Highlights

- During the last ten days of January, 2,336 families were displaced in Sana’a, Marib, and Al Jawf, following a rapid escalation of hostilities. UNICEF provided basic hygiene kits to 673 displaced households and multi-purpose cash assistance to 13 displaced households in some parts of the Marib governorate, to meet their most critical immediate needs.
- 24 incidents of grave violations against children in Al Hudaydah, Al Dhale’e, Sa’ada, and Shabwah in January were documented and verified by the United Nations Country Task Force on Monitoring and Reporting. 29 children were killed and maimed (6 girls and 23 boys), by various parties to the conflict in 1 case of abduction involving 2 boys.
- In January, 35,628 Acute Watery Disease/cholera suspected cases were identified with 14 associated deaths recorded (0.04 case fatality rate). UNICEF supported to treat a quarter of those suspected cases (9,000), by supporting 355 Oral Rehydration Centres and 70 Diarrhea Treatment Centres in 18 governorates.
- During the first two weeks of January, there were 5,524 dengue fever suspected cases with 11 associated deaths. Basic medical supplies was delivered to the Governorate Health Office in Al Hudaydah to respond to the dengue outbreak. UNICEF provided fuel to drain and backfill stagnant water and mobilized trucks to collect solid waste and disposal in Al Hudaydah and Hajjah, to reduce the risk to the spreading of dengue fever.

UNICEF’s Response and Funding Status

**Nutrition**
- SAM Admission: 1%
- Funding status: 35%

**Health**
- Measles vaccination: 0%
- Funding status: 19%

**WASH**
- People with safe water: 30%
- Funding status: 42%

**Child Protection**
- Psychosocial support: 8%
- Funding status: 18%

**Education**
- Access to education: 4%
- Funding status: 19%

**Social Policy**
- Social economic assistance: 0%
- Funding status: 93%

**CAD**
- People reached with campaigns: 0%
- Funding status: 58%

**RRM**
- IDPs with RRM kits: 0%
- Funding status: 38%

*Response indicators represent only parts of section activities, while funding status represent the sections’ entire funding level. While Nutrition, WASH, Social Policy, Communications for Development (CAD), and Rapid Response Mechanism (RRM) have more than 30 per cent of its funding requirements to implement Humanitarian Action for Children (HAC) activities, the available funding was carry-forwarded from the 2019 HAC funding. Despite UNICEF reached the high number of people with safe drinking water, the same beneficiaries will be supported to access safe water in coming months.
**Funding Overview and Partnerships**


UNICEF wishes to express its deep gratitude to all donors for the contributions and pledges received, which has made the 2020 response to date possible. In addition to resources mobilized, UNICEF received $171 million from other allocations or through carried forward from 2019. Nevertheless, UNICEF faces a a funding gap of $363 million (68 per cent).

**Situation Overview & Humanitarian Needs**

The precarious humanitarian situation in Yemen has further escalated, with continued fighting in multiple frontlines around the country with the highest intensity in Hajjah, Al Hudaydah, Al Dhale’e, Sa’ada, Taizz, and the west coast.

During the last ten days of January, 2,336 families were displaced in Nihm District in Sana’a Governorate, Sirwah District in Marib Governorate and Al Maton in Al Jawf Governorate, following a rapid escalation of hostilities. With many internally displaced families scattered across those three governorates, who are in hard-to-reach areas, or seeking shelter with host communities, the total number of people displaced is likely to be higher than reported.

The United Nations Country Task Force on Monitoring and Reporting (UN CTFMR) documented and verified 24 incidents of grave violations against children in Al Hudaydah, Al Dhale’e, Sa’ada, and Shabwah in January. The verification of grave violations included 29 children killed and maimed (6 girls and 23 boys) by various parties to the conflict, and 1 case of abduction involving 2 boys.

In January, there were 35,628 Acute Watery Disease (AWD)/cholera suspected cases with 14 associated deaths (0.04 case fatality rate, CFR). The reported suspected cases continue to show a stable decline in the epidemiological curve with an average of 8,000 suspected cases reported per week, as there are less reported cases during winter in general. A slight increase in the number of cases was noticed in Sana’a and Al Hudaydah governorates. The total affected districts were 240 districts (72 per cent of the total districts), with a decrease from 95 per cent of the total districts that were affected by AWD/cholera in 2019.

During the first two weeks of January, 5,524 dengue fever suspected cases were identified across the country with 11 associated deaths. Hotspot districts with a high number of dengue fever suspected cases per 10,000 of the population remain in Al Hudaydah (10.7), Aden (2.36), Marib (2.12) and Lahj (1.63). In addition to the ongoing conflict, heavy rainfall is disrupting clean water supplies. Stagnant rainwater and the use of uncovered water sources, which combined with the rain, contributed to the spread of mosquitoes, resulting in an increase of dengue suspected cases.

**Summary Analysis of Programme Response**

**AWD/Suspected Cholera Response**

UNICEF supported 355 Oral Rehydration Centres (ORCs) and 70 Diarrhoea Treatment Centres (DTCs) in 201 districts in 18 governorates. In January, over 9,000 AWD/cholera suspected cases were treated in those ORCs and DTCs. This represents a quarter of the national caseload (35,628). To strengthen the health system, increase more accessibility for the affected population and ensure the sustainability of the services, UNICEF integrated ORCs to the primary health care centres. For the preparedness of any

---

1. Upon the publishing of 2020 Humanitarian Response Plan, 2020 HAC will be revised to be aligned to the 2020 Humanitarian Plan.
possible coming wave of AWD/cholera outbreak, UNICEF procured 1,800 AWD drug kits to treat 180,000 AWD/suspected cholera cases.

As water quality problems are one of the risk factors in the spreading of AWD/cholera, quality monitoring becomes a more important component of national WASH efforts. These efforts are complemented by community-level surveillance systems, where people are empowered with the knowledge and tools to monitor the quality of their own water sources. UNICEF and its partners are playing an increasingly active role in supporting governments and communities in this important area.

Approximately 4 million people in high-risk AWD/cholera areas in 13 governorates were able to access clean water through water quality monitoring and surveillance supported by UNICEF. Furthermore, 300,000 people have been reached with WASH cholera rapid response team (RRT) interventions across Yemen in AWD/cholera outbreak affected areas at the household level. In January, 1,150 RRTs provided household-level water disinfection, distributed chlorination tablets, and consumable hygiene kits, and provided hygiene awareness sessions to establish a firewall at the household level.

As part of the integrated cholera response, community volunteers, religious leaders, school health facilitators, and health workers reached 374,332 people with AWD/cholera prevention messages through 37,707 home visits, 831 talks during Jumma prayers, 2,638 community meetings, 14 drama shows, and 54 counselling sessions in DTCs and ORCs. In Aden, an Open Day Cholera awareness event was organized. At the event, an estimated 18,000 people, including children and marginalized people, learned about cholera and how to protect themselves against AWD/cholera.

**Health and Nutrition**

To respond to the dengue fever outbreak, 7 metric tons of basic medical supplies were delivered to the Governorate Health Office in Al Hudaydah. UNICEF supported the procurement of vaccines and the cold chain for routine immunization and integrated outreach immunization activities to keep the coverage optimum.

In January, 50,322 children under one received the third doses of Penta. 44,135 children under one (6 per cent of annual target) received the first doses of Measles Containing Vaccines (MCV1), and 28,650 children above one received second doses of MCV1. 35,824 women of childbearing age were vaccinated with Tetanus vaccine through the routine Expanded Programme on Immunization services provided by fix, outreach and mobile teams. To sustain routine immunization services in Yemen, UNICEF procured 861,808 doses of Penta vaccines and 897,800 doses of Pneumococcal vaccines (PCV) and delivered to the Ministry of Public Health and Population (MoPHP).

In January, 149,558 children screened for malnutrition and 13,122 children with Severe Acute Malnutrition (SAM) (4 per cent of annual target) were admitted to therapeutic care. 25,153 children aged 5-59 months received micronutrient supplementation, to sprinkle on their food, to improve the dietary quality of complementary food. Also, 18,344 children received deworming tablets. 42,402 pregnant and lactating women (PLW) received infant and young child feeding (IYCF) consultation to adopt optimal feeding practices. Proper feeding of infants and young children can increase their chances of survival.

**Water, Sanitation and Hygiene**

The overall WASH needs remained as per the 2019 Humanitarian Needs Overview findings. The operation and maintenance of the water supply systems both in cities and rural areas remains as a priority to provide safe drinking water and basic WASH services. Due to the existing chronic high-risk factors, such as stagnated water and liquid wastes, a significant increase in dengue cases was observed across the country, especially in Al Hudaydah. To address the chronic high-risk factors, UNICEF provided fuel to drain and backfill stagnant water and mobilized trucks to collect solid waste and disposal in Al Hudaydah and Hajjah.
More than 2 million people (30 per cent of annual target) were provided with safe drinking water in 15 major cities and rural communities in Al Bayda, Al Hudaydah, Amanat Al Asimah, Amran, Dhamar, and Sa’ada. UNICEF supported the operation and maintenance of the water supply systems, through the provision of fuel, electricity, spare parts, alternative energy options and disinfectants for bulk and water tanks chlorination. While UNICEF reached 2 million people (30 per cent of annual target) with safe drinking water in January alone, the same beneficiaries will be supported to access safe water in the coming months. In addition, 1.9 million people in Al Hudaydah and Amanat Al Asimah also benefitted from the waste water treatment plant operation and solid waste management.

The constraints include restricted access to implement WASH responses for some WASH Cluster partners due to denied administrative approvals. In January, some WASH interventions were slowed down to allow for a revised strategy. WASH Cluster enhanced the effectiveness and efficiency of coordination and joint vision to improve WASH Cluster response outcomes through the WASH Coordination workshop, held in Sana’a. 27 WASH Cluster partners from NGOs, UN agencies, and government counterparts participated in the workshop. WASH Cluster, with 46 partners, including national and international NGOs, UN agencies and government counterparts, reviewed the WASH responses for 2019 and identified strategic priorities and action plan for 2020, at the Annual WASH Review meeting which took place in January.

**Child Protection**

To reduce casualties associated with landmines and explosive remnants of war, UNICEF provided lifesaving mine risk education to 101,111 conflict-affected people (5 per cent of annual target), including 78,701 children (35,293 girls and 43,408 boys) and 22,410 adults (9,102 women and 13,308 men) in Al Hudaydah, Al Dhale’e, Sa’ada, Al Jawf, Hajjah and Shabwa governorates. Mine risk awareness activities were conducted in schools and child-friendly spaces through community campaigns.

The conflict in Yemen significantly impacts children’s psychosocial well-being and development. To help conflict-affected children and people to overcome such difficult experiences in the conflict, psychosocial support was provided to 69,618 people (8 per cent of annual target), including 56,289 children (27,471 girls and 28,818 boys) and 13,329 adults (9,149 women and 4,180 men) in 15 governorates. Psychosocial support was provided through a network of fixed and mobile child-friendly spaces for those conflict-affected people to overcome the immediate and long-term consequences of exposure to violence.

UNICEF identified the children who need child protection services, supported the referral, and provided critical services to the most vulnerable children, by facilitating access to life-saving services through case management. In January, 1,456 children (538 girls and 837 boys) who need child protection services were identified by case managers. Of them, 1,430 children (573 girls and 857 boys) received critical child protection services that included victim assistance, individual counselling, family tracing and reunification, economic empowerment and livelihood support, and medical referral services. Due to the recent conflict in Al Jawf, Hajjah, Aden and Dhamar, 26 children were unable to access child protection services through referrals, in January. UNICEF continues its efforts to refer those 26 children to child protection services.

**Education**

Education in Yemen continues to be significantly affected by the ongoing conflict. Teachers in 11 governorates have not been paid their salaries. The damage of schools and shortages in the financial resources needed for operating schools are some of the causes of deterioration of the education system. To increase and improve access to education, UNICEF continues advocating for the resumption of teachers’ salaries and working to resume the Education Teachers Incentive project to support unpaid teachers with incentives to facilitate the school’s functionality.

---

5 Victims assistance to 24 war affected children (7 girls and 17 boys), individual counselling to 1,110 children (453 girls and 657 boys), family tracing and reunification to 46 children (20 girls and 26 boys), economic empowerment and livelihood support to 222 children (84 girls and 138 boys), and medical referral services for 242 children (91 girls and 151 boys).

6 Amanat Al-Asimah, Sana’a, Amran, Dhamar, Hajjah, Al Hudaydah, Raymah, Al-Mahwit, Al-Bayda, Ibb, and Sa’ada
In January, UNICEF improved the learning environment and access to education for 61,200 children (6 per cent of annual target), by providing individual learning materials. UNICEF through its Education in Emergency response provided 11,835 desks for schools in 6 governorates, 52,800 school bag kits for children in 4 governorates and distributed 210 school-in-a-box kits in 152 schools. Preparatory construction works are ongoing to rehabilitate affected schools or repair WASH facilities in schools in different governorates.

The Education Cannot Wait First Emergency Response was launched with $3 million to respond to education needs in the west coast area. Education Cluster is working with UNICEF to respond to emergency needs in Marib, including the provision of school bag kits, teaching supplies and temporary learning spaces.

Social Inclusion

In January, UNICEF, through its Integrated Model for Social and Economic Assistance and Empowerment (IMSEA) project, completed the Vulnerability Needs Assessment phase II (VNA2). The VNA2 was carried out to assess the vulnerability and needs of 907 households in marginalized communities in Amanat Al Asimah and Sana’a governorates, to determine appropriate interventions for those vulnerable communities. The VNA2 is complementary to assess the vulnerability and needs of small slums with more than ten households, who were not covered through the Vulnerability Needs Assessment phase I (VNA1) in 2019.

Also, the IMSEA project was launched in Aden governorate, by carrying out the VNA1. In parallel, the case management system to refer to social assistance for the people from marginalized communities was established. The selection process of case managers, supervisors and trainers was completed.

Communications for Development

Dengue fever response continued through the health and education offices in 14 districts of Al Hudaydah. One-day orientation was conducted for 450 community volunteers, who carried out social mobilization activities in 14 districts reaching 63,189 people. Those activities were reinforced with 15 mobile cars mounted with megaphones. Local radios were also participated in awareness activities by broadcasting awareness flashes.

In Aden, 532 students in 38 school clubs were empowered with knowledge and skills to prevent and respond to cholera, dengue fever, and malaria. The selected schools are situated in areas that have high rates of AWD/cholera and dengue fever suspected cases, along with low immunization rates and high rates of school dropouts. The members of the student clubs will be served as behaviour change agents, encouraging adoption of the promoted hygiene practices among their peers, families and neighbours and engaging food vendors in schools to improve food safety practices.

In January, capacity building sessions were organized for 700 community volunteers in Ibb and Sa’ada, to support the scaled-up community interventions in promoting the essential family care and household hygiene practices. The trained volunteers will be deployed to engage with families in hard-to-reach and marginalized areas.

Rapid Response Mechanism

To respond to the recent displacement in Marib, UNICEF through its Rapid Response Mechanism (RRM) provided basic hygiene kits to 673 displaced households (4,711 internally displaced persons, IDPs) and multi-purpose cash assistance (MPCA) to 13 displaced households (91 IDPs) in some parts of the Marib governorate, as first-line responses.

---

7 Abyan, Hajjah, Al-Dhale’a, Lahj, Hadramout and Al-Mahra
8 Al Hudaydah, Aden, Taiz and Hadramout
9 IMSEA project is social assistance that is complemented by additional social services, inputs, and linkages to other services to augment income effects.
In January, UNICEF along with UNFPA and WFP provided RRM kits which include essential hygiene items and other supplies to 674 newly displaced families (4,712 IDPs). These families were displaced mainly due to the increasing escalations around the front lines in 22 governorates across Yemen. 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. To ensure delivering an efficient and complementary emergency response, UNICEF partners provided non-food items kits to 102 newly displaced families (714 IDPs) in Al Hudaydah. In addition, more than 100 displaced children under five and displaced PLW were screened for malnutrition in Aden and Lahj. As part of the scaled-up WASH activities for cholera and dengue fever, UNICEF partners installed latrines and basic washing facilities in Abs, for more than 930 IDPs. At the same time, over 36,000 IDPs had access to safe drinking water. Hygiene promotion sessions and key messages reached more than 1,740 IDPs in Sada’a, Aden and Lahj.

The RRM consortium led by Action against Hunger - ACF reached 1,295 IDPs from 185 vulnerable displaced families with RRM MPCA in conflict-affected areas in Lahj (Tuban and Mualla districts), and Aden (Creter, Al Bureqa, Al Mansura districts). MPCA provides the displaced families with the flexibility and dignity to choose how to cover their needs.

During the implementation period, the majority of RRM implementing partners have continued to face access issues, including the challenging process of getting access to field locations and beneficiaries, disruption of verification process on sites, security situation, and the sub-agreement that was not signed by authorities.

Supply and Logistics
In January, supplies worth more than $4.6 million with total weight and volume of 151 cubic meters respectively arrived in Sana’a from Djibouti. The delivery was completed with one chartered air operations to Sana’a. Due to the escalated situation in Marib, there was no supply movement from the Salalah hub in Oman to Yemen. In January, $3 million worth of supplies was delivered from UNICEF warehouses to end-user beneficiaries.

Humanitarian Leadership, Coordination and Strategy
UNICEF’s humanitarian strategy in Yemen is aligned with the Humanitarian Needs Overview, Humanitarian Response Plan, and Clusters and programme priorities. UNICEF continues to lead the Nutrition and WASH Clusters, co-lead the Education Cluster and Child Protection Sub-Cluster, with dedicated full-time support to coordination and information management. UNFPA, supported by WFP and UNICEF, leads an inter-agency RRM in Yemen with key partners. The RRM ensures timely response to highly vulnerable populations in the most affected governorates. The UNFPA-led inter-agency RRM assistance aims to quickly reach the affected population at scale through RRM kits distribution. This is complemented by the UNICEF RRM mechanism implemented through its RRM consortium.

In addition, UNICEF leads humanitarian hubs in Ibb, and Sada’a, by providing office space, logistic support and safe accommodation for international UN staff and NGO workers. Through five field offices in Sana’a, Ibb, Aden, Al Hudaydah, and Sada’a, UNICEF monitors programme implementation where access allows and through contracted third-party monitoring firms.
Human Interest Stories and External Media

What it takes to keep communities, and homes clean and cholera free

Sana’a, Yemen

As the humanitarian crisis continues in Yemen, communities in the country’s capital, Sana’a have been dealing with collapsing health systems and ongoing disease outbreaks. Vulnerable communities struggle in the face of economic hardship and crumbling services. While UNICEF and partners are working with the authorities to keep systems going, communities themselves need to be empowered to prevent the spread of disease.

For the full Human Interest Story, click here.

External Media

- Malnutrition Story
- Delivery of Vaccines
- Delivery of prosthetics in Aden
- New social services centre for the M2M programme

Next SitRep: 31 March 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 Specialist
  UNICEF Yemen
  Amman Outpost, Jordan
  Tel: +962 79 835 0402
  Email: alubell@unicef.org
## Annex A

### Summary of Programme Results

<table>
<thead>
<tr>
<th>2020 Programme Targets and Results</th>
<th>Cluster Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overall Needs</strong></td>
<td><strong>2020 Target</strong></td>
<td><strong>Total Results</strong></td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children aged 6-59 months with Severe Acute Malnutrition admitted to therapeutic care</td>
<td>No data available yet</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children under 5 given micronutrient interventions, including Vitamin A</td>
<td>No data available yet</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children under 1 vaccinated against measles (measles-containing vaccine) through routine immunization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children under 5 vaccinated against polio</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children under 5 receiving primary health care in UNICEF-supported facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></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>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of people provided with standard hygiene kits</td>
<td>No data available yet</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children and caregivers accessing mental health and psychosocial support</td>
<td>No data available yet</td>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of children and community members reached with lifesaving mine risk education messages</td>
<td>No data available yet</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>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children provided with individual learning materials</td>
<td>No data available yet</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>
<td>No data available yet</td>
</tr>
<tr>
<td>Number of teachers receiving teacher incentives each month</td>
<td>No data available yet</td>
<td>No data available yet</td>
</tr>
<tr>
<td><strong>Social Policy</strong></td>
<td></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>
<td></td>
</tr>
<tr>
<td><strong>RRM</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of vulnerable displaced people who receive RRM kits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of vulnerable persons supported with multipurpose cash transfer</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CAD</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with key lifesaving/behaviour change messages through communication for development interpersonal communication interventions</td>
<td></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.
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>-</td>
<td>44,715,733</td>
<td>-</td>
<td>44,715,733</td>
<td>81,387,985</td>
<td>65%</td>
</tr>
<tr>
<td>Health</td>
<td>91,190,848</td>
<td>-</td>
<td>16,904,701</td>
<td>-</td>
<td>16,904,701</td>
<td>74,286,147</td>
<td>81%</td>
</tr>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td>135,000,000</td>
<td>-</td>
<td>56,993,884</td>
<td>-</td>
<td>56,993,884</td>
<td>78,006,116</td>
<td>58%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>42,800,150</td>
<td>-</td>
<td>7,674,224</td>
<td>-</td>
<td>7,674,224</td>
<td>35,125,926</td>
<td>82%</td>
</tr>
<tr>
<td>Education</td>
<td>110,997,852</td>
<td>44,643</td>
<td>21,577,605</td>
<td>-</td>
<td>21,622,248</td>
<td>89,375,604</td>
<td>81%</td>
</tr>
<tr>
<td>Social Policy</td>
<td>3,400,000</td>
<td>-</td>
<td>3,171,092</td>
<td>-</td>
<td>3,171,092</td>
<td>228,908</td>
<td>7%</td>
</tr>
<tr>
<td>C4D</td>
<td>11,730,000</td>
<td>-</td>
<td>6,768,449</td>
<td>-</td>
<td>6,768,449</td>
<td>4,961,551</td>
<td>42%</td>
</tr>
<tr>
<td>RRM</td>
<td>13,760,000</td>
<td>-</td>
<td>5,173,725</td>
<td>-</td>
<td>5,173,725</td>
<td>8,586,275</td>
<td>62%</td>
</tr>
<tr>
<td>Being allocated</td>
<td>379,759</td>
<td>9,755,902</td>
<td>-</td>
<td>-</td>
<td>8,560,329</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>534,982,568</td>
<td>424,402</td>
<td>172,735,317</td>
<td>-</td>
<td>171,584,387</td>
<td>363,398,181</td>
<td>68%</td>
</tr>
</tbody>
</table>

*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 2020 HPM results.

**'Funds Available’ as of 31 January 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.

*** The amount of carry forward from 2019 includes $7,809,810 of other allocations contributed towards results in 2019.

2020 Cluster target 1: Figures for 2020 Cluster Target will be provided once the 2020 Humanitarian Response Plans for Yemen is published.

WASH 1: While UNICEF reached 2 million (30 per cent of annual target) with safe drinking water in January alone, the same beneficiaries will be supported to access safe water in the coming months.

WASH 2: WASH Cluster reached figures only include UNICEF’s responses for January. The accumulated figures will be updated in the February situation report.