</sup> Late partner reporting

<sup>17</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	8,500,000	500,000	227,157	38,201	895,000	734,759	52,481
Number of children receiving individual learning materials		800,000	35,786 <sup>18</sup>	16,511 <sup>19</sup>	1,200,000	93,687	40,044
Number of teachers receiving teacher incentives each month		15,000	2,676 <sup>20</sup>	-	100,000	8,423	113

### Water, Sanitation & Hygiene

Number of people accessing a sufficient quantity of safe water for drinking and domestic needs	17,800,000	6,800,000	4,731,406	5,183 <sup>21</sup>	7,484,406 <sup>22</sup>	7,880,559 <sup>23</sup>	292,087
Number of people reached with critical WASH supplies		3,600,000 <sup>24</sup>	1,677,973 <sup>25</sup>	47,803	3,814,995 <sup>26</sup>	2,441,182	688,766 <sup>27</sup>
Number of people in humanitarian situations reached with messages on appropriate hygiene practices		3,600,000 <sup>28</sup>	3,145,409 <sup>29</sup>	277,208	4,750,511 <sup>30</sup>	4,030,544	379,573 <sup>31</sup>
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	1,650,885	11,796			

### Social Protection & Cash Transfer

Number of households reached with UNICEF funded multi-purpose humanitarian cash transfers		50,000	13,066 <sup>32</sup>	-			
Number of people benefiting from emergency and longer-term social and economic assistance		160,000	79,031 <sup>33</sup>	51,703			

### Cross-sectoral (HCT, C4D, RCCE and AAP)

Number of people participating in engagement actions for social and behavioural change		8,500,000	8,362,015	1,563,945			
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### Rapid Response Mechanism

Number of vulnerable displaced people who received Rapid Response Mechanism kits		588,000	345,156	73,178			
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<sup>18</sup> Back-to-Learning campaigns, including distribution of school materials are currently ongoing

<sup>19</sup> School year 2022-2023 has begun progress will be seen October 2022

<sup>20</sup> School year 2022-2023 has begun progress will be seen October 2022

<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 <sup>34</sup>	Funds available			Funding gap	
		Humanitarian resources received in 2022 <sup>**</sup>	Other resources used in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	124,000,000	13,291,791		6,613,944	104,094,265	84%
Nutrition	119,000,000	23,753,055		9,975,125	85,271,820	72%
Child Protection, GBViE & PSEA	37,000,000	5,537,382		6,628,261	24,834,357	67%
Education	55,450,000	7,509,690		22,322,748	25,617,562	46%
Water, Sanitation and Hygiene	99,600,000	19,246,108		14,632,258	65,721,634	66%
Social Protection	23,000,000	282,371		1,788,163	20,929,466	91%
C4D, Community Engagement & AAP	12,500,000	1,981,480		403,052	10,115,468	81%
Rapid Response Mechanism	5,950,000	1,568,744		1,337,962	3,043,294	51%
Cluster coordination	5,500,000	83,285		66,287	5,350,428	98%
Evaluation	2,400,000				2,400,000	100%
Being allocated		3,758,251			-3,758,251	
<b>Total</b>	<b>484,400,000</b>	<b>77,012,157</b>		<b>63,767,800</b>	<b>343,620,043</b>	<b>71%</b>

<sup>34</sup> As per July 2022 HAC revision