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# Yemen Country Office Humanitarian Situation Report

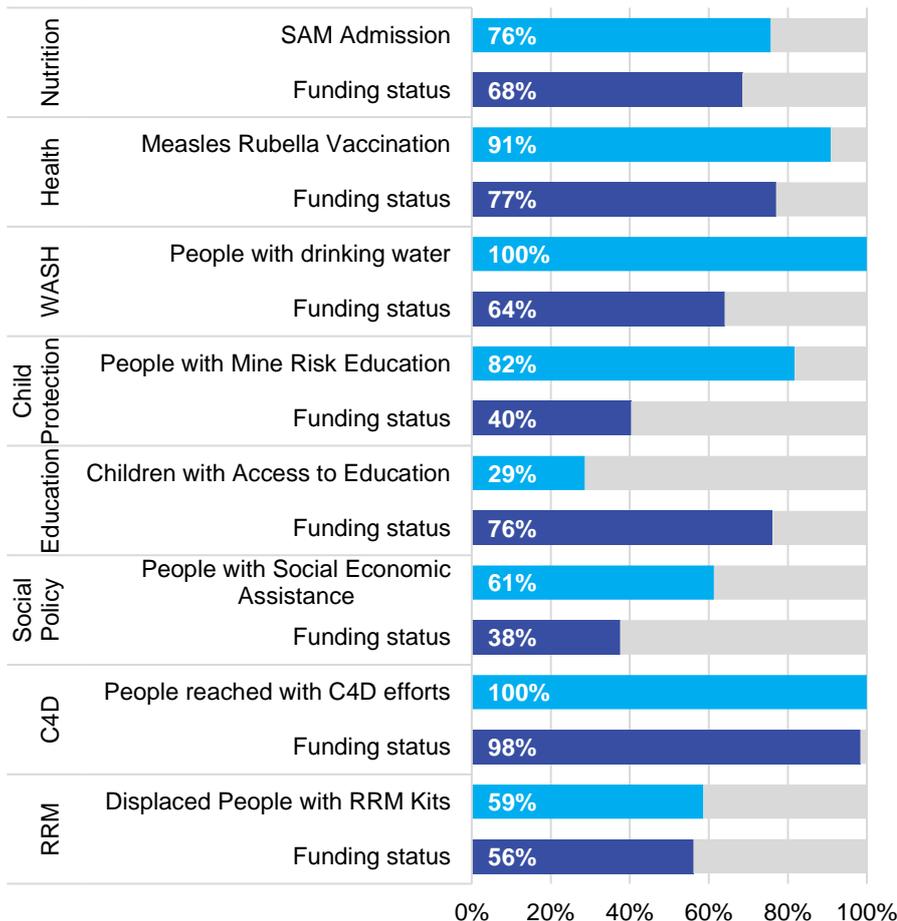


Reporting Period: 1 - 31 October 2019

## Highlights

- In October, 3 children were killed, 16 children were injured and 3 boys were recruited by various parties to the conflict.
- 59,297 suspected Acute Watery Diarrhoea (AWD)/cholera cases were identified and 50 associated deaths were recorded (0.08 case fatality rate) in October. UNICEF treated over 14,000 AWD/cholera suspected cases (one quarter of the national caseload).
- Due to fuel crisis, in Ibb, Dhamar and Al Mahwit, home to around 400,000 people, central water systems were forced to shut down completely.
- 3.1 million children under five were screened for malnutrition, and 243,728 children with Severe Acute Malnutrition (76 per cent of annual target) admitted for treatment.

## UNICEF's Response and Funding Status



## Situation in Numbers



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



**24.1 million**  
people in need  
(OCHA, 2019 Yemen Humanitarian Needs Overview)



**1.71 million**  
children internally displaced (IDPs)

## UNICEF Appeal 2019

**US\$ 536 million**

**Funding Available\***

**US\$ 362 million**

## Overall 2019 Funding Status



\*Funds available includes funding received for the current appeal (emergency and other resources), the carry-forward from the previous year and additional funding which is not emergency specific but will partly contribute towards 2019 HPM results.

## Funding Overview and Partnerships

Between January and October 2019, UNICEF received \$194.2 million of contributions towards the 2019 Humanitarian Action for Children (HAC) appeal, which has been aligned with the Yemen Humanitarian Response Plan for 2019. In October, UNICEF received \$20million from Kuwait and \$700,000 from National Committees for UNICEF (Poland, Canada, and Germany) towards the HAC appeal; however, a funding gap of \$173.7 million remains. UNICEF expects upcoming contributions from KSA (\$70 million) and UAE (\$35 million). UNICEF still has funding gaps for IDP WASH response in Al Hudaydah and Hajjah as well as for the provision of fuel to the Local Water and Sanitation Corporations (LWSCs) in major cities. If this situation is not addressed, more than 3 million people (1.5 million women, 1 million men, and 500,000 children) will be affected.

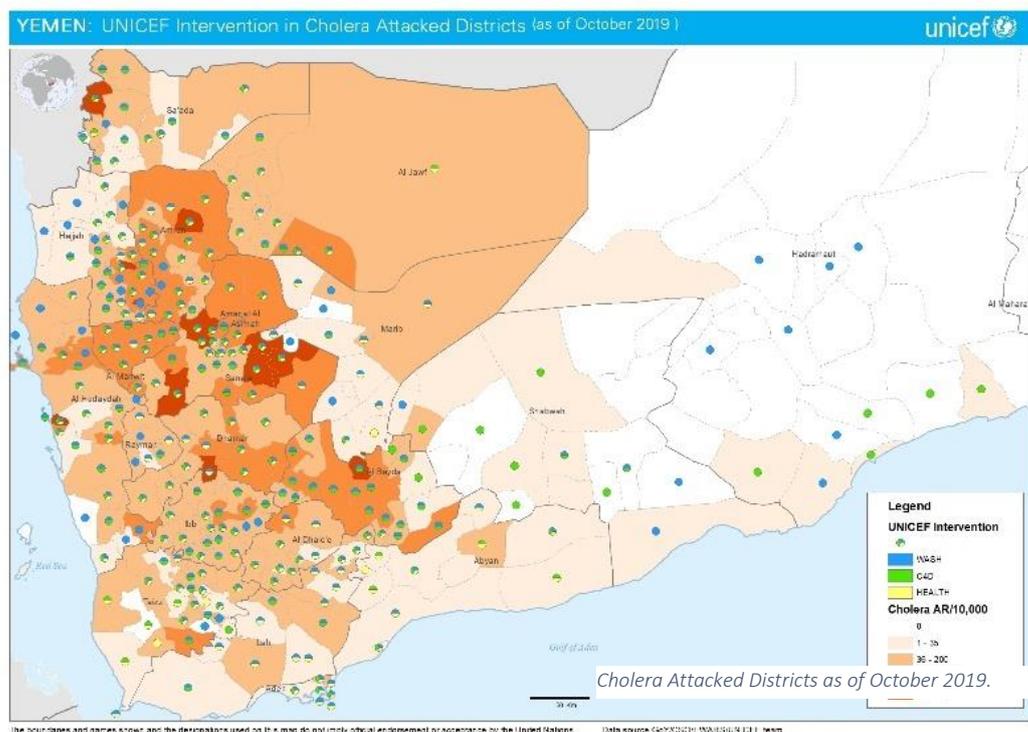
## Situation Overview & Humanitarian Needs

In October, Northern Yemen experienced acute fuel and gas shortages due to recent Government regulations on commercial fuel imports. On black markets, the price of fuel rose to over 1,000 YER/litre, almost three times the official price. Many fuel stations were closed or had limited operating hours, with several kilometres of queues and 2-3 days of waiting time. The fuel crisis impacted transportation, pumping of drinking water and power to sanitation systems. In some parts of the country, water in urban centres forced to stop. Without fuel, 15 million people would face water supplies cut. 11 million people (38 per cent of the population) across the country rely on piped water networks, which requires solar or fuel to operate. An additional 4 million people who depend on commercial water trucking might be impacted by the fuel crisis as trucks cannot operate with fuel shortages<sup>1</sup>. Nearly three-quarters of hospitals might be impacted by the fuel crisis, to provide health care<sup>2</sup>.

During the reporting period, the UN Country Task Force on Monitoring and Reporting verified 86 per cent of reported incidents, including 3 children killed (2 boys; 1 girl), 16 children injured (11 boys; 5 girls), and 3 boys recruited by various parties to the conflict. Most of the incidents documented and verified were in Al Hudaydah followed by Al Dhale'e and Shabwah.

The number of suspected Acute Watery Diarrhoea (AWD)/cholera cases continued to reduce since the first week in September 2019, with 287 out of 333 districts reporting suspected cases this month so far. In October, there have been 59,297 suspected AWD/cholera cases and 50 associated deaths recorded (0.08 case fatality rate, CFR). While children under five represent 30.9 per cent of the total suspected cases, the elderly are most seriously affected where deaths are higher among the over sixty age group, indicating possible comorbidity causes.

Between January and October 2019, 20,958 suspected cases of dengue fever with 99 associated deaths (CFR 0.5 per cent)<sup>3</sup> were reported in Aden, Taizz, Lahj, Al Hudaydah, and Abyan. In the lowland coastal areas accounting for 87 per cent of the cases. Many of the cases were linked to the movement of internally displaced people (IDPs) or residents who had travelled to dengue-endemic governorates.



<sup>1</sup> OXFAM. 22 October 2019. 15 million Yemenis see water supplies cut amid fuel crisis.

<sup>2</sup> OCHA. 17 October 2019. Briefing to the Security Council on the humanitarian situation in Yemen.

<sup>3</sup> eDEWS Update

## Summary Analysis of Programme Response

### AWD/Cholera Response

For the responses to suspected AWD/cholera cases, UNICEF supported 388 Oral Rehydration Centres (ORCs) and 70 Diarrhoea Treatment Centres (DTCs) in 201 districts in 18 governorates. In October, over 14,000 AWD/cholera suspected cases were treated in those ORCs and DTCs. This represents one-quarter of the national caseload. The number of suspected AWD/cholera cases continued to reduce since the first week in September 2019, from 2,581 suspected cases during the week of 9 September to 941 suspected cases during the week of 28 October. As a result of the second round of Oral Cholera Vaccine (OCV) campaign in the three high-risk districts identified in Amanat Al Asimah in September, the suspected cholera cases has been decreased since the mid-September.

In order to improve the quality of WASH responses to AWD/cholera, UNICEF identified 20 hotspot locations based on epidemiological trends and risk factors, to prioritize the WASH responses. UNICEF restructured WASH Rapid Response Teams (RRTs) into three distinct groups: first-line responders; investigators on the risk factors, and post-monitors follow-ups. UNICEF is now monitoring the situation to appraise the impact of these changes towards the control of the epidemic. To date, RRTs have reached more than 75,000 people in the 20 hotspots, distributed 10,714 hygiene kits, 3.75 million chlorination tablets and promoted hygiene behaviors. Following the investigation of risk factors in the 20 hotspots, a number of Quick Impact Projects (\$8 million) were identified as priority interventions to be implemented immediately. Through QIPs, UNICEF is repairing and rehabilitating sanitation systems and networks in urban and peri-urban areas, improving access to safe water and sanitation services for vulnerable families. WASH Cluster conducted nine field visits in Taizz, Hajjah, Al Hudaydah, Sana'a, Dhamar and Al Dhale'e, where are hotspot areas, to meet with partners and authorities locally, to monitor the progress of WASH response and to identify gaps and needs in cholera response.

To raise awareness of preventive measures on cholera, school-based cholera prevention interventions, interactive activities, were delivered in 858 schools, by 1,200 trained facilitators, for 22,000 children in 30 districts in 6 governorate. These districts were selected as cholera high priority districts. Other community prevention interventions continued through 58,769 home visits, 2,371 group discussions, 341 counselling sessions, 154 drama shows, 10,790 mosques events, as well as 5,307 community and 702 school events, 377 sessions in health facilities and 4,028 women gatherings.

### Health and Nutrition

With the spark of Dengue Fever-associate deaths since the end of October, UNICEF was prepared to provide support to Dengue Fever responses, with the coordination with WHO.

During the reporting period, 145,306 children under one received the third dose of the Penta vaccine, which protects against Diphtheria, Hib, Tetanus, and Hepatitis. 143,884 children received Measles and Rubella vaccination. UNICEF supported the Ministry of Population and Public Health (MoPHP) in Aden to vaccinate 352,562 women aged between 15 - 49 years (82 per cent of targets) with Tetanus and Diphtheria (Td), in 50 high risk districts in six governorates (Abyan, Aden, Al Dhale'e, Hadramout, Lahj, and Shabwah), through the first round of Td vaccination campaign. During the second round of integrated outreach, UNICEF vaccinated 96,686 children under one with antigens and 26,444 women of childbearing age were vaccinated with Td.

To prevent delays in data collection and improved the quality of data analysis, UNICEF provided training on the District Health Information System 2 (DHIS2), which is the tool to collect the data on health activities and analyze the data. Through this training, delays in data collection can be prevented and the data quality will be improved. Through the improved data analysis, health partners are available to identify and deliver critical health services to the people in need, in a timely manner. Midwives in Amanat Al Asimah, Al Baida, Ibb, Al Hudaydah, Al Mahweet, and Al Dhale'e have been equipped to provide quality maternal and newborn health services in rural areas, from training conducted with MoPHP.

UNICEF and partners continued to support the scale-up of the integrated community management of acute malnutrition programme. Between January and October 2019, through the coverage of 3,940 outpatient therapeutic programmes (OTPs) nationwide (86 per cent of total health facilities in Yemen), 128 mobile teams were mobilized in hard-to-reach areas, and 25,352 Community Health Volunteers were mobilized in 40 per cent of all targeted villages. 3,169,262 children under five (111 per cent of annual target) were screened for malnutrition. Of them, 243,728 children with SAM (76 per cent of annual target) were admitted for treatment. The cumulative SAM admission this year is 13 per cent higher than the same period of the last year due to the nine per cent increase in OTPs. Also, in 2019, 21 per cent more moderately acutely malnutrition (MAM) cases were enrolled in the

Targeted Supplementary Feeding Programme (TSFP) sites due to a 27 per cent increase in the number of TSFP sites. 655,316 children received deworming tablets and 1,509,733 mothers received Iron supplementation.

## Water, Sanitation, and Hygiene

UNICEF and the Urban Programme Management Unit (UPMU) of the Ministry of Water and Environment (MoWE) completed the installation of solar water pumping systems for seven water projects in Al Dhale'e and Lahj. 21,000 people<sup>4</sup> benefitted from the solar water pumping system, with access to safe water. UNICEF completed the construction of sanitation systems for a hospital in Sadaa and its immediate neighborhood. The project included construction of a new cesspit and manholes providing access to adequate sanitation to 80,000 beneficiaries in the catchment area. The constructed sanitation system provided access to adequate sanitation for 80,000 beneficiaries<sup>5</sup>.



©UNICEF Yemen/2019/Ahmed Abdul Haleem. A water pumping station, using the solar power networks.

WASH Cluster conducted nine field visits in seven governorates, to meet with partners and authorities locally, to monitor the progress of WASH response and to identify gaps and needs in IDP. 90 per cent of IDP sites within Ibb have land ownership problems, whilst some IDP sites in Hajjah have limited groundwater options and rely on water trucking making service provision. Sanitation response to IDPs in Hajjah remains slow. The WASH cluster is actively working to address these challenges with CCCM, OCHA and local authorities support, whilst continuing advisory. The bureaucratic procedures on sub-agreements and travel permits are hindering WASH response, particularly affecting Hajjah and Amran.

In Sana'a, WASH Cluster and MoWE provided WASH Gender and Inclusion training, including gender-based violence, to 21 WASH partners, including partners from MoWE, international NGOs and national NGOs, to improve programming and knowledge on WASH assessment and design.

## Child Protection

Airstrikes, unexploded ordinances, and active shooting remain the major causes of death and injury for children. The needs of children continued to increase as conflict and tensions increased in the southern governorates. Mine risk education was provided through schools, child and family services, and mobile teams, for 33,932 children (6,707 girls and 17,193 boys) and 32 caregivers (21 females and 11 males). To assist in overcoming the immediate and limit long-term consequences of exposure to violence, UNICEF provided psychosocial support for 30,663 conflict-affected people<sup>6</sup> in 15 governorates through fixed and mobile child-friendly spaces. In October, 1,635 children<sup>7</sup> were identified through the case management services; 97 per cent of them received specialized such as services on access to emergency medical care due to life-threatening injuries, psychological first aid, family tracing, social-economic empowerment, legal aid, and referral to schools. Some children were referred to and accessed more than one service. The access of hard-to-reach communities remained a challenge due to administrative bottlenecks from the National Authority for the Management and Coordination of Humanitarian Affairs and Disaster Recovery at both central and decentralized levels. Due to the access restriction, the child right violations in active fighting are not being monitored and verified. Furthermore, child protection services under case management, including victim assistance, mine risk education, and psychosocial support have been restricted to access to those areas so that children are not reachable by the required services.

## Education

With the opening of the school-year 2019-2020, UNICEF continues to advocate for the resumption of salaries for teachers and an accelerated Education in Emergency response, to keep education accessible for children across the country. To reduce economic barriers that may hinder girls and boys to resume schooling, UNICEF provided school bags to 35,464 grade 1-3 children in Taiz and Al Shabwah governorates, in October. 14 semi-permanent classrooms and 36 classrooms have been constructed in Marib, to provide learning spaces for children and improve access to education. However, there is an insufficient number of schools and classrooms with the capacity to host IDP children.

<sup>4</sup> 9,500 women, 7,000 men and 9,100 children

<sup>5</sup> 35,000 women, 25,000 men and 20,000 children

<sup>6</sup> 4,627 women, 2,570 men, 11,727 girls and 11,739 boys

<sup>7</sup> 674 girls and 961 boys



©UNICEF Yemen/2019/Motaz Fuad. A Specialist is recording information at a bank as part of Cash plus activities to provide extra services such as health, nutrition, education and cholera treatment for the beneficiary.

## Social Inclusion

In October, UNICEF launched a pilot Cash Plus Programme as part of the sixth Cash Transfer payment cycle of the Emergency Cash Transfer Project (ECTP) in Al Wahdah district of Amanat Al Asimah Governorate. Out of 3,007 ECTP beneficiaries, 1,224 beneficiaries have been enrolled. Of them, 1,032 households, including 3,916 children and women, have been assisted with different integrated interventions such as birth certificates, distribution of deworming tablets, micro-nutrient supplementation and Folic Acid, as well as different UNICEF key educational messages.

UNICEF continued to implement the Integrated Model of Social and Economic Assistance and Empowerment project in the targeted areas. In October, a case management component of the project was launched where 5,230 households have been assessed to be referred to social services. The project continued delivering awareness educational sessions on safe motherhood and handwashing to 1,252 households.

UNICEF supported the Ministry of Planning and International Cooperation in publishing the 44<sup>th</sup> edition of the Yemen Socio-Economic Update<sup>8</sup> focusing on “Macroeconomic Developments”, in October.

## Communication for Development (C4D)

Social mobilization interventions for the Maternal and Neonatal Tetanus (MNT) campaign reached 429,738 individuals through 18,070 house-to-house visits, 8,744 talks in mosques, 2,521 community gatherings, and 182 puppet shows. These were reinforced with mass media broadcast flashes on 15 radio and 4 TV stations. To raise the awareness of MNT, banners were placed in strategic locations, while communication materials (leaflets and posters) on MNT reached an estimated 2.5 million people. The campaign reached 82 per cent of target beneficiaries.

In October, the 2019 Global Handwashing Day was celebrated through school-based and health facilities activities as well as in public places such as markets, to raise awareness on the importance of handwashing with soap at critical times. The message was amplified through radio flash broadcasts and the dissemination of printed materials.

UNICEF in collaboration with WHO Crisis Communication and MoPHP is finalizing the scale-up plan for Dengue Fever, which will cover affected Governorates mostly on the coastal area. Community volunteers have been deployed in the targeted Governorates to engage communities through household visits to promote hygiene practices, recognizing symptoms, seeking treatment as well as mobilizing communities to reduce the breeding sites for mosquitoes. The hygiene practices are further reinforced through awareness sessions in mosques, health facilities, women/men gatherings, and market places. Interventions have started in schools in partnership with the Ministry of Education

## Rapid Response Mechanism

In October, UNICEF with UNFPA and WFP has reached 7,533 newly displaced families (52,731 people) with Rapid Response Mechanism (RRM) kits, which include essential hygiene items and other supplies. These families have been displaced mainly due to increasing escalations around the front lines in Saada, Hajjah, Aden, and Ibb governorates. RRM kits will meet the most critical immediate needs of IDP families, which are food, family basic hygiene kits, and female dignity kits, as they are uprooted suddenly from their homes without time to take anything with them. In addition, the UNICEF RRM consortium (ACTED, OXFAM, Norwegian Refugee Council, Danish Refugee Council, Save the Children International led by Action Against Food) reached 18,851 individuals from 2,693 vulnerable displaced families with RRM multi-purpose cash assistance (MPCA) in conflict-affected areas in Al Dhale'e, Hajjah, Al Hudaydah, Saada, and Abs along with the north-western frontlines in Abs and Aden. MPCA provides the displaced families with the flexibility and dignity to choose how to cover their needs.

<sup>8</sup> <https://reliefweb.int/report/yemen/yemen-socio-economic-update-issue-44-august-2019-enar>

## Supply and Logistics

In October, supplies worth more than \$5.7 million with total weight and volume of 586 metric tons and 2,823 cubic meters respectively arrived in Yemen. The delivery was completed with five dhows to Al Hudaydah, one chartered flight to Sana'a, and one chartered flight to Aden. During the reporting period, \$5.9 million worth of supplies was delivered from UNICEF warehouses to end-user beneficiaries.

## Humanitarian Leadership, Coordination, and Strategy

Humanitarian Strategy remained the same as [in the situation report for May](#).

Nutrition cluster co-leadership arrangement and the Memorandum of Understandings with four partners in four hubs were finalized by the nutrition cluster coordination team. The Child Protection Sub-Cluster in coordination with the global Child Protection Areas of Responsibility planned for localization with national NGOs' role in leading coordination in Yemen. The initiative will build the capacity of national NGOs in leading key child protection technical areas including coordination. The Education Cluster Task Forces finalized the review of the Education Cluster strategy co-leadership agreement with the Norwegian Refugee Council for the Hudaydah Hub.

The Ibb sub-national WASH cluster with local water authorities established a technical working group to identify a sustainable and alternative solution to secure sufficient safe water supply. The Aden sub-national WASH cluster mobilized preparedness actions, stocks, and partners for the response to impending cyclone season, including supporting local authority preparedness.

## Human Interest Stories and External Media

### Justice for children in Yemen: Ali makes it home to his family



*The social worker with Ali assessing his case.*

Sana'a, Yemen, 15 October 2019 – children in Yemen continue to be exposed to violence and are at ever increasing risk of exploitation and abuse, particularly as conflict and the humanitarian crisis continues across the country.

In response to the growing needs of vulnerable children, UNICEF is working in partnership with the Justice for Children (J4C) Technical Committee with membership from all relevant authorities and Non-Governmental Organizations (NGOs). With the support of UNICEF, the J4C Technical Committee has developed an Action Plan for 2019 focused on building the capacity of law enforcement, community sensitization of children and their families and promoting restorative justice, diversion and alternatives to detention. The Action Plan also includes the provision of legal aid and rehabilitation and reintegration services to enable children to return to their families and communities and resume their normal lives.

Crucial to UNICEF's child protection work is the development of standard guidelines with different sectors, especially the social welfare sector, to ensure that children are properly identified and referred and subsequently protected from ongoing risks. This is a crucial aspect of enhancing cross-sectoral coordination to help best serve the needs of vulnerable children.

In cooperation with the J4C Technical Committee, an individual assessment was conducted with all 558 children in detention. As a result, diversion, rehabilitation, and integration plans were developed and have been implemented for each child. Children's judicial cases were accelerated with 336 children receiving legal aid. From this case load 81 per cent received diversions and 171 children went through a rehabilitation program and returned to their families.

Ali<sup>9</sup>, 13 years old, is one of these children. He was staying in a care centre, away from his family in another governate, for 7 months, while waiting for trial. A social worker was able to conduct a comprehensive assessment and recommended to the judge to explore an alternative to detention. This request was subsequently approved. His family were consulted and advised on detailed actions to be implemented to ensure full protection for their child.

Ali's father was very happy that Ali was released, saying; "I cannot believe that Ali will come back to his family. (When he was gone) I was disappointed. Thank you all for your efforts."

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<sup>9</sup> Name has been changed to protect the identity of the children.

When Ali saw his father for the first time he exclaimed; “my father came, my father came, my father came to take me.” The happiness the two felt was clear as they left the care centre together.

UNICEF advocates, where possible, for alternatives to be found for children in custody. The Action Plan, which demonstrates a clear commitment to the needs of vulnerable children in prisons and other places of detention, is implemented in Yemen by UNICEF, through the United Nations Peacebuilding Support Office. The Government of Japan is a generous supporter of this programme.

## Next SitRep: 28 December 2019

**UNICEF Yemen Facebook:** [www.facebook.com/unicefyemen](http://www.facebook.com/unicefyemen)

**UNICEF Yemen Twitter:** @UNICEF\_Yemen

**UNICEF Instagram:** UNICEF\_Yemen

**UNICEF HAC 2019:** [www.unicef.org/appeals/yemen.html](http://www.unicef.org/appeals/yemen.html)

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## Annex A

### Summary of Programme Results

2019 Programme Targets and Results	Overall needs	Cluster Response			UNICEF and IPs		
		2019 Target <sup>1</sup>	Total Results	Change since last report ▲ ▼	2019 Target <sup>1</sup>	Total Results <sup>1</sup>	Change since last report ▲ ▼
<b>NUTRITION</b>							
Number of targeted children 0-59 months with Severe Acute Malnutrition admitted to therapeutic care	357,487	321,750	251,396	35,818 ▲	321,750 <sup>1</sup>	245,953	30,375 ▲
Number of targeted caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding	2,403,337	1,682,336	2,068,157	174,305 ▲	1,514,102	2,068,157 <sup>4</sup>	174,305 ▲
Number of children under 5 given micronutrient interventions (MNPs)	4,766,718	2,860,031	1,421,695	356,717 ▲	2,860,031	1,421,695 <sup>2</sup>	356,717 ▲
Number of children under 5 given micronutrient interventions (Vitamin A)	4,766,718	4,290,047	79,218	11,282 ▲	4,290,047	79,218 <sup>3</sup>	11,282 ▲
<b>HEALTH</b>							
Number of children under 1 vaccinated against measles (MCV1)					942,842	549,246 <sup>3</sup>	143,884 ▲
Children from 6 months – 15 years vaccinated in MR campaigns					13,032,803	11,837,521 <sup>1</sup>	-
Number of children under 5 vaccinated against polio					5,352,000	612,087 <sup>2</sup>	145,306 ▲
Number of children under 5 receiving primary health care					1,575,000	1,784,625	249,409 ▲
Number of pregnant and lactating women receiving primary health care					841,097	875,683	92,526 ▲
<b>WASH</b>							
Number of people having access to drinking water through support to operation/maintenance of public water systems		7,288,599	6,785,733	142,178 ▲	6,000,000	6,221,363 <sup>2</sup>	142,178 ▲
Number of people gaining access to emergency safe water supply		1,703,359	1,104,485	124,863 ▲	1,000,000	648,101 <sup>3</sup>	9,274 ▲
Number of people with access to adequate sanitation (through emergency latrine construction or rehabilitation)		1,223,908	804,315	17,446 ▲	800,000	613,847	17,446 ▲
Number of people provided with standard hygiene kit (basic and consumables)		2,322,981 (BHKs)	608,836	149,588 ▲	800,000	362,549 <sup>4</sup>	149,588 ▲
		5,332,045 (CHKs)	8,642,473 <sup>6</sup>	1,751,204 ▲	4,000,000	8,296,217 <sup>5</sup>	1,555,032 ▲
Number of people living in cholera high risk areas having access to household level water treatment and disinfection <sup>1</sup>		4,202,324	21,382,797	2,657,364 ▲	3,500,000	21,144,979	2,657,364 ▲
<b>CHILD PROTECTION</b>							
Percentage of MRM incidents verified and documented from all the reported incidents		90%	80%	2% ▼	90%	80%	2% ▼
Number of children and caregivers in conflict-affected area receiving psychosocial support		882,268	554,822	47,549 ▲	794,825	457,911	30,663 ▲
Number of children and community members reached with lifesaving mine risk education messages <sup>1</sup>		1,684,106	1,681,715	33,959 ▲	1,365,128	1,670,555	33,932 ▲
Number of children reached with critical child protection services, including case management and victims' assistance		12,932	13,527	1,599 ▲	10,345	13,050 <sup>2</sup>	1,586 ▲
UNICEF staff and implementing partners trained on Protection from Sexual Exploitation and Abuse (PSEA)					500	701 <sup>3</sup>	-
<b>EDUCATION</b>							
Number of affected children provided with access to education via improved school environment and alternative learning opportunities		891,352	714,162	7,055 ▲	816,566	233,807 <sup>1</sup>	-
Number of affected children receiving psychosocial support services and peace building education in schools		794,689	415,350	29,739 ▲	170,000	61,732 <sup>2</sup>	-
Number of affected children supported with basic learning supplies including school bag kits		1,500,000	403,114 <sup>5</sup>	146,060 ▲	996,994	162,844 <sup>3</sup>	35,464 ▲

Number of teachers/staff in schools (in a total of 10,331 schools) will receive incentives each month		135,359	-	-	135,359	- <sup>4</sup>	-
<b>Social Policy</b>							
Number of targeted marginalized/excluded benefiting from emergency and longer-term social and economic assistance (through case management)					175,000	107,343	6,489▲
<b>RRM</b>							
Number of vulnerable displaced people receiving RRM kits within 72 hours of trigger for response					2,000,000	1,171,514	52,731▲
Number of vulnerable persons supported with multipurpose cash transfer					350,000	143,348	18,851▲
<b>C4D</b>							
Affected people reached through C4D integrated efforts in outbreak response and campaigns					6,000,000	6,961,518	639,640▲
Number of community mobilisers/volunteers trained and deployed for engaging communities in social and behaviour changes practices					5,000	4,870 Reflect narrative	700▲
<b>Footnotes</b>							
<b>Target 1:</b> The Yemen Humanitarian Appeal for Children (HAC) has been revised in April 2019.							
<b>Total Results 1:</b> Data from the field is collected and reported through Field Offices; delays in reporting figures may occur to do lengthy reconciliation. As a result, figures reported may not be an accurate reflection of the results achieved that month and results are added to the next reporting month instead.							
<b>Nutrition 1:</b> The SAM target has been revised as part of the HAC revision in April 2019 and is now higher than that of the Cluster and the minimum number of SAM children targeted under the 2019 HRP. The UNICEF target increased from 80 per cent to 90 per cent of estimated SAM caseload for 2019 (which is estimated at 357,487 cases). UNICEF contributes to 100 per cent of SAM targets at the community level.							
<b>Nutrition 2:</b> The result of this indicator appears low as it features results from fixed health facilities and mobile teams only. However, almost half of the results of this indicator is attributed to the community health volunteers (CHVs) and the integrated outreach activities. The current result is as of September 2019.							
<b>Nutrition 3:</b> Vitamin A supplementation will be implemented jointly with national polio campaigns; the first polio campaign is yet to take place.							
<b>Nutrition 4:</b> UNICEF is targeting 63 per cent of the total need. The overachievement of this indicator is attributed to the scale-up of IYCF interventions at health facilities and community levels. However, there is a slight possibility of double counting between different delivery platforms where mothers are receiving this service in two locations. UNICEF is working on improving the reporting tools to minimize the double counting specifically for this indicator and the screening indicator.							
<b>Health 1:</b> A nationwide Measles and Rubella vaccination campaign held in January has been very successful and reached a high number of children.							
<b>Health 2:</b> Low results as no polio campaign has taken place yet; only as part of routine vaccinations. A polio campaign is currently being planned.							
<b>Health 3:</b> The cumulative result is expected to be higher. Results are communicated from district to governorate, then processed at the national level, therefore results are communicated with delays.							
<b>WASH 1:</b> This year there have been a higher number of suspected cholera cases than the usual trend in previous years. Therefore, the originally planned target is much lower than the current need, and this is reflected in the over-achievement of the targets.							
<b>WASH 2:</b> Due to an upsurge and increase of expected cases of AWD/suspected cases in the first quarter of 2019, the operational plan for water supply was scaled up to ensure safe drinking water in the affected area. This has led to an over-achievement of this indicator.							
<b>WASH 3:</b> This number has not included the results on water supply chlorination in Amanat Al Asimah and Al Hudaydah, as it was not tracked during the monitoring period.							
<b>WASH 4:</b> This indicator has been under-achieved as it is based on the IDP settlements and needs which have been less than anticipated. It is expected that the reach of BHKs will increase in the rest of the year, as the IDP strategy and guidelines are reviewed.							
<b>WASH 5:</b> This year there have been a higher number of suspected cholera cases in the first half of the year than the usual trend in previous years. Therefore, the RRTs scaled up their response to deliver CHKs to break the transmission of the outbreak, resulting in over-achievement of this indicator.							
<b>WASH 6:</b> The figures of the reached number for September was mis-reported and being corrected to 6,891,269.							
<b>Child Protection 1:</b> UNICEF was able to reach more students and community members with mine risk education messages than targeted, at lower cost. Furthermore, due to the conflict in Al Hudaydah and Hajjah, as well as displacement in Abyan and Al Dhale'e, UNICEF scaled up the intervention on MRE.							
<b>Child Protection 2:</b> There is a significant achievement for this indicator, due to an over-achievement of the provision of victims' assistance. This is in part due to large numbers of children sustaining injuries as a result of the conflict, in comparison to planned targets. Furthermore, the unit cost for victims' assistance is sometimes lower than planned when a victim does not require the full package of services, enabling partners to reach more children in need.							
<b>Child Protection 3:</b> This indicator has been over-achieved because more staff members and partners have engaged in the training than initially planned.							
<b>Education 1:</b> This indicator is under-achieved because the process of identification and technical assessment of affected schools is taking more time than expected. In addition, some schools within the planned target are part of a suspended grant, which is pending donor approval for reprogramming.							
<b>Education 2:</b> This indicator has low achievement because it can now be implemented in the areas controlled by the internationally recognized government only, as authorities in the areas controlled by de facto authorities have not approved it. Alternatively, UNICEF will resume the PSS interventions in the child-friendly spaces within the communities in the areas controlled by the de facto authorities.							
<b>Education 3:</b> The procurement of learning supplies is through an offshore supplier; the supplies are currently in the pipeline and more than 500,000 school bag kits during the school year 2019-2020.							
<b>Education 4:</b> Teacher incentives were not provided during the month of October.							
<b>Education 5:</b> This indicator has low achievement due to the funding gap. In addition, different requirements and priorities from different authorities limited the implementation of this activity.							

## Annex B

### Funding Status\*

Funding Requirements (as defined in the revised Humanitarian Appeal of 2019 for a period of 12 months)							
Appeal Sector	2019 Requirements (\$)	Funding Received Against 2019 Appeal (\$)	Carry Forward From 2018 (\$) ***	Other Allocations Contributing Towards Results (\$)*	2019 Funds Available (\$) **	Funding Gap	
						\$	%
<b>Nutrition</b>	124,678,000	37,925,872	26,969,221	20,500,890	85,395,983	39,282,017	32%
<b>Health</b>	85,788,673	14,962,184	26,645,256	24,487,066	66,094,506	19,694,167	23%
<b>Water, Sanitation and Hygiene</b>	135,000,000	42,194,041	24,988,022	19,153,893	86,335,955	48,664,045	36%
<b>Child Protection</b>	38,348,211	11,226,886	2,637,437	1,600,000	15,464,323	22,883,888	60%
<b>Education</b>	106,000,000	72,286,568	5,883,688	2,504,291	80,674,547	25,325,453	24%
<b>Social Policy</b>	14,009,396	1,178,895	481,960	3,600,000	5,261,855	8,747,541	62%
<b>C4D</b>	10,857,795	4,434,883	323,965	5,915,188	10,674,036	183,759	2%
<b>RRM</b>	21,000,000	9,618,271	2,163,227	-	11,781,498	9,218,502	44%
<b>Being allocated</b>	-	326,439	-	-	326,439	-326,439	-
<b>Total</b>	<b>535,682,075</b>	<b>194,155,038</b>	<b>90,092,776</b>	<b>77,761,327</b>	<b>362,009,142</b>	<b>173,672,933</b>	<b>32%</b>

\*This includes additional contributions from multi-lateral organizations and other donors that are focused on system-strengthening but have emergency components and will thereby contribute towards 2019 HPM results.

\*\*'Funds Available' as of 31 October 2019 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.

\*\*\* The amount of carrying forward was adjusted to reflect the actual values.