



Reporting Period: 1– 30 September 2022

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Yemen Country Office Humanitarian Situation Report September 2022

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Highlights:

As part of UNICEF's education in emergencies response, 6,128 out-of-school children in the Ma'rib governorate have been enrolled into formal schooling after completing non-formal education classes.

32,136 conflict-affected people were reached through explosive ordnance risk education (EORE) activities, including 26,332 children and 5,804 adults.

In September, UNICEF began the COVID-19 vaccination campaign reaching an estimated 226,747 people above 18 years in the South.

As of September, UNICEF received only 36 per cent of the funding required to continue life-saving work in Yemen.


Situation in Numbers

(OCHA, 2022 Humanitarian Needs Overview)

12.9 million
children in need of humanitarian assistance



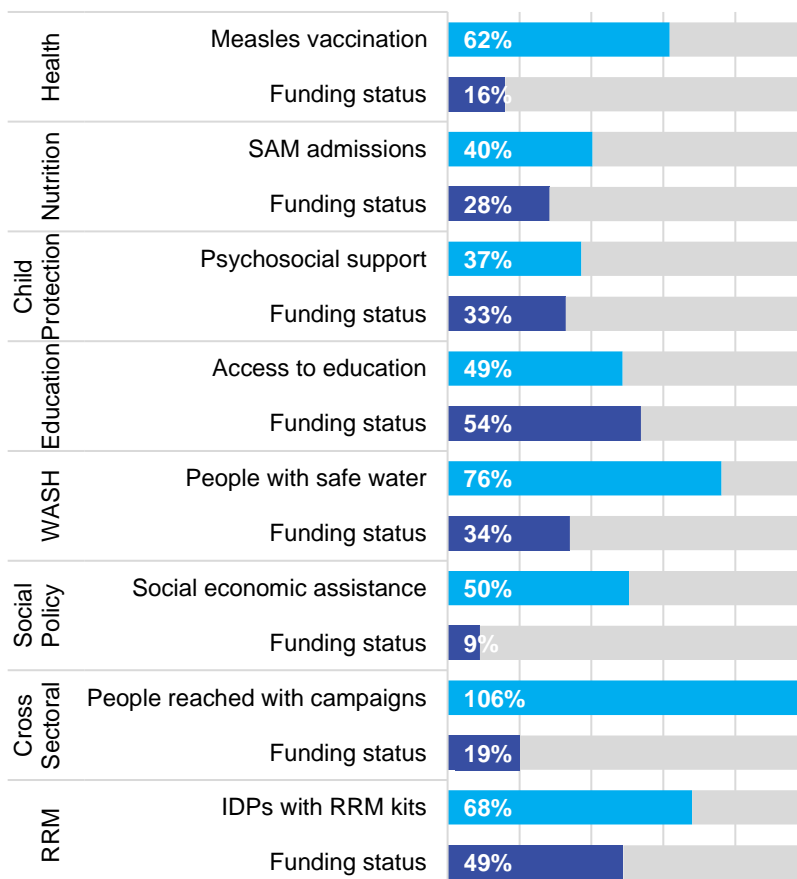
23.4 million
people in need
(OCHA, 2022 Humanitarian Update)



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

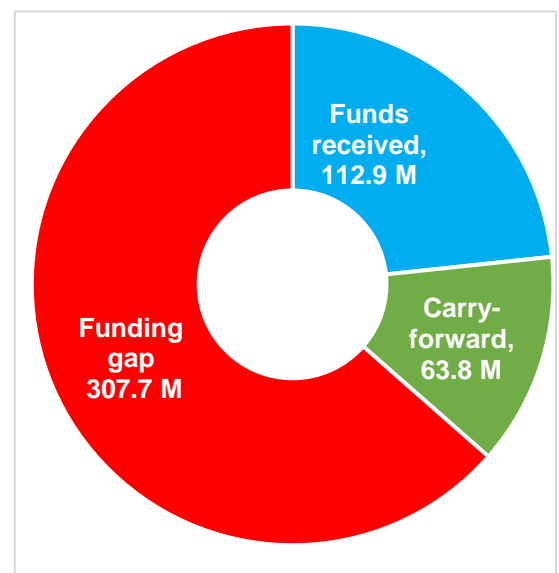


UNICEF's Response and Funding Status



Funding Status

2022 Appeal: \$484.4M



Funding Overview and Partnerships

To align with the 2022 Humanitarian Response Plan (HRP) for Yemen, the UNICEF Humanitarian Action for Children (HAC) has revised the number of women and children to be reached. Total funding requirements remain the same due to the increased operational cost of delivering assistance. This funding will allow UNICEF to meet lifesaving needs in health, nutrition and WASH and provide timely response to displacement through the Rapid Response Mechanism. The funding requirements for child protection and social protection have increased compared to 2021, due to rising needs for prevention of sexual exploitation and abuse, and scale-up of humanitarian cash transfer activities. Education remains a priority.

An additional \$307.7 million (64 per cent of the total amount) is required to continue UNICEF's life-saving work in Yemen. Critical gaps (70 per cent unfunded) are seen across all sectors, while the RRM and education remain approximately 50 per cent unfunded. During the reporting period, generous contributions were received from the USAID's Bureau of Humanitarian Assistance, the Yemen Humanitarian Fund (YHF), the UNICEF National Committee for Germany and the UNICEF National Committee for Canada.

Situation Overview & Humanitarian Needs

Discussions are ongoing regarding renewing and expanding the truce, which came to an end on 2 October. The UN-mediated six-month truce, which began on 2 April 2022, saw a decrease in internal displacement¹, reduction in hostilities, increased availability of fuel, and access to goods and services due to the opening of commercial flights.

Torrential rains and flooding continued to impact an estimated 231,000 people (33,00 households). Approximately 120 districts of 14 governorates were affected by floods between 25 August and 18 September.²

During September, 168 suspected Acute Watery Diarrhoea (AWD/Cholera) cases were reported. UNICEF is monitoring the situation in close coordination with the World Health Organization (WHO), and Health and Water, Sanitation and Hygiene (WASH) Clusters, and prepositioning supplies.

In September, 25 new cases of circulating vaccine derive polio virus type 2 (cVDPV2) were confirmed in the northern governorates, bringing the total caseload to 200 since the outbreak began in November 2021. UNICEF will continue advocacy with authorities for the polio outbreak response. UNICEF has developed a scenario-based preparedness plan, in order respond rapidly once approved by the MoPHP.

A total of 13 cases of COVID-19 were officially confirmed with two associated deaths and seven recovered cases reported in the southern governorates. There is no COVID-19 vaccination and reporting in the northern part of the country.

During the month of September, the United Nations Country Task Force on Monitoring and Reporting (UN CTFMR) documented 15 incidents of grave violations against children, in which 73.3 per cent of the incidents were verified. This includes 22 confirmed child casualties, including two children killed (one boy, one girl) and 20 children maimed (17 boys, three girls) mainly due to explosive devices including unexploded ordnance (85.7 per cent) by various parties to the conflict. There were also two incidents of military use of schools by a party to the conflict and one incident of denial of humanitarian access was reported. Most of the incidents documented and verified were in the Hodeidah, Ibb, Taiz and Sa'ada governorates.

Summary Analysis of Programme Response

Health

As part of COVID-19 response, in September UNICEF provided personal protective equipment (PPE) to more than 4,000 health workers in 1,107 health facilities across 19 governorates in Yemen.

In September, UNICEF continued with the COVID-19 vaccination campaign in 114 districts in 13 southern governorates. The campaign, which commenced on 24 September, reached 226,747 people (50.7 per cent of the target) above 18 years. As part of COVID-19 response, the assessment of oxygen systems were completed in 57 primary health care

¹ RRM Cluster

² OCHA 2022 Humanitarian Impact of Flooding - 25 August – 18 September 2022

(PHC) facilities in two governorates (Aden, Amant Al Assema). These assessments will inform the development of a strategic roadmap for evidence-based investments that strengthen oxygen systems in the southern governorates. Following the assessment, UNICEF delivered oxygen support supplies including flow meters, pulse oximeters, nasal prongs, oxygen face masks and oxygen tubing to 177 health centres in nine governorates (Aden, Abyan, Al Dhalea, Shabwah, Hadramout Sahel, Hadramout Al Wady, Al Maharah, Socotra, Taiz).

UNICEF continued to support the routine immunization program in Yemen. In September, a total of 4,140,000 doses of bivalent oral polio vaccine (bOPV), 324,800 doses of Inactivated Polio Vaccine (IPV), 309,000 doses of Rota and 364,000 doses of Pneumococcal Conjugate Vaccine (PCV) were delivered to Sana'a and Aden for routine immunization services in Q4 2022. Two walk-in cold rooms to improve the vaccine storage capacity and potency were also delivered. 78 solar direct drive (SDD) refrigerators were installed in 33 districts and 45 health facilities across 11 governorates in Yemen (nine southern governorates and two northern governorates).

UNICEF completed the fourth round of integrated outreach in the northern governorates, vaccinating 30,552 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 90,042 children under-five with integrated management of childhood illness (IMCI) services and 29,252 women with reproductive health services.

UNICEF continues to support the community health worker (CHWs) program in Yemen. Since the beginning of 2022, more than 2,300,000 people (28 per cent men, 72 per cent women) were reached by CHWs with PHC services, including over 500,000 children under five (49 per cent girls) and more than 500,000 women of reproductive age.

Nutrition

In partnership with the Ministry of Public Health and Population (MoPHP), scale-up of the integrated community management of acute malnutrition (CMAM) programme continued in response to the malnutrition crises in Yemen. Since the beginning of the year, a total of 4,384,712 children (2,180,239 boys, 2,204,474 girls) under five years were screened for malnutrition. Out of these, 220,041 children (97,114 boys, 122,927 girls) with Severe Acute Malnutrition (SAM) were identified and admitted in outpatient treatment programmes (OTPs) reaching 45 per cent of UNICEF's annual target. Furthermore 23,871 children with SAM (11,403 boys, 12,468 girls) with complications were admitted to therapeutic feeding centres.

Since the beginning of the year, a total of 814,577 children (409,908 boys, 404,669 girls), received deworming tablets; 1,145,536 children (573,108 boys, 572,428 girls) received micronutrient sprinkles; and 1,228,083 children (621,952 boys, 606,131 girls) received Vitamin A supplementation. A cumulative total of 1,297,497 mothers received iron folate supplementation and 2,811,813 mothers received infant and young child feeding (IYCF) consultations. Achievements are collected through 4,592 OTPs (90 per cent reporting rate), along with reports received from 24,447 active community health and nutrition volunteers (64 per cent reporting rate), 275 mobile teams, 2,652 infant and young child feeding (IYCF) corners, four integrated outreach rounds and the polio campaign (Vitamin A) conducted in southern governorates.

The Nutrition Cluster monitored new admissions of acutely malnourished children into selective feeding programmes, including targeted supplementary feeding programmes (TSFP) and therapeutic feeding programmes (TFP) on a monthly basis. Between January and September 2022, a total of 259,064 cases of uncomplicated severe acute malnutrition (SAM) were admitted in the functional 4,592 outpatient treatment programs (OTPs). Additionally, 568,916 children with moderate acute malnutrition (MAM) were admitted to targeted supplementary feeding programs (TSFP). Compared with the same period in 2021, there is an increase in the number of children who received treatment, as well as those admitted with complicated severe acute malnutrition in highly vulnerable districts.

The Nutrition Cluster engaged in the 2023 Humanitarian Programme Cycle (HPC) workshop and began discussions on Joint Inter-sector Analysis Framework (JIAF) indicators with strategic advisory group partners.

As part of the annual review meeting in September, key challenges were highlighted in the cluster response. Some of these include the impact of increasing fuel prices on implementation costs, shortage of funds and limited accessibility (include monitoring) of health and nutrition services in remote areas and locations along the border. Proposed solutions include the implementation of mobile teams and advocating with authorities to increase access.

Water, Sanitation and Hygiene (WASH)

Since the beginning of 2022, UNICEF has reached 6.2 million people, including 3,038,000 children, through the provision of a comprehensive WASH response.

During September, UNICEF provided sustainable water services to 474,081 people (238,795 men, 235,286 women, 232,300 children) in Ma'rib, Taiz, Hodeidah, Amran, Hajjah, Sa'ada, and Lahj through the rehabilitation of two water transmission lines (Magres Naji-Dandar & Magres Naji-Saber- AlWahat) in Lahj. UNICEF completed the supply and installation of solar pumping units including minor rehabilitation of water sources in Ma'rib Al Khalila Al Sufla in Al Abdiyah district reaching an estimated 832 IDPs. In addition, UNICEF completed the supply and installation nine submersible pumps providing sustainable safe water supply for an estimated 80,476 people in Sa'ada city. UNICEF rehabilitated the water network reservoir and the supply and installation of solar units for 14 water projects in Hodeidah and Al Mahweet in the peri-urban districts of Al Tuhayta, Al Hawak and Al Mahweet.

UNICEF continued provide safe drinking water to 16,236 IDP families including 55,689 children through water trucking (521.5 m³ of drinkable water) in Abs, Kua'aydenah, Aslam Hajjah and Al Hali district, Al Zuhrah Hodeidah. UNICEF conducted water quality monitoring at 554 water distribution points covering 115 IDP settlements in Hajjah and Hodeidah as well as the supply and installation of 42 water tanks/water distribution points in nine IDPs camp sites benefitting an estimated 1,246 people, including 611 children in Jabal Habashi and Maafer districts of Taiz.

As part of an emergency sanitation response in September, UNICEF provided emergency desludging of overflowed sewer networks, latrine cesspits and garbage collection (2,476 m³) from 21 IDP sites. The sanitation response benefitted an estimated 140,580 people, including 68,884 children in Aden, Al Jawf, Amran, Hadramout, Lahj, Ma'rib, Sa'ada and Shabwah.

In September, UNICEF provided a package of WASH supplies and hygiene messaging to 132,533 people including 64,941 children in 37 IDPs sites in Al Jawf, Al Dhalea, Dhamar, Hadramout, Ma'rib, Sana'a city, Shabwah, Taiz (Jabal Habshi and Al-Maafer districts) with non-food items including 74,178 basic hygiene kits (BHKs) and 692,030 chlorine tablets.

The WASH Cluster organized the first Taiz WASH Taskforce through the engagement of the Ministry of Water and Environment (MoWE) in Sana'a and Aden. The taskforce will analyse the water supply response gaps in Taiz city and develop an updated concept note to identify resource requirements, which will be shared with key stakeholders.

Child Protection

In September, 32,136 conflict-affected people were reached through explosive ordinance risk education (EORE) activities, including 26,332 children (13,795 boys, 12,537 girls) and 5,804 adults (3,764 men, 2,040 women) in Al Bayda, Ma'rib, Sa'ada, Shabwah and Taiz governorates. EORE was delivered in schools and child-friendly spaces, and through community campaigns with COVID-19 preventative measures.

Through a network of fixed, remote and mobile modalities, UNICEF provided psychosocial support to 24,713 people across seven governorates (Aden, Al Jawf, Al Hodeidah, Hajjah, Raymah, Sa'ada, and Taiz), including 20,251 children (10,107 boys, 10,144 girls) and 4,462 adults (1,052 men, 3,410 women). These services helped children overcome the immediate and long-term consequences of their exposure to violence.

Through the case management program, UNICEF continued to support the referral and provision of critical services and assistance for the most vulnerable children. 1,034 children (684 boys, 350 girls) were identified by trained case managers and received more than one service.

Education

In September, UNICEF provided training for 1,624 (790 men, 834 women) education office staff, teachers, community members and Education Cluster members on safe school protocols, school management, active learning and foundations of accelerated education in Abyan, Aden, Hadramout, Ma'rib, and Shabwah governorates.

As part of the Back-to-Learning campaign, UNICEF distributed school bag kits benefitting 139,239 children (70,434 boys, 68,805 girls) in Amanat Al Asimah, Abyan, Aden, Taiz, Ibb, Ma'rib, Sa'ada and Shabwah governorates. 15,520 children (8,620 boys, 6,900 girls) were supported with school-in-a-box in Taiz, Sa'ada, and Ma'rib governorates. A total of 34,352

children (16,401 girls, 17,951 boys) were supported at the school level with recreational kits in Taiz, Aden, Sa'ada, and Ma'rib governorates.

As part of UNICEF's education in emergencies response, 6,128 out-of-school children (3,423 boys, 2,705 girls) in Ma'rib governorate have been enrolled into formal schools after completing non-formal education classes. In addition, UNICEF established 162 temporary learning spaces (TLS) benefiting 6,385 children (3,065 boys, 3,320 girls) in Ibb, Ma'rib, Taiz, Amanat Al Asimah and Amran governorates. 3,269 school desks were distributed to benefit 9,807 children (4,483 girls and 5,324 boys) in Abyan and Shabwah governorates.

The Education Cluster trained 36 staff members from Hadramout sub-hub partners covering four governorates in eastern Yemen to improve the quality of monitoring and reporting education interventions. The Education Cluster is currently building evidence on the education needs in Yemen as part of the planning cycle for the 2023 humanitarian program.

Social Inclusion and Cash Assistance

In September 2022, UNICEF successfully completed referral activities under the fifth cycle of the Cash Plus initiative under the Unconditional Cash Transfer Project (UCT) in Amanat Al Asimah and Sana'a governorates in three targeted districts in the Sana'a governorate (Bani Harith, Al-Thawrah, Al Husn).

A total of 2,664 people (seven men, 330 women, 1,195 boys, 1,132 girls) were successfully supported via referral pathways to access health and nutrition services provided at public health centres, in close collaboration and coordination with Government Health Offices (GHO) in Amanat Al Asimah and Sana'a governorates. Furthermore, 26,581 people (9,519 men, 12,522 women, 2,173 boys, 2,367 girls) in the three districts were supported with key awareness messages delivered by the trained case referral team. The awareness messaging covered topics related on hygiene best practices, the importance of education for children, vaccinations, accessing health services for children and new babies, as well as obtaining birth certificates.

UNICEF conducted capacity building activities for the case management field team working with the Social Welfare Fund (SWF) under the Integrated Model of Social Economic Assistance (IMSEA) in the Aden governorate. UNICEF delivered a three-day training on Gender-Based Violence (GBV) core concepts and safe referrals to 95 staff (39 men, 56 women), social workers and their supervisors. The training enhanced the capacity of SWF case management on how to provide safe referrals for GBV survivors to specialized GBV partners/actors. The training provides better support to beneficiaries and improves the delivery of the cash plus and IMSEA interventions.

UNICEF continued to provide support to the Handicap Care and Rehabilitation Fund (HCRF) in Sana'a to reach more children with disabilities (CWDs), as part of the Cash Plus support. In September 2022, a total of 1,730 people (493 men, 285 women, 546 boys, 406 girls) were provided with case management support in 143 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 refers them to the required services. Monitoring and follow up is then activated to ensure each case receive the required services and challenges and/or barriers are addressed in a timely manner as they occur.

The Social Protection Consultative Committee (SPCC)³ held meetings in both Sana'a and Aden to discuss the role of different social programmes and coordination and support mechanisms. This includes cash transfer programmes implemented by the Social Fund for Development (SFD), the Social Welfare Fund (SWF) as well as HCRF interventions for people with disabilities, especially children, in coordination with affiliated organizations of people with disabilities (ODP).

UNICEF supported the Ministry of Planning in drafting and publishing two issues for the Yemen Social Economic Update (YSEU): edition number 71 on "Electricity and its Impact on Other Sectors" and edition 72 on "Economic Recovery and Reconstruction Priorities". Findings from edition 72 on economic recovery indicate that in Yemen, a child born today can attain 37 per cent productivity compared to the benchmark of complete education and full health. The results indicate that Yemen loses 63 per cent of its productivity due to poor investment in education services, healthcare and proper nutrition. To achieve greater economic recovery in Yemen and withstand future shocks to the economy, longer term

³ 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.

planning, integrated development initiatives and linking humanitarian action to development and peace is required in all interventions.

Social Behaviour Change (SBC)

UNICEF supported the Back-to-Learning campaign by providing technical support for the development and review of key messages and communication materials including video and print materials. Additionally, community mobilizers supported by UNICEF, including members of Mother-to-Mother clubs and religious leaders were mobilized to support the Back-to-Learning campaign in the governorates of Aden, Hadramout, and Abyan, engaging 26,700 people (14,557 men, 12,143 women). The mobilizers promoted a safe Back-to-School campaign and encouraged the adoption of improved hygiene practices.

In the southern governorates, community volunteers and religious leaders, medical doctors and midwives scaled up social mobilization interventions to increase demand for COVID-19 vaccines engaging 580,910 people (240,349 men, 340,561 women). In the Ma'rib governorate, UNICEF through implementing partners continued extensive interventions of COVID-19 Risk Communication and Community Engagement as well as COVID-19 vaccine demand generation, engaging 32,601 people through door-to-door visits and group awareness sessions.

UNICEF continued to provide support to the COVID-19 and vaccination hotlines managed by the Ministry of Public Health and Population (MoPHP). In September, health professionals provided consultations and responded to 6,900 calls. The hotline calls received included enquiries on how to register through the vaccination platform, and the side effects of COVID-19 vaccines and other vaccines.

In Hodeidah, Mahweet, Rayma, Sa'dah, 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 the key hygiene and sanitation practices, reaching 184,164 people (132,081 men, 52,083 women).

Accountability to Affected Populations (AAP)

In September, UNICEF continued to collect and address complaints and feedback related to cash transfers and payments to communities, health workers, teachers and health facilities in Yemen.

The expansion of the Complaints and Feedback Mechanism (CFM) to all UNICEF programmes is in progress. The complaint redressal module of the Management Information System (MIS) platform is under development, along with the CFM Standard Operating Procedures (SOP) and workflows. As part of the inter-agency Community Engagement – Accountability to Affected Population (CE-AAP) workplan, a workshop was organized for humanitarian agencies including clusters and cluster partners to discuss details of rolling out the collective feedback mechanism.

UNICEF resumed activities related to the IDP hotline including receiving, registering and taking actions on complaints for southern governorates of Yemen in collaboration with the Executive Unit of IDP Camps Management.

As part of the UN Common Cash System (UNCCS) and Yemen CFM's harmonization efforts for Humanitarian Cash Transfer (HCT) interventions a sample dashboard was presented and endorsed by the Humanitarian Country Team. The dashboard will be formally developed in the next quarter and shared with the relevant partners towards the end of 2022.

AWD/Cholera Response

In September, UNICEF continued communication and social mobilization interventions on essential lifesaving practices, including key AWD/cholera prevention. During the month, religious leaders, community volunteers and members of Mother-to-Mother clubs engaged 472,268 people (245,076 men, 227,192 women) through multiple interpersonal communication activities, such as awareness sessions in mosques and schools, puppet theatres, house-to-house visits and community gatherings. Out those engaged in communication activities, 12,683 people were displaced and 10,092 were from the marginalized (Muhamasheen) communities.

UNICEF delivered 785 AWD kits, periphery drug type to Yemen, as part of UNICEF's AWD/Cholera response. In total, 520 kits were delivered to 22 governorates across Yemen and 265 AWD kits have been prepositioned as contingency stock.

Rapid Response Mechanism (RRM)

The RRM cluster partners registered 11,251 newly displaced households (78,757 people) of which 21 per cent are female heads of households. In September, 89 per cent of the newly displaced population registered caseload was due to heavy rains and floods, and 11 per cent was due to armed conflict. Despite the ongoing UN-mediated truce, tensions continued across main frontlines in Ma'rib, Taiz, Hodeidah and Sa'ada governorates.

UNICEF, in collaboration with United Nations Population Fund (UNFPA) and the World Food Programme (WFP) through 12 cluster implementing partners, continued to reach displaced populations affected either by conflict or climate change with first line response packages. RRM reached 119 districts in 20 governorates, including an additional newly 7,808 displaced households (54,656 individuals) of which 62 per cent are children, 23 per cent are women and 15 per cent men. The highest reach was attained in Ma'rib, Hajjah, Raymah, Hodeidah and Dhamar governorates with RRM kits that include essential hygiene items and other supplies including food, family basic hygiene kits, and female dignity kits.

Supply and Logistics

UNICEF delivered supplies worth \$2,962,049.47 including primary health kits, vaccines, medical supplies, furniture, fuel, printed materials and school desks to the implementing partners.

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 Yemen's humanitarian strategy is aligned with the Humanitarian Needs Overview, Humanitarian Response Plan and cluster priorities. As a cluster lead for WASH, nutrition, education and the child protection sub-cluster, UNICEF effectively supports sector and inter-sectoral coordination and information management at national and sub-national levels. UNICEF will pursue a balanced approach between providing immediate life-saving interventions and investing in systems strengthening. Addressing the humanitarian, development and peace nexus, including the strengthening of multisectoral convergent approaches, will require a nuanced strategy in different parts of the country at different paces, as well as dedicated donor support.

UNICEF will continue to provide life-saving assistance for girls and boys in some of the hardest-to-reach districts via its extensive field presence and network of five field offices. With public services at near collapse, UNICEF continues providing life-saving health and nutrition interventions through community-based activities for affected populations, including internally displaced persons, while sustaining and strengthening access to a set of high-impact preventive and curative services at the community and facility level.

UNICEF supports the inter-agency protection against sexual exploitation and abuse (PSEA) network by providing and 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

Supporting Hospitals, Saving Thousands of Children in Yemen:

UNICEF make a huge difference for people who live in remote areas.

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



External Media

[Back to School in Yemen](#)



[Child Protection – UNICEF's Response in April](#)



[Jouri's journey to fight severe acute malnutrition in Yemen:](#)



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Annex A

Summary of Programme Results⁴

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
Health							
Number of children aged 0 to 11 months vaccinated against measles (MCV1)	21,900,000	972,142	600,219 ⁵	107,623			
Number of children aged 6 to 59 months vaccinated against polio		1,250,000	1,193,223 ⁶	0 ⁷			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	1,991,353	175,672			
Number of health care facility staff and community health workers provided with personal protective equipment		15,000	19,663 ⁸	4,507			
Nutrition							
Number of children aged 6 to 59 months with severe wasting admitted for treatment	8,100,000	484,639	195,251 ⁹	31,044	N/A	195,251	31,044
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months		4,730,449	1,228,083 ¹⁰	16,111	N/A	1,237,811 ¹¹	16,111
Child Protection, GBVIE & PSEA							
Number of children and caregivers accessing mental health and psychosocial support	8,800,000	900,000	334,606 ¹²	24,713	1,218,253	391,388	42,774
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,000,000	1,491,344	12,040 ¹³			
Number of people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers		1,900,000	1,426,030	0 ¹⁴			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,010,000	503,592 ¹⁵	32,046			
Education							

⁴ These figures reflect the updated approved 2022 HAC appeal.

⁵ Due to late partner reporting

⁶ Due to bureaucratic approval process

⁷ Due to bureaucratic approval process

⁸ Overachievement due to revised 2022 HAC target

⁹ Due to lack of funding received

¹⁰ Due to late partner reporting

¹¹ Due to late partner reporting

¹² Due to lack of funding

¹³ Implementation saw delays in the planning phase

¹⁴ Late partner reporting

¹⁵ 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	243,349	16,192	895,000	772,904	38,145
Number of children receiving individual learning materials		800,000	190,545 ¹⁶	154,759 ¹⁷	1,200,000	264,048	170,361
Number of teachers receiving teacher incentives each month		15,000	2,676 ¹⁸	0	100,000	8,940	517

Water, Sanitation & Hygiene

Number of people accessing a sufficient quantity of safe water for drinking and domestic needs	17,800,000	6,800,000	5,178,487	447,081	7,484,406 ¹⁹	8,471,718	591,159
Number of people reached with critical WASH supplies		3,600,000 ²⁰	1,754,109 ²¹	76,136	3,814,995	2,434,102	-7,080 ²²
Number of people in humanitarian situations reached with messages on appropriate hygiene practices		3,600,000 ²³	3,201,806	56,397	4,750,511 ²⁴	4,207,263	176,719
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	1,791,465 ²⁵	140,580			

Social Protection & Cash Transfer

Number of households reached with UNICEF funded multi-purpose humanitarian cash transfers		50,000	13,066 ²⁶	-			
Number of people benefiting from emergency and longer-term social and economic assistance		160,000	80,761 ²⁷	1,730			

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

Number of people participating in engagement actions for social and behavioural change		8,500,000	8,968,715	606,700			
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Rapid Response Mechanism

Number of vulnerable displaced people who received Rapid Response Mechanism kits		588,000	399,812	54,656			
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¹⁶ School year began in August 2022 results will

¹⁷ School year 2022-2023

¹⁸ School year 2022-2023

¹⁹ Cluster targets are added from 2022 HRP

²⁰ 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

²¹ Funding received against WASH target is on par with results

²² Data cleaning

²³ 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.

²⁴ 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.

²⁵ Underachievement due to funding gap

²⁶ Underachievement due to 91% funding gap

²⁷ The total results have been updated to include updated data for the January progress, previously not included due to partner late reporting

Annex B Funding Status*

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022 **	Other resources used in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	124,000,000	13,291,791		6,613,944	104,094,265	84%
Nutrition	119,000,000	23,667,055		9,975,125	85,357,820	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	25,617,563	46%
Water, Sanitation and Hygiene	99,600,000	19,246,108		14,632,258	66,121,634	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	473,280		66,287	4,960,433	90%
Evaluation	2,400,000				2,400,000	100%
Being allocated		39,285,443			-39,285,443	
Total	484,400,000	112,843,443		63,767,800	307,788,856	64%

*Requirements updated based on the Yemen 2022 revised HAC