



Yemen Country Office Humanitarian Situation Report

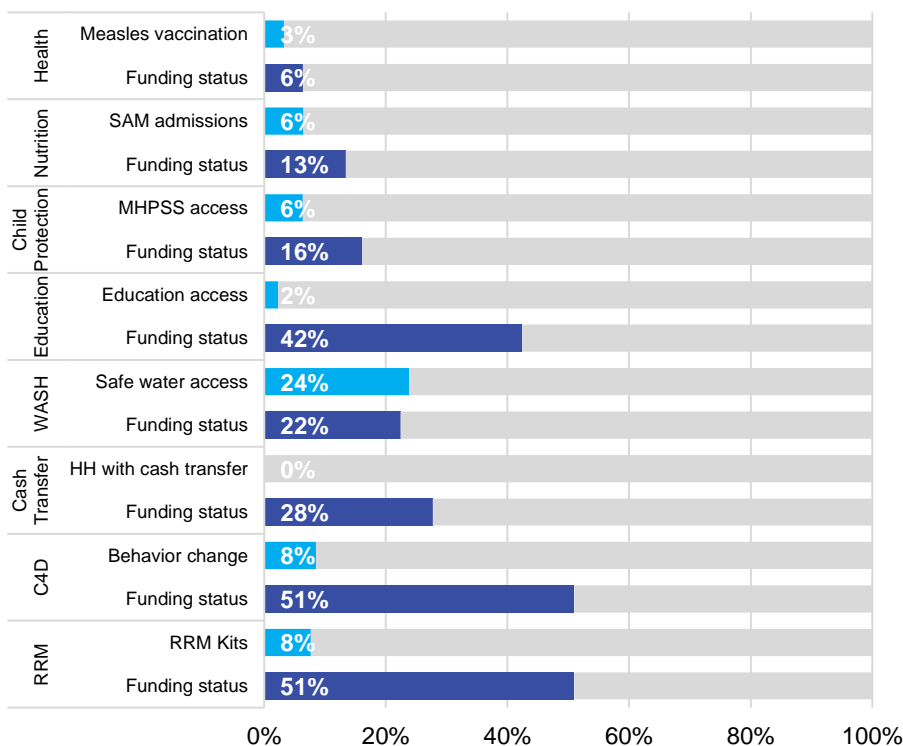


Reporting Period: 1 – 28 February 2021

Highlights

- February witnessed a spike in the intensity of conflict on the Marib front despite ongoing peace talks and cessation of hostilities amongst conflicted parties in the country. Thousands fled conflict-affected parts of north-western Al Jawf, and southwestern and north-eastern Marib. The deteriorating security situation in these areas is leading to mass displacement and exacerbating already widespread needs.
- A total of 190,858 children over one year old were vaccinated against cholera (94 per cent coverage); among them, 188,850 received the second dose and 2,008 were reached with the first dose of the Oral Cholera Vaccine (OCV).
- The Risk Communication and Community Engagement (RCCE) assessment on COVID-19 was conducted in three districts in Aden to assess knowledge and risk perception of the project beneficiaries, as well as to identify information needs and effective communication channels for engaging them. These findings will guide the COVID RCCE for shielding messaging and interventions in the targeted districts.

UNICEF's Response and Funding Status¹



Situation in Numbers

(OCHA, 2021 Humanitarian Needs Overview)



11.3 million
children in need of
humanitarian assistance

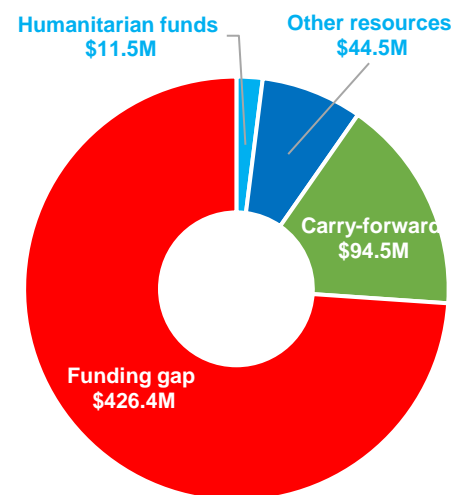


20.7 million
people in need



1.58 million
children internally displaced
(IDPs)

UNICEF Appeal 2021 \$576.9 M



¹ Please refer to the narrative for details. Note that 'Funding status' refers to the whole sector, while the results only refer to one specific activity

Funding Overview and Partnerships

In 2021, the Yemen Humanitarian Action for Children (HAC), which is currently aligned to the 2020 Yemen Humanitarian Response Plan (YHRP), appeals for \$577 million. The COVID-19 response is integrated into the programmes planned within the HAC. It is expected that the HAC will be revised with the release of the YHRP 2021 in the coming months. A total of \$94 million was carried forward from 2020, and while UNICEF is actively fundraising for its 2021 HAC appeal, \$11 million has been received as of 28 February for a total of \$122 million funds available. These generous contributions were received from the Canadian Committee for UNICEF, the Government of Slovenia, European Civil Protection and Humanitarian Aid Operations (ECHO), and the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA).

Situation Overview & Humanitarian Needs¹

Nearly six years into the conflict, Yemen remains the worst humanitarian crisis in the world, with 20.7 million people – 71 per cent of the total population – in need of humanitarian assistance. The conflict has left three million people, including 1.58 million children, internally displaced. 138,000 additional people have become migrants and 137,000 people are seeking asylum abroad.

Severe acute malnutrition (SAM) continues to plague children under five, with more than 395,195 children suffering from SAM in Yemen and 2.25 million children facing acute malnutrition according to the Integrated Food Security Phase Classification (IPC). Nutritional needs continued to rise throughout February, and the lack of funding for emergency WASH interventions threatened to undermine an integrated response. More than 15.4 million people urgently needed assistance to access WASH services. This shortfall heightened the risk of COVID-19 and waterborne diseases including cholera and malnutrition. Approximately 20.1 million people need health assistance. Women and children were disproportionately affected, with 4.8 million women and 10.2 million children needing assistance to access health services during the reporting period.

As of 3 March 2021, a total number of 2,367 COVID-19 officially confirmed cases (32 per cent female) with 644 associated deaths and 1,437 recovered cases were reported in Yemen. The 26.9 per cent case fatality rate (CFR)² means more than a quarter of Yemenis confirmed to have the disease have died. This high mortality rate is attributed to the non-reporting/underreporting of cases, especially in the north, where only four official registered cases have been reported to date. Serious concerns remain over a possible ongoing "silent" transmission. The government of Yemen has applied to the COVAX facility to cover the initial needs of 23% of the population of Yemen, approximately 14 million doses. The GAVI alliance confirmed the first allocation of 1.9 million doses, and UNICEF anticipates that they should be available by the end of March, depending on the suppliers' availability of vaccines.

The COVID-19 pandemic has put additional pressure on the already fragile health system in which more than half of health facilities are not functioning, with global shortages of COVID-19 supplies (e.g. personal protective equipment (PPE), ventilators) and breaks in the supply chain further exacerbating the healthcare infrastructure. Approximately 8.1 million school-age girls and boys need support to access education in emergencies (EiE) across Yemen, including 1.65 million children who are internally displaced persons (IDPs). More than 2.2 million children in Yemen are out-of-school. While schools reopened after many months of closure due to COVID-19, an additional 3.6 million (for a total of 5.8 million children) children have had their education disrupted. School closures and the worsening economic situation due to COVID-19 restrictions in 2020 increased the vulnerability of children and women to exploitation, violence, abuse, child labour, domestic and gender-based violence and child marriage.

Immunization coverage remains stagnated at the national level, with 37 per cent of children-under-the-age-of-one-year-old missing routine vaccinations and the figure is expected to increase in 2021. Given that the country has been experiencing regular outbreaks of measles, diphtheria, and other preventable diseases, including the vaccine-derived poliovirus in 2020, concerns continue to remain in 2021. UNICEF is closely coordinating with the Ministry of Public Health and Population (MoPHP) to ensure implementation of at least 2 integrated outreach rounds (IOR) before June 2021 and 2-3 rounds of IOR in the second half of 2021. Meanwhile, discussions are ongoing with MoPHP to have measles and diphtheria outbreak response activities, based on the availability of funds.

¹ The figures on people in need come from the 2021 Humanitarian Needs Overview (HNO). The 2021 UNICEF Yemen HAC will be revised in March to align to the new Yemen Humanitarian Response Plan and HNO.

² [WHO Yemen COVID-19 Epidemiological Update](#)

In February 2021, the UN Country Task Force on Monitoring and Reporting (UNCTFMR) documented 17 incidents of grave violations against children, of which 94 per cent were verified. Most verified violations pertained to child casualties, including four children killed (50 per cent girls), and 19 children maimed (32 per cent girls), by various parties to the conflict. There were no verified cases of recruitment or use of children, abduction, rape, or attacks on schools or hospitals. Most of the incidents documented and verified were in the provinces of Al Dhale'e, Marib, Al Bayda, Al Hodeidah, and Lahj. These are only figures that the UN has been able to verify to date; the actual number of incidents may be higher.

Summary Analysis of Programme Response

AWD/Cholera Response

Between 1 January – 6 of March 2021, 5,676 AWD/cholera suspected cases and two associated deaths were reported, with a 0.04 per cent CFR. This is a significant decrease compared with the same period of 2020 (32,205 suspected cases and 33 associated deaths with 0.1 per cent CFR). The available data shows that the cholera trends are still stable, no cases were reported during the last month, however, UNICEF is closely monitoring cholera suspected cases and associated deaths.

UNICEF supported 222 (out of 320) Oral Rehydration Centres (ORCs), and 35 (out of 177) Diarrheal Treatment Centres (DTCs) in 68 districts in 11 governorates. In these centres, UNICEF continued to support case management of the persisting cases. UNICEF also delivered around 479 AWD drug periphery kits directly to 113 DTCs and ORCs.

Implementing partners continued to support communication and social mobilization interventions for AWD/Cholera prevention in February. Community volunteers and members of mother-to-mother clubs reached 309,124 people with messages and interventions on AWD/cholera and key essential family practices through 39,238 house-to-house visits and mother-to-mother sessions, 150 mosque events, 30 puppet shows, 120 community meetings/events, as well as 300 sessions in schools and 135 in health facilities.

Health and Nutrition

The second round of the oral cholera vaccination (OCV) campaign was implemented from 7 – 19 February in Al Dhale and Al Zariq districts in Al Dhale, and Haj district in Al Mukalla. A total of 202,705 children over one year (>1yrs) were targeted, with 190,858 vaccinated against cholera (94 per cent of the target population). A total 188,850 of the target population received two doses while the rest (2,008 individuals) received the first dose of OCV. The individuals who were missed during the first round received only one dose of OCV during the second round.

During the reporting period, a total of five walk-in cold rooms were installed in five governorates in the north, and 105 solar direct drive (SDD) vaccine refrigerators were installed in the south. In total, 202 SDD fridges have been newly installed in 2021. UNICEF will continue supporting the installation of remaining SDD fridges.



UNICEF also continued to support the continuity of services amidst the COVID-19 pandemic. Early in the outbreak, due to lack of knowledge and fear, many health facilities (HF) reported low attendance, including from service providers. UNICEF supported: PPE for protection of service providers as well as patients, orientation of service providers on Infection Prevention and Control (IPC) including COVID prevention of transmission to and from service/patients, as well as the establishment of triage within some key health facilities to prevent cross infection at HF. Additionally, supported with provision of MNCH medicines and supplies. In particular, 64 triage areas continued to be supported by UNICEF through procuring and providing PPE, supporting orientations, and establishing triage zones. This support covered four areas in Amanat Al Asimah, Dhamar, Amran, and Marib. However, due to lack of funding, activities were suspended from December thru the end of the reporting period. 60 triage areas were established and supported in Aden, Abyan, Lahaj, Al Dhale, Taiz, Shabwah, Al-Mukalla, Sayu'n, Al-Maharah, and Socotra. Personal protective equipment (PPE) was provided to health care providers for the continuity of safe routine service delivery throughout the reporting period.

UNICEF and partners continued to support the scale-up of the integrated community management of acute malnutrition (CMAM) programme in 209 districts that were identified in the last IPC Acute Malnutrition analysis. Since the beginning of the year, and out of a 68 per cent nationwide average reporting rate, a total of 272,122 children-under-5-years were screened for malnutrition through all interventions, out of which 18,638 children with SAM were admitted for treatment. For prevention against malnutrition, 37,153 children received deworming tablets while 49,843 children received micronutrient sprinkles. 5,133 children were also reached with Vitamin A supplements. In addition, 64,784 mothers received iron folate supplementation and 117,894 mothers received infant and young child feeding practices (IYCF) consultations. In Abyan and Shabwah governorates, beneficiaries participated in activities for the nutrition response and received mid-upper arm circumference screenings.



A total of \$443 million is required for the Nutrition Cluster to implement curative and preventive nutrition interventions in Yemen in 2021. Of this, 49 per cent of the total funding is needed for treatment of severe (320,134) and moderate (998,395) targeted cases of acute malnutrition among children-under-5-years and 720,877 targeted cases of moderately malnourished pregnant and lactating women.

Water, Sanitation and Hygiene

UNICEF, with its implementing partners, supported the emergency WASH response to IDPs in Marib. UNICEF responded to the first 24 households that fled to Al Juba with 24 Basic Hygiene Kits (BHKs) and four water tanks (2,000 litres capacity). The needs assessment conducted for the 96 new IDPs in Al-Durayhimi in the Al Hodeidah governorate revealed that WASH response needed to be scaled up. UNICEF through the General Authority for Rural Water Supply Projects (GARWAP) has been distributing basic hygiene kits for the registered IDPs among these locations. The response for emergency latrines will be commenced once the ongoing contract with the selected LTA is completed. The IDP's indicated no gap for water as they are getting water from the existing water sources around the area. UNICEF connected 15 IDP informal settlements to the public water supply in Ma'rib city and Al Wadi, benefiting 11,047 displaced families (66,282 people). A total of 812 cubic meters of disinfected water were pumped to IDPs sites during the reporting period, which allowed the distribution of 17.5 litres per capita per day.



A total of 1,405,657 people, of which approximately 716,886 are children, received water from the UNICEF-supported emergency fuel stock in respective local water sanitation corporations in Sana'a city, and Dhamar and Amran Governorates while awaiting the arrival of UNICEF-supported regular fuel distribution.

UNICEF supported the provision of safe water supply to different IDP locations through water trucking and water quality testing. A total of 1,800 IDPs in the Dhamar governorate, 6,164 IDPs in the Amran governorate, 20,279 IDPs in the Al Jawf governorate, and 127,897 IDP in the Al Hodeidah governorate benefitted from this support.

UNICEF, in partnership with Taybah Foundation for Development (TFD), a national non-governmental organization, provided safe drinking water through water trucking for an additional 35,500 IDPs in Hees and Al Khokha in Al Hodeidah governorate and 2,100 people in Aden and Lahj governorates. UNICEF continued supporting water chlorination and monitoring of water quality at all water points in IDP settlements.

UNICEF supported different sustainable water supply interventions to reduce reliance on water trucking for the IDPs through the extension of water distribution systems from the existing water supply systems as well as the installation of solar systems to operate the system. 15 IDP informal settlements in Marib were with connected to public water supply in Marib city and Al Wadi, benefiting 11,047 displaced families (66,282 people). The interventions contributed

to overcoming the over-burden on Marib city IDPs sites. In partnership with TFD, UNICEF supported piped water connection from the existing water network systems to IDP settlements in the centre of Hays (Alsuwq, Al-Hadrmi, Almahal and Al-Thuluth) which benefited 9,940 IDPs and the host community. Similarly, 10,850 IDPs in Almogails (Hariah and Bani Bahr villages) were provided with sustainable access to safe water through the installation and connection to two 2,000 litre tanks. 48 water points in Hodeidah (Al Khokha and Hees districts) and four in Aden and Lahj were installed, serving a total of 32, 212 IDPs and host community were disinfected and cleaned.

In addition, UNICEF supported the collection and disposal of 584 cubic metres of waste from IDP camps, construction of 66 temporary emergency latrines and rehabilitation of 50 latrines in Aden and Lahj governorate which benefited an estimated 1,500 IDPs. The construction of 150 latrines in Al-Hazm and Al-Ghayl districts in Al-Jawf governorate provided access to adequate sanitation to 1,414 beneficiaries. In partnership with the Benevolence Coalition for Humanitarian Relief (BCHR), UNICEF supported the installation of two 4000-litre tanks for 780 individuals in Hadramout and distributed 3,788 consumable hygiene kits for 26,516 IDPs settled within the host communities in Shabwah, Al Mahra and Hadramout.

UNICEF continued to provide a COVID-19 centred response in partnership with TFD. This included the distribution of Basic Hygiene Kits (BHKs), Consumable Hygiene Kits (CHKs) and jerry cans to IDPs, affected communities and vulnerable groups on the west coast of the country (Al Hodeidah, Aden, Hadramout, Al Mahara'a and Shabwa'a governorates). A total of 2,328 CHKs were distributed in the Al Hodeidah and Aden governorates. The Rapid Response Mechanism (RRM) completed the distribution of 316 BHKs to 2,212 new IDPs in the Al-Jawf governorate.

The prevalence of AWD/cholera remained stable in the south, with a weekly average of 355 cases throughout the month. UNICEF and the Emergency Unit (EU) of the Ministry of Water and Environment (MoWE) agreed on three strategies that would support the containment of the spread of AWD/cholera in the south. The first strategy is to establish a Cholera Lead Agency in each governorate to focus on coordinating the response and actions of partners, including carrying out detailed assessments. In the second strategy, UNICEF and the Emergency Unit will prioritize comprehensive risk assessment in three districts with the highest cases in March, identify risk factors and provide a more targeted response to the villages and communities. Finally, the third strategy includes the Emergency Unit to provide an analysis and presentation of trends of cholera prevalence at a sub-district level from the data collected from the Emergency Unit/Rapid Response Teams (RRTs) in the south since November 2019.

Child Protection

In February, 120,935 conflict-affected people, including 109,664 children (46 per cent girls) and 11,271 adults (41 per cent female) were reached through mine risk education (MRE) activities in districts Abyan, Al Hodeidah, Marib, and Shabwah. MRE was delivered in schools and child-friendly spaces, as well as through community campaigns while adhering to COVID-19 preventative measures.

Through a network of fixed and mobile child-friendly spaces dedicated to helping children overcome the immediate and long-term consequences of their exposure to violence, UNICEF provided psychosocial support (PSS) services to 36,803 people, including 30,802 children (51 per cent girls) and 6,001 adults (77 per cent female), across nine governorates. Through the case management programme, UNICEF continued to support the referral and provision of critical services to children, including facilitating access to life-saving health services for the most vulnerable children. 651 children (32 per cent girls) were identified by trained case managers, and 492 of them (32 per cent girls) received more than one service.

The Child Protection Area of Responsibility (CP AoR) targets one million children to be reached with critical child protection services, and mental health and psychosocial support in the 2021 Humanitarian Response Plan. The total amount requested by the CP AoR is USD \$30.7 million to continue these interventions. The CP AoR will continue to link with other key sectors, including education, nutrition, and health, among others, to ensure that the response to children's needs will be integrated into other sectors' responses.

Education

UNICEF continued its multi-pronged strategy to ensure the continuity of learning for all children in Yemen. Following high-level meetings in Aden and Sana'a between UNICEF and the Ministry of Education (MoE) to agree on the work plan for 2021-2022, UNICEF accelerated its work for programme implementation for 2021 during the reporting period. Construction works were completed in 42 schools across Yemen, benefiting 13,671 children (54 per cent girls).

In Taiz, six classrooms were built, and 20 classrooms were renovated in 13 schools. Major rehabilitation was done in six schools and WASH in-school rehabilitation in 23 schools in Lahj, Al Hodeidah, Hajjah, Al Jawf and Sa'ada governorates. More than 5,000 school desks were distributed in different governorates, benefiting more than 15,000 children in districts Aden, Al Hodeidah, Hajjah, and Amran. PPE kits were distributed to 78 schools in Taiz, benefitting 65,959 children. Challenges regarding delays of monthly payments for teachers are still present.

The Education HRP 2021 was finalized. The cluster partners will target 5.5 million school-aged children in acute needs, including 1.6 million IDPs and 825,000 children with disabilities. To ensure the participation of all partners, the cluster managed three consultation meetings with the UN and NGO strategic partners and the MoE in both Aden and Sana'a.

Social Protection and Inclusion

During the reporting period, UNICEF supported the drafting and publishing of the 54th and 55th editions of the Yemen Socio-Economic Update (YSEU) titled "The Sustainable Development Goals". These updates focused on the progress of SDGs in Yemen. Issue 54 provided analysis and review of indicators related to economic and environmental dimensions while issue 55 provided that of social dimensions.

In the same period, the third cycle of the Cash Plus Initiative continued in Ma'ain, Amanat Al Asimah, Bani Hushaysh, and Jihanah in the Sana'a governorate. A total of 41,683 families (of which there were 10,270 boys and 9,454 girls) were referred to various services. The goal of this initiative is to maximize the benefits of the Emergency Cash Transfer Cash project and support families to have access to social services in health, nutrition, WASH and birth registration.

Communication for Development

Risk Communication and Community Engagement (RCCE) interventions supporting the integrated shielding initiative funded by OCHA and ECHO continued in Aden. These interventions ensured that populations and high-risk households had the knowledge and skills to adopt COVID-19 prevention behaviours to reduce human to human transmission and protect the highest risk individuals from infection.

Trained volunteers were mobilized to facilitate community engagement in the targeted districts, reaching 15,524 people through 2,500 house-to-house visits. The beneficiaries were sensitized on the principles of shielding as well as disinfection and household-level infection prevention and control. They were also provided with information on COVID-19 prevention and services, including procedures for seeking care when someone has symptoms of the disease. Culturally appropriate communication materials on COVID-19 were disseminated to strengthen interpersonal communication throughout the reporting period.

An assessment was conducted in February on COVID-19 knowledge and practices to inform the intervention on shielding being implemented in three districts in Aden. The assessment was to measure COVID-19 knowledge and risk perception of beneficiaries and to identify their information needs as well as effective communication channels for engaging them. The findings will be available by the end of March and will guide COVID-19 RCCE messaging for the shielding interventions in the targeted districts, aimed at empowering communities to shield the most vulnerable members against infection from COVID-19.

The second round of the OCV campaign conducted in three districts in Al Dhale'e and Al Mukalla governorates was supported with communication and social mobilization interventions. These activities included mobilization of community volunteers, religious leaders, and members of five mother-to-mother clubs to promote the vaccination campaign in the targeted districts. The campaign was also promoted with six vehicles mounted with megaphones as well as the airing of mass media messages through three local radio stations. Approximately 210,000 people were reached through these communication and social mobilization activities.

Rapid Response Mechanism

February witnessed a spike in the intensity of conflict on the Marib front. Thousands fled conflict-affected parts of north-western Al Jawf and southwestern and north-eastern Marib. The deteriorating security in these areas led to mass displacement and exacerbated the already widespread needs. Humanitarian access to some of the most vulnerable communities near conflict points remained a challenge. In February, according to the Rapid Response Mechanism (RRM) IDPs tracker, around 22,400 people were displaced. Most of the displacement was recorded in Marib, Al Hodeidah and Al-Jawf, where people fled to safer districts within the governorate. UNICEF, along with UNFPA and WFP, continued to

reach displaced populations at the frontlines with first-line response packages. The Rapid RRM reached an additional 3,045 newly displaced families. 2,000 families in Ma'rib (21,315 individuals) in February received RRM kits that included essential hygiene items and other supplies including food, family basic hygiene kits, and female dignity kits. RRM kits meet the most critical and immediate needs of displaced families, as they are uprooted suddenly from their homes.

Supply and Logistics

The movement of supplies from northern to southern Yemen remained a challenge in February, as supplies distributed from UNICEF warehouses are regularly subjected to exceptional approvals of the Supreme Council for the Management and Coordination of Humanitarian Affairs (SCMCHA). Offshore and cross-border movement of supplies continued to require double customs clearance for crossing between south and north, causing notable delays in the delivery of supplies.

The Yemen Standardization, Metrology and Quality Control Organization (YSMO) at the Hodeidah port prohibited the import of supplies with less than 50 per cent of their remaining shelf life. YSMO also required health certificates, a scientific justification, and stability studies for all therapeutic supplies' shelf life endorsed by the country of origin, which delayed offloading vessels. YSMO additionally added a requirement that all nutritional supplies to Yemen must be shipped using refrigerated containers. This will result in higher operating costs and delays in shipping nutrition supplies from Salalah to Al Hodeidah until a more effective shipping method can be determined. UNICEF escalated the issue to the Ministry of Public Health (MoPH) to discuss this option further.

Humanitarian Leadership, Coordination and Strategy

The humanitarian strategy remained the same as in the [situation report for January 2020](#). The UNICEF COVID-19 preparedness and response plan also remained the same as described in the [situation report for April 2020](#). The Humanitarian Response Plan and Humanitarian Needs Overview for 2021 are being finalized, and UNICEF's strategy will be updated as needed to align with both.

Human Interest Stories and External Media

Field Update: Training, supplies, and better WASH facilities: recipe for an improved learning experience



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UNICEF works on training teachers and school personnel on new teaching methods and rehabilitating water and sanitation facilities in schools around the country for a better learning environment.

To read more about these interventions, click [here](#).

External Media

School Desks in Al Dhale



Closure of the 9th Payment Cycle



Outreach activities supported by the Emergency Health and Nutrition Project



Next SitRep: 30 April 2021

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UNICEF HAC 2021: www.unicef.org/appeals/yemen.html

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Annex A

Summary of Programme Results³

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2021 target	Total results	Change since last report	2021 target	Total results	Change since last report
Health							
Number of children aged 0 to 12 months vaccinated against measles	17,900,000	972,142	31,354	31,354 ▲			
Number of children under 5 vaccinated against polio		5,535,816	- ⁴	-			
Number of children under 5 receiving primary health care in UNICEF-supported facilities		2,500,000	186,786	186,786 ▲			
Health care facility staff and community health workers provided with personal protective equipment		25,000	10,062	10,062 ▲			
Nutrition							
Number of targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care	325,000	289,402	18,638	18,638 ▲	320,108	18,638	18,638 ▲
Number of children under 5 given micronutrient interventions (Vitamin A)	4,766,718	1,800,000	5,133	5,133 ▲	4,633,443	5,133	5,133 ▲
Child Protection, GBVIE & PESA							
Number of children and caregivers accessing mental health and psychosocial support	Not Yet Available	900,000	57,203	36,803 ▲	990,000	60,379	39,695 ▲
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,100,000	- ⁵	N/A			
Number of people with access to safe channels to report sexual exploitation and abuse		500,000	- ⁶	N/A			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,160,000	188,715	120,935 ▲			
Education							
Number of children accessing formal and non-formal education, including early learning	5,500,000	850,000	19,468	13,671 ▲	790,750	68,172	68,172 ▲
Number of children provided with individual learning materials		850,000	100,219	74,639 ▲	872,000	127,686	102,106 ▲

³ These figures reflect the 2021 HAC

⁴ No progress has been made as the planned Polio campaign in the northern governorates was delayed by MoPHP. UNICEF and WHO are following up with MoPHP on implementation.

⁵ PMR and CP sections are currently working on a reporting template to systematise sectors the monthly data collection against this cross sectoral indicator. Once the tool is finalised, compiled data (from January) will be reported.

⁶ PMR and CP sections are currently working on a reporting template to systematise sectors the monthly data collection against this cross sectoral indicator. Once the tool is finalised, compiled data (from January) will be reported.

Number of schools implementing safe school protocols (infection prevention and control)		1,000	201	75 ▲	4,600	212	212 ▲
Number of teachers receiving teacher incentives each month		160,000	- ⁷	N/A	181,603	7,426	7,426 ▲
Water, Sanitation & Hygiene							
Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	20,500,000	6,800,000	1,619,949	1,619,949▲	8,826,986	2,229,956	2,229,956▲
Number of people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services		5,910,000	26,516	26,516▲	4,529,704	447,561	447,561▲
Number of people in humanitarian situations reached with messages on appropriate hygiene practices		5,910,000	26,516	26,516▲	5,767,919	454,731	454,731▲
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	1,399,995	1,399,995▲			
Social Protection & Cash Transfers							
Number of households reached with humanitarian cash transfers across sectors		30,000	- ⁸	N/A			
Number of people benefiting from emergency and longer-term social and economic assistance		150,000	20,158	10,140			
C4D, Community Engagement & AAP							
Number of people participating in engagement actions for social and behavioural change		8,000,000	679,334	309,124			
Rapid Response Mechanism							
Number of vulnerable displaced people who receive RRM kits		500,000	38,185	21,315			

⁷ Data is being compiled and will be shared during the month of March 2021.

⁸ During the first quarter, UNICEF prepared for the cash transfer cycle 2 by completing registration and verification of beneficiaries including Children with Disabilities in Amanat Al Asimah, Sana'a, and Ibb, as well as distribution of IMSEA beneficiaries' ID cards in Aden governorate. Data will be available in the second quarter.

Annex B

HAC Funding Status⁹

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources used in 2021 (\$) ¹⁰	Resources available from 2020 (Carry-over)	\$	%
Health	158,351,425	516,471		9,557,421	148,277,533	94%
Nutrition	119,875,460	512,469		15,559,813	103,803,178	87%
Child Protection, GBViE & PSEA	48,223,500	1,600,016	752,354	5,398,419	40,472,711	84%
Education	92,712,000	3,992,451	15,465,561	19,840,644	53,413,344	58%
WASH	120,571,656	1,012,541	28,278,451	25,998,821	65,281,843	54%
Social Protection & Cash Transfers	11,300,000	1,216,431		1,912,372	8,171,197	72%
C4D, Community Engagement & AAP	12,320,000	1,281		6,279,086	6,039,633	49%
Rapid Response Mechanism	6,500,000	535,655		2,777,449	3,186,896	49%
Cluster Coordination	7,000,000	0		224,290	6,775,710	97%
Being Allocated	0	2,084,210		6,963,950	(9,048,160)	
Total	576,854,041	11,471,525	44,496,366	94,512,265	426,373,885	74%

⁹ Funds Available' as of 28 February 2021 and includes total funds received against the current appeal plus Carry Forward and Other Allocations. This amount includes 'Cross-Sectoral' costs which are vital to support programming in a high-cost operating environment such as Yemen (such as security, field operations, monitoring, communications and visibility), as well as the 'Recovery Cost' for each contribution which is retained by UNICEF Headquarters. Additional resources are also mobilized to strengthen social protection, WASH and health systems for short- and long-term needs, including those arising from humanitarian situations. This includes the Emergency Cash Transfer Programme which is mitigating the impact of humanitarian and non-humanitarian shocks on communities.

¹⁰ This includes additional contributions from multi-lateral organizations and other donors which are focused on system-strengthening but have emergency components and will thereby contribute towards 2021HPM results.