



Yemen

The conflict-driven humanitarian crisis in Yemen is the largest emergency globally, with more than 24.1 million people in need of humanitarian assistance.¹ Conflict has led to internal displacement of 3.6 million people, including 2 million children,² left millions of public sector workers without salaries for years³ and undermined humanitarian access to many vulnerable populations. An estimated 12 million Yemenis, including 7 million children, will depend on food assistance in 2019.⁴ The economic deterioration continues, with the rial losing nearly 50 per cent of its value since September 2018, and affected families struggling to purchase food. Escalation of violence in the port of Hudaydah has threatened the delivery of essential food and medicines throughout the country. Nearly 358,000⁵ children under 5 years suffer from severe acute malnutrition (SAM), and require treatment. Only 10 per cent of children under 6 months are exclusively breastfed and majority of children are deprived of a healthy diet.⁶ Only 15 per cent of children are eating the minimum acceptable diet for survival, growth and development.⁷ Rising food insecurity, with poor sanitation and lack of safe water has increased preventable diseases. Immunization coverage has stagnated at the national level with declines seen in many areas resulting in outbreaks of measles, diphtheria and other vaccine preventable disease. Access to primary healthcare for mothers, their newborns and children remains an issue. Since late 2016, over 1.3 million cases of suspected cholera have been reported, with over 311,000 cases reported in 2018.⁸ UNICEF and partners integrated cholera response has been effective, however, cholera remains endemic in Yemen, and resurgence remains a real risk in 2019. Children are the primary victims of the crisis. According to the Country Task Force on Monitoring and Reporting on grave child rights violations, more than 6,700 children have been verified as killed or maimed since the start of the conflict and more than 2,700 boys have been recruited into armed forces and groups⁹; however, the actual figures are likely to be higher. Children remain under extreme risk of death or injury from unexploded ordnances, landmines and explosive remnants of war. The damage and closure of schools and hospitals are threatening children's access to education and health services, rendering them vulnerable to serious protection concerns. At least 2 million children in Yemen are out of school.¹⁰

Humanitarian strategy

UNICEF's strategy in Yemen is informed by the 2019 Yemen Humanitarian Needs Overview (HNO), and the Humanitarian Response Plan (HRP), cluster strategies and programme priorities.¹¹ UNICEF's operations are decentralized with five field offices managing humanitarian response locally with partners. UNICEF is focusing on health system strengthening, improving access to primary healthcare by providing supplies and responding to communicable disease outbreaks, and community prevention and management of malnutrition. Water, sanitation and hygiene programme supports rehabilitation and sustainability of local water management systems to increase access to safe water. Acute watery diarrhea/cholera prevention and response is focusing on high-risk districts, including through provision of oral cholera vaccines.¹² Vulnerable children are supported through survivor assistance, education on mines/ explosive remnants of war and resilience building. UNICEF continues to rehabilitate damaged schools, establish temporary safe learning spaces and provide learning/pedagogical kits. School-based staff will receive incentives to ensure education for children. The Country Task Force on Monitoring and Reporting continues to engage with warring parties to prevent and halt grave child rights violations. The multi-sector Rapid Response Mechanism were assisting newly displaced families. UNICEF is incorporating gender and conflict sensitive planning, Protection from Sexual Exploitation and Abuse (PSEA) and accountability training for partners.

Results from 2019

As of 28 February 2019, UNICEF had US\$149.2 million available against the revised appeal of US\$536 million.¹³ This ensures access to primary healthcare services to children and women, including the provision of common childhood illnesses, antenatal care, delivery and UNICEF's response to the AWD/suspected cholera outbreak through an integrated health, nutrition, WASH and communication for development plan. Over 3.3 million people accessed safe drinking water and over 1 million people were engaged in awareness and behaviour change activities. Health facilities received supplies and operational support. Over 11 million children were vaccinated against measles and rubella, over 269,000 children under 5 received primary healthcare and more than 25,700 children with Severe Acute Malnutrition (SAM) received treatment. Child Protection services have so far reached over 85,000 children with psycho-social support and over 342,800 people were reached with mines/unexploded ordnance risk education. 80 per cent of reported incidents of grave violations against children were verified through Monitoring and Reporting Mechanism. 18,705 children accessed education services in safe learning spaces. Psycho-social support services in schools benefited more than 6,515 students. Activities for provision of incentives for teachers and school staff commenced in late February.

Humanitarian Action for Children

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Total people in need

24.1 million¹⁴ (11.8m women - 12.2m men)

Total children (<18) in need

12.3 million¹⁵ (6m girls - 6.3m boys)

Total people to be reached

13.6 million (6.9m women - 6.6m men)

Total children to be reached

8.9 million¹⁶ (4.4m girls - 4.5m boys)

2019 programme targets

Nutrition

- 321,750 children aged 6 to 59 months with SAM admitted to therapeutic care¹⁷
- 4,290,000 children under 5 years received micronutrient interventions (vitamin A)

Health

- 942,000 children vaccinated against measles
- 841,000 pregnant and lactating women receiving primary health care
- 5.3 million children vaccinated against polio

WASH

- 7 million people access safe water¹⁸
- 3.5 million people in AWD/cholera-affected areas provided with household water treatment and disinfection

Child Protection

- 1.4 million children and community members reached with life-saving landmines and explosive remnants of war risk education messages
- 794,000 children and caregivers benefiting from resilience building activities
- 500 UNICEF staff and partners trained on Protection from Sexual Exploitation and Abuse

Education

- 135,000 school staff receiving incentives
- 817,000 children with continued access to quality education

Social Policy

- 175,000 vulnerable people benefiting from emergency and longer-term social and economic assistance (through case management)

Communication for development

- 6 million people reached through integrated communication for development interventions in outbreak response/campaigns
- 5,000 community mobilizers/volunteers trained and deployed to engage communities in social and behaviour change practices

RRM

- 2 million vulnerable displaced people receiving RRM kits
- 350,000 vulnerable people supported with multipurpose cash transfers

	Sector Revised 2019 targets	Sector total results (Per February 2019)	UNICEF Revised 2019 targets ⁱ	UNICEF total results (Per February 2019)
NUTRITION				
Children from 0 to 59 months with Severe Acute Malnutrition (SAM) admitted to therapeutic care for specified period of time ⁱⁱ	321,750	25,730	321,750	25,730
Caregivers of children from 0 to 23 months with access to Infant and Young Child Feeding (IYCF) counselling for appropriate feeding	1,682,336	135,092	1,514,102	135,092
Children under 5 given micro-nutrients (MNPs)	2,860,031	84,343	2,860,031	84,343
Number of children under 5 given micro-nutrient interventions (Vit A)	4,290,047	10,438	4,290,047	10,438
HEALTH				
Children under 1 vaccinated against measles (MCV1) ⁱⁱⁱ			942,842	35,986
Children from 6 months – 15 years vaccinated in MR campaigns ^{iv}			13,032,803	11,837,521
Children under 5 vaccinated against polio ^v			5,352,000	-
Children under 5 receiving primary health care			1,575,000	269,388
Pregnant or lactating women receiving primary health care			841,097	95,918
WATER, SANITATION AND HYGIENE				
Number of people having access to drinking water through support to O&M and rehabilitation of public water systems ^{vi}	7,288,599	3,671,012	6,000,000	3,312,934
Number of people gaining access to emergency safe water supply ^{vii}	1,703,359	189,280	1,000,000	52,755
Number of people having access to adequate sanitation (through emergency latrine construction or rehabilitation)	1,223,908	15,016	800,000	500
Number of people provided with standard hygiene kits	2,322,981 (BHK) 5,332,045 (CHK)	64,174 (basic) 2,425,670 (consumable)	800,000 (BHK) 4,000,000 (CHK)	20,083 (basic) 2,360,306 (consumable)
Number of people in cholera high risk areas benefiting from household level water treatment and disinfection ^{viii}	4,202,324	2,069,118	3,500,000	2,009,938
CHILD PROTECTION				
Percentage of incidents verified and documented from all the reported incidents	90%	80%	90%	80%
Number of children and caregivers in conflict-affected areas receiving psycho-social support	882,268	91,337	794,825	85,228
Number of children and community members reached with life-saving landmines and explosive remnants of war risk education messages	1,684,106	193,501	1,365,128	342,818
Number of children reached with critical child protection services (case management focused on: family tracing and reunification, reintegration, GBV response, and victims' assistance)	12,932	2,258	10,345	2,067
UNICEF staff and implementing partners trained on Protection from Sexual Exploitation & Abuse (PSEA) ^{ix}			500	454 (172 female, 282 male)
EDUCATION				
Number of children provided with access to education via improved school environment (temporary learning spaces, school rehabilitation, equipment and classroom furniture) and alternative learning opportunities.	891,352	99,093	816,566	18,705
Number of affected children receiving psychosocial support services and peace building education in schools	1,794,689	84,376	170,000	6,515
Number of affected children supported with basic learning supplies, including school bag kits	1,500,000	2,191	996,994	-
Number of teachers/staff in schools (in a total of 10,331 schools) will receive incentives	141,746	-	135,359	-
SOCIAL POLICY				
Number of targeted marginalized/excluded benefiting from emergency and longer-term social and economic assistance (through case management)			175,000	31,873
COMMUNICATION FOR DEVELOPMENT				
Number of million people reached through integrated communication for development interventions in outbreak response/campaigns			6,000,000	1,049,506

Number of community mobilizers/volunteers trained and deployed to engage communities in social and behaviour change practices			5,000	1,770
RAPID RESPONSE MECHANISM				
Number of vulnerable displaced people receiving RRM kits within 72 hours of trigger for response			2,000,000	131,327
Number of vulnerable people supported with multipurpose cash transfer			350,000	5,530

Results are through 28 February 2019, unless otherwise noted.

ⁱ Along with other resources - emergency funding, other resources-regular funding (in line with donor agreements) will contribute to the achievement of results.

ⁱⁱ UNICEF and cluster targets are the same and have been increased to cover 90 per cent of the estimated SAM caseload for 2019.

ⁱⁱⁱ Targets increased slightly to accommodate the additional eligible number of children as a result of the population growth rate.

^{iv} Targets and results are for the measles and rubella nationwide campaign held in January 2019, with available resources from 2018, therefore, related costs and coverage is not included in the overall appeal requirements for 2019

^v The target has slightly increased to accommodate the additional eligible number of children as a result of the population growth rate.

^{vi} This indicator reflects interventions at community level both in urban and rural areas through system rehabilitation/functionalization including rehabilitation works, operation and maintenance, energy/fuel support.

^{vii} This indicator reflects provision of water supply interventions in emergency settings including in settlements, schools and spontaneous locations/sites accommodating displaced populations, mostly through water trucking/ installation of water tanks.

^{viii} This indicator reflects household level water treatment interventions in cholera high risk areas including provision of water disinfectants to ensure water is safe. Implementation modality includes distribution of aqua tabs and activities undertaken by Rapid Response teams and/or NGO partners.

^{ix} Interventions also include: i) PSEA internal complaint mechanism is in place. ii) Action Plan of UN PSEA Network updated and Community Based Case Management (CBCM) initiated.

Funding requirements

In line with the 2019 Yemen Humanitarian Response Plan published in February 2019, UNICEF has revised its appeal requirements and is requesting US\$ 535.6 million. This funding is critical to meet the humanitarian needs of vulnerable Yemeni children and their families. UNICEF is requesting funds, especially flexible resources, to meet the critical immediate and longer term needs of children and their families in Yemen.

Appeal Sector	Original 2019 HAC Requirement (US\$)	Revised 2019 HAC Requirement (US\$)	Funds Available (US\$)	Funding Gap	
				US\$	%
Nutrition	120,000,000	124,678,000	26,306,959	98,371,041	79%
Health	107,264,969	85,788,673 ¹⁹	24,062,566	61,726,107	72%
Water, sanitation and hygiene	135,000,000	135,000,000	37,139,831	97,860,169	72%
Child protection	36,980,373	38,348,211 ²⁰	13,631,581	24,716,630	64%
Education	106,000,000	106,000,000 ²¹	31,471,073	74,528,927	70%
Social policy	9,714,170	14,009,396	1,198,588	12,810,808	91%
Communication for development	10,857,795	10,857,795	5,837,250	5,020,545	46%
Rapid Response Mechanism	16,500,000	21,000,000	9,552,153	11,447,847	55%
Total	542,317,307	535,682,075	149,200,002	386,482,073	72%

¹ Office for the Coordination of Humanitarian Affairs, 'Yemen: 2019 Humanitarian Needs Overview', December 2018.

² IOM Displacement Tracking Matrix (DTM) Yemen — Displacement Report Round 37 (March 2019)

³ Office for the Coordination of Humanitarian Affairs, 'Yemen: 2019 Humanitarian Needs Overview', December 2018.

⁴ World Food Programme, 'WFP Welcomes New Funding Pledge for Humanitarian Needs in Yemen from United Arab Emirates and Kingdom of Saudi Arabia', WFP, 20 November 2018

⁵ Office for the Coordination of Humanitarian Affairs, 'Yemen: 2019 Humanitarian Response Plan', February 2019

⁶ UNICEF Yemen, Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys, conducted between 2016 and 2018 in 17 governorates; and 2013 demographic and health survey data for five governorates.

⁷ Ibid.

⁸ Office for the Coordination of Humanitarian Affairs, 'Yemen: 2019 Humanitarian Needs Overview', December 2018.

⁹ Information verified by the United Nations in Yemen (2019).

¹⁰ UNICEF Yemen, 'If not in school Report', March 2018

¹¹ Each Cluster identifies priority districts as per programme needs assessment and severity scores from the humanitarian needs overview (i.e. cholera districts with a large number of cases or considered at risk use SMART survey results and programme data for priority nutrition interventions).

¹² The health and WASH Clusters have identified 100 priority districts for cholera, and UNICEF's integrated cholera response focuses on these priority districts.

¹³ Available funds include US\$14.8 million received against the current appeal and US\$134.4 carried forward from the previous year.

¹⁴ Office for the Coordination of Humanitarian Affairs, 'Yemen: 2019 Humanitarian Needs Overview', December 2018.

¹⁵ Ibid.

¹⁶ This includes 5.3 million children under 5 years to be reached with polio vaccination and 8.1 million people over 5 years (85 per cent of the population, source: HNO 2019) to be reached with either safe water supply or household water disinfection.

¹⁷ In 2019, there interventions have been expanded to include additional mobile clinics, outpatient therapeutic programmes in remote areas, and an expansion of community health volunteer networks. The operational costs are, therefore, higher.

¹⁸ This programme target includes 6 million people accessing drinking water through support to O&M and rehabilitation of public water systems and 1 million people gaining accessing emergency safe water supply.

¹⁹ Funding requirement for health response has reduced as significant portion of supplies, mainly for cholera response and maternal and newborn care interventions have been procured in 2018.

²⁰ Funding request includes US\$560,000 for the prevention of sexual abuse and exploitation (PSEA) interventions. In line with the PSEA Monitoring Framework, UNICEF developed the 2019 Yemen Country Office PSEA Action Plan with three main components around staff and implementing partner training, putting in place a complaint mechanism and community engagement for complaint system and case management.

²¹ Funding requirement for education response has increased due to payment of incentives to teachers and school staff.

Who to contact for further information:

Sara Beysolow Nyanti Representative - Yemen
Tel: +967 71222 3363
Email: snyanti@unicef.org

Grant Leaity Deputy Director, Office of Emergency Programmes (EMOPS)
Tel: +1 212 326 7150
Email: gleadity@unicef.org

Carla Haddad Mardini Director, Public Partnership Division (PPD)
Tel: +1 212 326 7160
Email: chaddadmardini@unicef.org