Highlights

- Heavy rains causing mass floods continued throughout August, damaging homes, and health and water and sanitation infrastructure. As of the end of August 259,735 people have been affected by floods in 90 districts of 18 governorates and require assistance. UNICEF with UNFPA and WFP provided Rapid Response Mechanism (RRM) support to more than 7,604 flood affected families.
- As of 31 August, there are 1,983 COVID-19 officially confirmed cases, 572 associated deaths and 1,197 recovered cases were reported in south governorates of Yemen, with a 28.8 percent CFR. It means more than a quarter of Yemenis confirmed to have the disease have died. The spread of COVID-19 is likely much greater, due to lack of reporting in the North. UNICEF continued to provide risk communication and community engagement activities, reaching 722,464 people.
- Between 1 January - 28 August 2020, 180,053 Acute Watery Diarrhoea (AWD)/cholera suspected cases and 55 associated deaths were reported, with 0.03 per cent of case fatality rate. In August, UNICEF treated 2,341 cholera suspected cases in UNICEF-supported Oral Rehydration Centres and Diarrhoea Treatment Centres.
- A vaccine derived Poliovirus outbreak was declared in Sa’ada at the beginning of August. UNICEF supported the response planning, which will be carried out in September in Sa’ada and surrounding governorates.

Situation in Numbers

- 12.2 million children in need of humanitarian assistance
- 24.3 million people in need
- 1.71 million children internally displaced (IDPs)

UNICEF’s Response and Funding Status

UNICEF Appeal 2020
US$ 535 million
Funding Available*
$193 million

2020Funding Status

- Funds received in 2020, $21M
- Carry-forward, $173M
- Funding gap, $342M

* Fund 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 partially contribute towards 2020 HPM results.

*Response indicators represent only parts of section activities, while funding status represent the sections’ entire funding level.
Funding Overview and Partnerships

UNICEF appeal is for $535 million as part of the 2020 Yemen Humanitarian Action for Children (HAC), which is aligned to the 2019 Yemen Humanitarian Response Plan (YHRP). While UNICEF continues vigorous fundraising for its 2020 HAC appeal, it has received less than $21 million. A total of $173 million was carried forward from 2019, leaving an overall funding gap of $342 million as of 31 August 2020. UNICEF Yemen will revise down its current HAC appeal to $453 million in the coming month; the revision down takes into consideration the constrained implementing environment and the new COVID-19 appeal, which will cover activities that require adjustments or expansion due to the pandemic.

UNICEF is concurrently mobilizing resources for its COVID-19 response in Yemen, appealing for $103 million as part of the global COVID-19 response. As of 31 August, UNICEF received $42 million against this appeal. Despite the funding gaps and operational constraints, UNICEF continues to implement its responses using alternative modalities. The Risk Communication and Community Engagement (RCCE) reached 722,464 people with COVID-19 messages while keeping physical distancing. UNICEF supported the Ministry of Education plans to safely support the reopening of schools in September and October in southern governorates.

As part of continuing efforts to strengthen risk prevention and management measures, UNICEF continued to implement recommendations from the 2019 Office of Internal Audit and Investigation Internal audit report. As a result, UNICEF is actively implementing a series of risk mitigation measures to effectively deliver for children in a highly challenging and complex environment. UNICEF continued to implement the enhanced Harmonised Approach to Cash Transfers (HACT Plus). HACT Plus is a risk management framework that goes beyond the regular HACT framework adopted along with other UN agencies. HACT Plus transcends the minimum prescribed assurance activities in HACT, a decision that is determined by the inherent risk exposure and operating environment. As of 31st August, 120 implementing partners were re-assessed to establish their revised risk profiles using the enhanced risk assessment methodology. A further 80 onsite financial reviews and 74 financial audits are also ongoing, using the revised financial assurance Terms of Reference with an increased focus on fraud detection and prevention. Overall 89% of OIAI audit sub-actions have been completed.

Situation Overview & Humanitarian Needs

Since the last week of July, heavy rain has caused floods across Yemen. Floods have washed away homes, caused extensive damage to health centres and water and sanitation facilities, affecting access to health services and access to safe water supply. Damage to water and sanitation infrastructure leads to water contamination and shortages of clean potable water, which exacerbates the spread of diseases such as cholera, malaria, and dengue fever. Reports from the field have alerted to an increase in AWD/ suspected cholera cases. Flood affected families are struggling to get help due to suspended services, impassable roads and access to communication and information. As of end of August, UNICEF field offices and partners reported that 37,105 families (259,735 people) are affected by floods in 90 districts across 18 governorates in Yemen and in need of immediate assistance. The most impacted districts are conflict-affected, in proximity to active frontlines or hosting recent displacement due to armed conflict; namely Sirwah and Medghal in Marib, Abs, Aslam in Hajjah and Al Luhayah in Al Hudaydah.

Between 1 January - 28 Aug 2020, 180,053 AWD/cholera suspected cases and 55 associated deaths were reported, with a 0.03 per cent CFR, which is a significant decrease compared with the same period of 2019 (619,515 suspected cases and 861 associated deaths with a 0.14 per cent CFR). The available data shows that the cholera trends are still stable; however, UNICEF is closely monitoring cholera suspected cases and associated deaths, especially with the ongoing heavy rains and floods.

A polio outbreak was declared in Yemen, following 15 reported cases of vaccine derived poliovirus in the first weeks of August, in Sa’ada governorate.

The spread of COVID-19 is most probably underestimated due to a lack of testing capacity and under reporting. Only critical COVID-19 cases are being tested in Southern governorates, and the situation in Northern governorates remains unclear due to a lack of information. As of 31 August, 1,983 COVID-19 officially confirmed cases, and 572 associated deaths and 1,197 recovered cases were reported in Yemen, with a 28.8 percent CFR. It means more than a quarter of Yemenis confirmed to have the disease have died. This is five times the global average. The officially confirmed cases were reported in 11
The level of transmission at the community level remains unknown. Serious concerns remain over a possible ongoing "silent" transmission, including in northern Yemen, where only four cases were confirmed since April 2020.

During the month of August 2020, despite the ongoing COVID-19 outbreak in Yemen, the MRM program continues to verify grave child rights violations, albeit with some more delays affecting the timely verification of incidents. The UNCTFMR has documented 56 incidents of grave violations against children, in which 88 percent of the incidents were verified. There continued to be a high number of verified child casualties, including 13 children killed (9 boys; 4 girls), and 56 children maimed (36 boys; 20 girls), by various parties to the conflict. Most of the incidents documented and verified were in the province of Taizz, closely followed by Al Hudaydah and then Marib. These are only figures that UN has been able to verify to date; the actual number of incidents might be higher than this.

Summary Analysis of Programme Response

AWD/Cholera Response

As part of the integrated AWD/Cholera response, UNICEF supported 179 (out of 321) Oral Rehydration Centres (ORCs), and 57 (out of 212) Diarrhoea Treatment Centres (DTCs) in 201 districts in 17 governorates. In August, 2,341 cholera suspected cases were treated in those ORCs, and DTCs.

Although AWD/Cholera cases continue to decline in Yemen, Partners engaged in community interventions continued providing communication and social mobilization interventions for AWD/Cholera in areas experiencing spikes. Through 25,535 house-to-house visits and 2,171 community meetings and events as well as sessions in 100 Mother-to-Mother clubs, 171,308 people were reached with AWD/Cholera prevention messages. The frontline volunteers also supported distribution of 5,092 hygiene kits to families in Aden, Lahj, Abyan, Hadramaut, Al-Maharah and Sada’a, of which 4,000 families live in IDPs centers or marginalized communities.

UNICEF supported the operation of rapid response teams (RRTs) in 187 Cholera cases and 4,820 Households in southern governorates. RRTs distributed 3,220 consumable hygiene kits, around 5,400 (1.76 g) chlorine tablets, 300 g chlorine powder and 123 -20 litre Jerry cans.

1 Amanat Al Asimah, Al Bayda, Marib, Hadramaut, Al Maharrah, Taizz, Lahj, Abyan, Al Dhale‘e, and Shabwah
2 Sa‘ada, Al Jawf, Taizz, Ibb, Abyan, Al Bayda, Al Dhale‘e, Al Mahwit, Hadramout, Lahj, Shabwah, Aden, Al Maharrah, Amran, Dhamar, Amanat Al Asimah, and Sana’a
Health and Nutrition

In August, UNICEF procured vaccines to be distributed to government cold stores to replenish the Routine Immunization vaccine stock for quarter 4 of 2020. A total of 947,775 doses of Penta and 492,000 doses of Rota vaccines were delivered to the country on 13 Aug 2020. In addition, 870,000 doses of Bacillus Calmette–Guérin, 375,000 doses of inactivated Polio vaccine, 1,308,800 doses of Pneumococcal conjugate vaccine, and 882,000 doses of Tetanus and Diphtheria vaccines were delivered to the country on 26 Aug 2020. To strengthen the immunization supply chain system, UNICEF supported the installation of an additional 7 Solar Direct Drives (SDDs), which cumulatively since January 2020 is a total of 306 SDDs.

The UNICEF supported Polio vaccination campaign continued in the remaining southern governorates of Socotra and Hadramaut. As result, a total of 1,186,873 children under 5 received polio vaccines (96% coverage) and 905,005 children 6-59 months were supplemented with Vitamin A in 13 southern governorates. Delivery of Routine Immunization services continued and a total of 42,898 children under 1 year received their 3rd dose of Penta, and 40,867 children received Measles-Rubella vaccines. In addition, 36,207 women of childbearing age received Tetanus Diphtheria vaccines.

Due to the reported vaccine derived Poliovirus outbreak in Sa’ada, UNICEF supported planning of the outbreak response, which will be carried out in October in Sa’ada and three neighboring governorates of Al Jawf, Amran and Hajjah targeting over 1 million children under 5 years. A second polio campaign round will be carried out in 13 governorates in the north targeting nearly 4.6 million children. In response to the outbreak, and third round will be carried out in all 22 governorates targeting over 5.8 million children under 5 years nationwide. The response in Sa’ada will use the Integrated outreach strategy as this is so far the only accepted strategy for response to the outbreak.

To ensure the continuation of primary health care services, UNICEF has cumulatively conducted COVID-19 orientation sessions for 4886 health and community health workers and distributed PPE to 18 hospitals and 9093 health workers. UNICEF established and supported the triage system for COVID-19 in four health facilities in Dhamar, Marib, and Amran.

UNICEF and partners continue to support the scale-up of the integrated Community Management of Acute Malnutrition programme despite the ongoing COVID-19 pandemic which has affected the delivery of most health and nutrition services by causing a decline in the number of children reached. Since the beginning of the year, 125,581 children with SAM have been admitted for treatment (48% of annual target). The decline in SAM admissions started in the month of May 2020 and is partially attributed to the COVID-19 CMAM programme adaptations which emphasised MUAC and oedema only for admission criteria. An average percentage decline of 22% in SAM admissions was observed between May to July 2020 compared to the same period in 2019 (taking into consideration the reporting rate which has declined in 2020 from 92% in 2019 to 61% to date in 2020). Other attribution factors include; fear which prevents the beneficiaries from accessing health facilities and the suspension of some mobile teams. A total of 2,013,768 children under 5 years were screened for malnutrition (175% of annual target), however this indicator has a possibility of double counting. For example, when a child is screened once at a health facility and then screened another time by community health volunteers. UNICEF and partners try to minimize the occurrence of such duplication but cannot avoid it completely. Important to note that the goal of the activity is the timely detection and if needed referral of SAM cases.

Water, Sanitation and Hygiene

In August, UNICEF supported emergency WASH response due to the mass floods which occurred in late July and early August. UNICEF supported the rehabilitation of WASH facilities damaged by floods, provision of safe water by trucks and prefabrication of emergency latrines in Hajjah, Al Hudaydah and Raymah.

In August, UNICEF, with the Ministry of Water and Environment, conducted a mid-year review, citing the lack of emergency funding as the major constraint impacting progress of emergency WASH response. All Local Water Cooperation’s (LWCs) are
under high alert, due to lack of fuel for continued operation. LWCS in Al Mahwit and Hajjah governorates were able to resume water production after receiving fuel support from UNICEF, however all other LWCS are at critical risk of halting operations due to lack of fuel. UNICEF faces funding shortages to continue with its fuel support. UNICEF needs $4.8 million to provide 50 per cent of fuel needs through to the end of 2020. UNICEF no longer has the funding to support the WASH emergency response interventions unless an additional $7.2 million is received every month.

In August, UNICEF in partnership with General Authority for Rural Water Supply Projects (GARWSP) and NGO partners, supported the provision of safe water supply to around 204,933 people, including IDPs, flood affected families and high-risk communities, and including 89,300 children in Sana’a, Hajjah, Al Hudaydah, Al Dhale’e, Aden and Lahj Governorates through water trucking, support to public water networks and chlorination.

IDPs in Al Hudaydah and Aden were supported with construction of emergency latrines and desludging of pits. 8,800 households in the same governorates benefited from a cleaning campaign and waste management. In addition, 110 emergency latrines have been prefabricated and warehoused in Al-Qanawis. The construction of small boundary wall for the garbage landfill and disposal of garbage piles from the streets under cholera response has benefitted 5,700 people in Monabbih district in Sa’ada governorate.

UNICEF in collaboration with the National Water Resources Authority (NWRA) has activated the water quality monitoring program targeting 4 governorates. NWRA field teams carried out random taking of water samples from Private wells, water tankers, water distribution points, and drinking water stations for physical, chemical, and bacterial testing. Consequently, water contamination is being tracked and any pollution or deviation from acceptable standards are being reported to the chlorination team for proper corrective actions.

In the reporting period, the WASH cluster mobilized coordinated assessments and response, including quick repairs for water and sewage systems, rehabilitation of latrines, hygiene kits distribution, and hygiene awareness in Al Hudaydah, Ibb, Sana’a, and Marib, reaching 5,500 households. The WASH cluster conducted a technical exchange meeting to improve the quality of response and lessons on “Sanitation in Emergencies", in which 38 WASH cluster partners attended.

**Child Protection**

UNICEF continued to provide lifesaving education on the risks posed by mines, unexploded ordnances, and explosive remnants of war, to 3,967 conflict-affected people in Al-Jawf governorate, including 1,856 children (845 girls, 1,011 boys) and 2,111 adults (764 women, 1,347 men). Mine risk education (MRE) activities have seen major constraints due to COVID-19 prevention measures, YEMAC and UNICEF are working in coordination to scale up in the most affected areas.

Through a network of fixed and mobile psychosocial support (PSS) programmes, UNICEF and partners provided PSS services to 10,839 people across 10 governorates, including 7,718 children (3,719 girls, 3,999 boys) and 3,121 adults (1,557 women, 1,564 men). In anticipation of schools re-opening, UNICEF with MHPSS actors are preparing for a guide on safe re-opening of MHPSS activities.

Through the case management programme, UNICEF continued to support the referral and provision of critical services to the most vulnerable children. 542 children (219 girls, 323 boys) were identified by trained case managers. Out of them, 521 children (209 girls, 312 boys) received services. UNICEF and its implementing partners made efforts to document GBV risk mitigation activities mainstreamed in the humanitarian response, and since January have reached 3,626,899 cumulatively with GBV responses.

**Education**

National exams for grades 9 and 12 started on 15 August in 14 governorates. UNICEF supported 479,262 children in 4,287 exam centres. UNICEF provided the Ministry of Education (MoE) with PPE (4.2 million masks, 63,305 litres of hand-
sanitizers, 4,287 thermometers, 300,000 gloves) raising awareness on COVID-19 sensitive procedures for exams and physical distancing measures, while supporting 1,600 exam staff with incentives.

MoE and education authorities across the country along with partners are working on operationalization of the National COVID-19 Education Response plan with a focus on preparing schools for reopening (safe school protocol) coupled with alternative learning modalities. UNICEF and WFP finalized a framework of a minimum joint intervention package, supporting the opening of the school year in September/October 2020 based on a scenario-approach to enable continued learning within the situation of COVID-19. UNICEF and MoE formed a task forces to support the safe school re-opening. In addition, the Education cluster continues the inter-cluster coordination for a safe back to learning. The new school year in Aden will start on 6 September for secondary students and on 4 October for primary students. The date has not yet been communicated in Sana’a. Distribution of learning and teaching materials is ongoing to governorate education offices in preparation for schools re-opening.

In Sa‘ada, major rehabilitation of Al-Mithaq girls’ school was completed. The school will receive an estimated 450 girl students, while 96 teachers (17 female) have been trained on hygiene promotion knowledge and awareness raising on COVID-19 risk mitigation.

The Education Cluster has finalized the Secondary Data Review Report and it will be widely circulated to guide the Cluster and partners’ plans on additional primary data collection or assessments. A joint Education Needs Assessment has been planned, interview protocols finalized, and approval is being sought by the 2 Ministries of Education. Initiated by Save the Children, the assessment will be jointly conducted with the key education partners, including UNICEF and Norwegian Refugee Council.

The HRP defunding has called for another prioritization exercise. The Education cluster coordinators at national and sub-national levels have worked together to revise the People in Need and Severity of areas taking into consideration several parameters. In addition, the cluster objectives will be revised to feed into the reduced strategic objectives covering infectious disease, hunger and protection.

Social Inclusion

In August 2020, UNICEF supported the Ministry of Planning & International Cooperation in drafting and publishing a 49th edition of the Yemen Socio-Economic Update (YSEU). The edition focuses on "Social Protection in Yemen: Resilience and Coping amid the COVID-19 Pandemic". The edition provides an update of Novel Coronavirus Pandemic (COVID-19) in Yemen and the role of MoPIC in mobilizing resources for Social Protection (Social Safety Net programmes). It also highlights the key interventions by donors (Humanitarian Actors) in the area of Social Protection and evaluating its effectiveness. Finally, the addition proposes several social protection priorities and policies.

In the same month, and as part of the scaling-up the Integrated Model of Social Economic Assistance (IMSEA), UNICEF trained 78 community volunteers (41 male and 37 female) from Muhamasheen on key social awareness messages related to COVID-19 and received training on life skills, emergency response, motivating community participation, while taking into account the precautionary measures of COVID-19 in the trainings. The training is intended to equip the community volunteers with necessary knowledge and skills that enable the Muhamasheen to be agents of change and as a starting point in the process of social empowerment within their communities. This comes as part of the key pillar of IMSEA project which is the social investment pillar. This pillar aims at strengthening resilience, cohesion and livelihood of the targeted population and communities. The involvement and empowerment of community volunteers and community-based organisation (CBOs) is key for sustainability of the project.

In addition, and as part of scaling up IMSEA to other governorates, 7,282 households (35,708 individuals) were verified in Aden and are ready to be served by IMSEA starting with provision of IMSEA ID card. Beneficiaries will be served through Case Management approach (CM) where case managers have been already selected and trained. meanwhile, 800 appeal cases were received from targeted communities through the grievance redressal mechanism (GRM) and will be investigated during the registration campaign in Sept 2020.

Communication for Development

In August, COVID-19 prevention interventions were extended to schools during the national examination for grades 9 and 12 in the northern governorates. The prevention measures were implemented through awareness sessions with teachers and students, posters on key prevention practices, and community engagement of parents and caregivers, targeting 480,000 students. To support the adoption of COVID-19 prevention measures, over 30,000 reusable masks were distributed in the southern governorates for IDPs, marginalized people and refugees.

School Health Facilitators conducted COVID-19 risk communication and community engagement (RCCE) interventions targeting parents and caregivers in their communities, reaching 38,169 people through 4,824 home visits and 8,851 awareness sessions. Community engagement volunteers continued interpersonal communication interventions reaching 722,464 people with COVID-19 messages through 99,438 house-to-house visits and Mother-to-Mother sessions. An additional 20,090 were reached by megaphones in two-way communication. Imams and Morshydats continued engagement with people at community gatherings and events to sensitize them to COVID-19 preventive practices and physical distancing guidelines. A total of 262,052 people were reached in 5,268 community gatherings and 5,294 social events, in addition to mosque sessions during Jumma Prayers in over 5,000 mosques, reaching about 3.6 million people.

Mass Media TV, radio flashes and public service announcements, as well as discussion and phone-in programmes continued being aired on 18 TV channels and 44 radio stations across the country, reaching an estimated 16.5 million people. Furthermore about 3.5 million are reached regularly through 11,000 WhatsApp groups created by religious leaders, community volunteers and members of mother-to-mother clubs to engage with their communities. A colouring book on COVID-19 was developed and shared with partners for dissemination targeting children 5 to 10 years with key messages on prevention measures for children at home. Through phone-in programmes on local radio stations, 900 people had their questions and concerns on COVID-19 addressed by health experts.

The second round of COVID-19 rapid assessment on knowledge, attitudes and practices (KAPs) was completed. In this round, 1,521 people from 22 governorates were interviewed for the assessment. The findings will further inform and guide the COVID-19 RCCE response.

Rapid Response Mechanism

In August, UNICEF, with UNFPA and WFP, reached more than 9,628 newly displaced families (67,396 individuals) including more than 7,604 flood affected families in 17 governorates with Rapid Response Mechanism (RRM) kits that include essential hygiene items and other supplies. RRM kits have met the most critical immediate needs of displaced 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.

Supply and Logistics

In August, UNICEF Yemen procured and delivered 361 metric tonnes of supplies to Yemen, valued at $15,513,080. These supplies include vaccines, PPE, Health kits, medicines and hospital equipment. During August, $4.5 million worth of supplies was delivered from UNICEF warehouses to end-user beneficiaries.

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.
Human Interest Stories and External Media

Field Update: When Water is Scarce

Some neighbourhoods in Sana’a, the capital of Yemen, are home to the Muhamasheen community, Yemen’s most marginalized population group. Many of the residents of these communities do not have regular work, the ones that do often earn less than $40 USD per month. Their vulnerability continues to be exacerbated by the long conflict and subsequent economic crisis. Without a stable water supply and unable to buy soap the rapid spread of COVID-19 is having a catastrophic impact on their lives.

For the full Human Interest Story, click here.

External Media

Support to final exams  Distribution of birth certificates  A story of innovation amid COVID 19 pandemic  Polio vaccination campaign

Next SitRep: 31 October 2020
UNICEF Yemen Facebook: www.facebook.com/unicefyemen
UNICEF Yemen Twitter: @UNICEF_Yemen
UNICEF Instagram: UNICEF_Yemen

Who to contact for further information:

Bastien Vigneau
Deputy Representative
UNICEF Yemen
Sana’a
Tel: +967 712 223 150
Email: bvigneau@unicef.org

Bismarck Swangin
Chief of Communications
UNICEF Yemen
Sana’a
Tel: +967 712 223 161
Email: bswangin@unicef.org

Anne Lubell
Partnerships Manager
UNICEF Yemen
Amman Outpost, Jordan
Tel: +962 79 835 0402
Email: alubell@unicef.org
# Annex A

## Summary of Programme Results

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2020 Programme Targets and Results</strong></td>
<td></td>
</tr>
<tr>
<td>Overall Needs</td>
<td>2020 Target</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
</tr>
<tr>
<td>Number of targeted children 0-59 months with Severe Acute Malnutrition admitted to therapeutic care</td>
<td>325,209</td>
</tr>
<tr>
<td>Number of children under 5 given micronutrient interventions (Vitamin A)</td>
<td>4,766,718</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
</tr>
<tr>
<td>Number of children under 1 vaccinated against measles (measles-containing vaccine) through routine immunization</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children under 5 vaccinated against polio</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children under 5 receiving primary health care in UNICEF-supported facilities</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
</tr>
<tr>
<td>Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of people provided with standard hygiene kit</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
</tr>
<tr>
<td>Number of children and caregivers accessing mental health and psychosocial support</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children and community members reached with life-saving mine risk education messages</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children and women accessing gender-based violence response interventions</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
</tr>
<tr>
<td>Number of children provided with individual learning materials</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children accessing formal and non-formal education, including early learning</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of teachers receiving teacher incentives each month</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>Social Policy</strong></td>
<td></td>
</tr>
<tr>
<td>Number of marginalized/excluded people benefiting from emergency and longer-term social and economic assistance (through case management)</td>
<td></td>
</tr>
<tr>
<td><strong>RRM</strong></td>
<td></td>
</tr>
<tr>
<td>Number of vulnerable displaced people who receive RRM kits</td>
<td></td>
</tr>
<tr>
<td>Number of vulnerable persons supported with multi-purpose cash transfer</td>
<td></td>
</tr>
<tr>
<td><strong>CAD</strong></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with key life-saving/behaviour change messages through communication for development interpersonal communication interventions</td>
<td></td>
</tr>
</tbody>
</table>

### Footnotes

**Overall Needs 1:** Figures for needs will be provided once the 2020 Humanitarian Needs Overview for Yemen is published.

**Target 1:** Figures for 2020 Cluster Target will be provided once the Yemen HRP for 2020 is published.

**Nutrition 1:** The data collection of nutrition figures is being delayed for a month.
**Nutrition 2:** The immunization campaign planned for February was not materialized, representing under-achievement. Vitamin A has been distributed with the Polio campaign conducted in southern governorates.

**Nutrition 3:** The low achievement is attributed to the COVID-19 suppression measures and Ramadan, which led less movement of beneficiaries.

**Health 1:** The polio campaign has been conducted in southern governorates only. No integrated outreach rounds have been conducted yet in 2020, will resume in October.

**WASH 1:** Due to a potential risk on increasing suspected cholera cases following the rainy season during summer, hygiene kits will be distributed during the second half of 2020.

**Child Protection 1:** This indicator is not tracked by the Child Protection Sub-Cluster, as it is being tracked by the Protection Cluster.

**Child Protection 2:** The under-achievement for the child protection activities is due to the COVID-19 suppression measures, including the closure of schools and child-friendly spaces, restricted movement between governorates and a ban on meetings and public gathering. This affected mobility of partners and implementation of mine risk education awareness raising campaigns in communities and schools. Both fixed and mobile psychosocial support activities were equally affected as child-friendly spaces should had to be closed, and public gatherings were prohibited.

**Education 1:** The under-achievement against these indicator is due to teachers’ strike in Aden, which prevented children to continue with the education programme, as well as early closure of schools across the country as of 16 March as the COVID-19 suppression measures. An education authority requested to resume the distribution of supplies from the school year 2020/2021. Please note that April and May achievement against this indicator has been revised after data quality assurance activities.

**Education 2** The under-achievement against these indicator is due to teachers’ strike in Aden, which prevented children to continue with the education programme, as well as early closure of schools across the country as of 16 March as the COVID-19 suppression measures. An education authority requested to resume the distribution of supplies from the school year 2020/2021. Please note that June achievements have been revised as some achievements were attributed to Education indicator 1.

**Education 3:** Please note that the achievement for April has been revised, and the achievement reported is up to date.

**RRM 1:** The under-achievement of this indicator is attributed to the fluctuating security situation at frontlines and denied sub-agreements and approval for implementing partners to implement the activity.

**RRM 2:** To ensure the ‘do no harm’ principle, consistency and continuity of the response, UNICEF consulted with other cash providers in Yemen and handed over the caseload to the new cash consortium.
## Annex B
### Funding Status*

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>2020 Requirements ($)</th>
<th>Funding Received Against 2020 Appeal ($)</th>
<th>Carry Forward From 2019 ($) ***</th>
<th>Other Allocations Contributing Towards Results ($)*</th>
<th>2020 Funds Available ($) **</th>
<th>Funding Gap $</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>126,103,718</td>
<td>5,070,243</td>
<td>46,535,761</td>
<td>51,606,004</td>
<td>74,497,714</td>
<td>74,497,714</td>
<td>59</td>
</tr>
<tr>
<td>Health</td>
<td>91,190,848</td>
<td>1,944,525</td>
<td>18,079,959</td>
<td>20,024,484</td>
<td>71,166,364</td>
<td>71,166,364</td>
<td>78</td>
</tr>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td>135,000,000</td>
<td>4,821,515</td>
<td>59,008,959</td>
<td>63,830,474</td>
<td>71,169,526</td>
<td>71,169,526</td>
<td>53</td>
</tr>
<tr>
<td>Child Protection</td>
<td>42,800,150</td>
<td>2,018,904</td>
<td>10,455,243</td>
<td>12,474,147</td>
<td>30,326,003</td>
<td>30,326,003</td>
<td>71</td>
</tr>
<tr>
<td>Education</td>
<td>110,997,852</td>
<td>1,345,982</td>
<td>22,741,710</td>
<td>24,087,692</td>
<td>86,910,160</td>
<td>86,910,160</td>
<td>78</td>
</tr>
<tr>
<td>Social Policy</td>
<td>3,400,000</td>
<td>1,653,480</td>
<td>3,235,903</td>
<td>4,889,382</td>
<td>-1,489,382</td>
<td>-1,489,382</td>
<td>-44</td>
</tr>
<tr>
<td>C4D</td>
<td>11,730,000</td>
<td>135,685</td>
<td>6,961,935</td>
<td>7,097,621</td>
<td>4,632,379</td>
<td>4,632,379</td>
<td>39</td>
</tr>
<tr>
<td>RRM</td>
<td>13,760,000</td>
<td>185,920</td>
<td>5,565,699</td>
<td>5,751,619</td>
<td>8,008,381</td>
<td>8,008,381</td>
<td>58</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>534,982,568</strong></td>
<td><strong>20,609,485</strong></td>
<td><strong>172,585,169</strong></td>
<td></td>
<td><strong>193,194,653</strong></td>
<td><strong>341,787,915</strong></td>
<td><strong>64</strong></td>
</tr>
</tbody>
</table>

*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 2020 HPM results.**

**‘Funds Available’ as of 31 August 2020 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.”