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Yemen Country Office Humanitarian Situation Report



Reporting Period: 1-31 August 2021

Highlights

- The school year started on 14 August in northern governorates and on 15 August in southern governorates. UNICEF continues its fundraising efforts to support teacher incentives in a sustainable manner for 171,600 teachers.
- The Rapid Response Mechanism (RRM) cluster reported that more than 50,000 additional people were displaced due to active conflict in August. The highest numbers were reported in Marib, Lahj, and Al Hudaydah. RRM reached an additional 6,846 newly displaced households (47,922 individuals) in August with RRM kits that included essential hygiene items, food, family basic hygiene kits, and female dignity kits.
- The existing funding gap of \$235 million (46 per cent of the total budget) impedes timely implementation of planned interventions. Despite funding challenges, WASH is making substantive progress and has already reached a key target of the number of people accessing safe drinking water (6,839,772) through the distribution of fuel to water stations throughout the country. UNICEF was able to reach approximately 3 million people in August alone thanks to the support of the Famine Relief Fund (FRF) for the multisectoral response to malnutrition.

Situation in Numbers

(OCHA, 2021 Humanitarian Needs Overview)



11.3 million
children in need of
humanitarian assistance

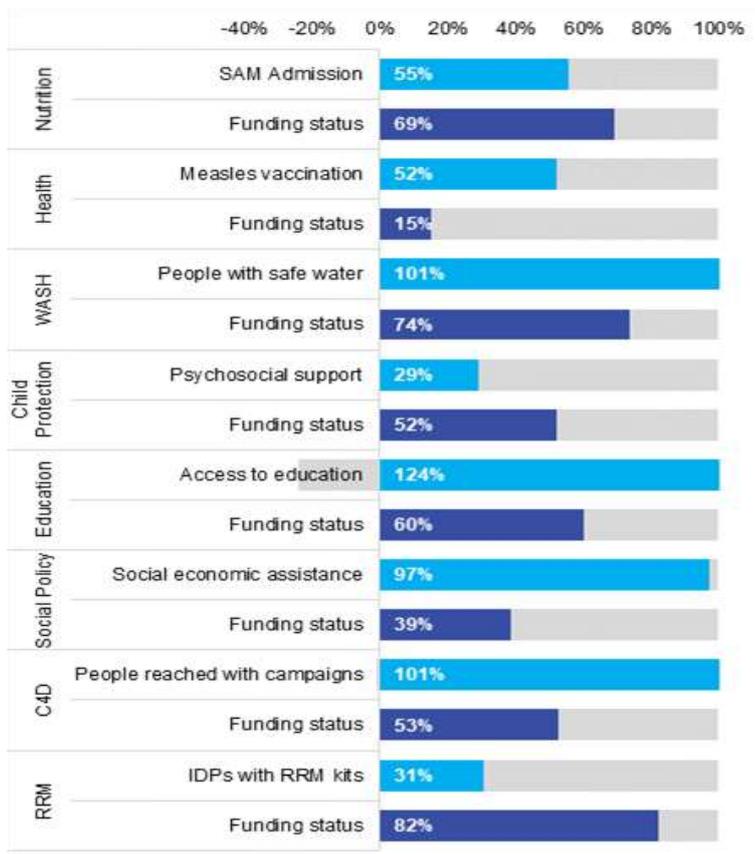


24.3 million
people in need
(OCHA, 2021 Humanitarian Response
Plan)

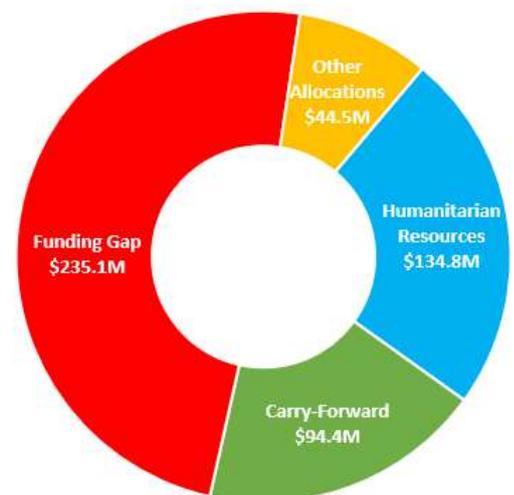


1.58 million
children internally displaced
(IDPs)

UNICEF's Response and Funding Status*



Funding Status 2021 Appeal: \$508.8M



*Response indicators represent only parts of section activities, while funding status represent the sections'

Funding Overview and Partnerships

The Yemen Humanitarian Action for Children (HAC) was revised and approved in May 2021 to align with the 2021 Yemen Humanitarian Response Plan (YHRP), and the 2021 appeal is for \$508.8 million. UNICEF's humanitarian programmes are planned for nationwide reach targeting populations in the areas with the most acute needs, and the appeal integrates the COVID-19 response into programmes planned within the HAC. As UNICEF continues to actively fundraise for its 2021 HAC appeal, as of 31 August 2021 \$134.8 million has been received. A total of \$94.5 million was carried forward from 2020, with an additional \$44.5 million received from other contributions¹, for a total of \$273.7 million funds against the HAC. This leaves a funding gap of \$235.1 million, or 46 per cent of the total amount required to continue UNICEF's life-saving work in Yemen. In August, generous contributions received during the reporting period included funds from the National Committees of Canada, France, and Ireland.

Situation Overview & Humanitarian Needs

Over six years into the conflict, Yemen remains the world's worst humanitarian crisis with 24.3 million people – 71 per cent of the total population – in need of humanitarian assistance. In August 2021 significant challenges to UNICEF's life-saving interventions persisted, including heavy rains destroying shelters of internally displaced persons (IDPs) and threatening infrastructure, severe acute malnutrition (SAM), early school closure due to the COVID-19 pandemic, and conflict-torn areas forcing families to flee from their homes. As of the end of August 2021, four million people, including 1.7 million children, continue to be internally displaced. As of late 2020, Yemen hosted approximately 138,000 migrants and 177,600 refugees and asylum-seekers. Over 90 percent of migrants are of Ethiopian origin and are mostly in transit to Gulf countries to seek livelihood opportunities.²

In August 2021, the UN Country Task Force on Monitoring and Reporting (UNCTFMR) documented nine incidents of grave violations against children, of which 89 per cent of the incidents were verified. All the verified violations in August pertained to child casualties, including 11 children maimed (10 boys; 1 girl), by various parties to the conflict. Most of the incidents documented and verified were in the governorates of Taiz (2) and Al Hudaydah (2), reflecting the continued, intense fighting along frontlines in these areas. These are only figures that UN has been able to verify to date; the actual number of incidents might be higher than this.

About 400,000 children under the age of five continue to face SAM, out of a total of almost 2.3 million children facing acute malnutrition. More than 15.4 million people urgently need assistance to access WASH services which are linked to drivers of malnutrition. The lack of funding for emergency-specific WASH interventions continues to undermine the integrated response. Approximately 20.1 million people need assistance to access health services. Women and children continue to be disproportionately affected, with 4.8 million women and 10.2 million children in need of assistance to access health services. If funds are not received, support to hospitals will halt, resulting in an interruption of basic life-saving health services for children, mothers and their new-borns, risking their lives and wellbeing. It will also lead to a lack of personal protective equipment (PPE) for thousands of health care providers and will affect COVID-19 screenings for hundreds of thousands of Yemenis. Cold chain interruption will lead to the expiry of millions of doses of over ten types of lifesaving vaccines, including those for Polio, Measles, and COVID-19.

From 1 January to 31 August 2021, a total number of 26,891 Acute Watery Diarrhoea (AWD)/cholera suspected cases and 17 associated deaths was reported, with a 0.06 per cent case fatality rate (CFR). This is still a significant decrease compared with the same period of 2020 (188,265 suspected cases and 59 associated deaths, with a 0.03 per cent CFR). Almost all governorates reported cases with the exceptions of Marib and Socotra. The highest numbers of cases were reported in Taiz, which represented 25 per cent of the total reported cases, followed by Al Hudaydah (13 per cent), and Sana'a (12.8 per cent). While the available data shows that the cholera trends are still stable, UNICEF is keeping close monitoring of cholera suspected cases and associated deaths.

A total number of 8,230 cases of COVID-19 were reported as officially confirmed, with 1,541 associated death and an 18.7 per CFR. Almost all of the cases that were reported were from Hadramout, Aden, Abyan, Lahj, Al-Dhale'a, Shabwah, Al-Maharah, Taiz, Marib, Al-Bayda, and Socotra governorates. No cases were reported from the northern governorates, aside from the first 4 reported cases during 2020.

¹ "Other allocations" include other regular resources (ORR) against the HAC 2021.

² United Nations Yemen Common Country Analysis (CCA) September 2021

Summary Analysis of Programme Response

Health and Nutrition

By the end of the reporting period and as part of the COVID-19 response, protective equipment (including gloves, masks, gowns, face shields, goggles, etc) was provided to 50,873 healthcare providers from 3,644 health facilities throughout 330 districts in 22 governorates. A total of 10,681 healthcare providers (out of the total planned 20,000), including health workers (HWs), community midwives (CMWs), and community volunteers (CVs) were sensitized on infection prevention control (IPC). During the sessions each participant was provided with clear information about the COVID-19 case definition, means of transmission, and best practices for IPC at the community and facility levels. Furthermore, they received training on how to educate two categories of people: direct beneficiaries (patients) and patients' relatives who come in with patients and are in close contact with them at home or after they are discharged from the isolation centres/units. This trainings focus on IPC and home isolation practices for suspected and confirmed cases that do not require hospitalization.



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In August, 400 staff working in the triage areas in 60 health facilities in 10 governorates in the south (Aden, Abyan, Lahj, Al-Dhale'a, Taiz, Shabwah, Hadramout Sahel, Hadramout Wady, Al-Maharah, and Socotra) were supported with hazard pay allowances.

Between June 2020 and the end of August 2021, a total number of 13,172 cases were screened for COVID-19 in UNICEF-supported triage facilities (62.9 per cent female; 22.2 per cent children under five). 322 suspected cases (53.2 per cent female; 18 per cent children under five) were referred for treatment at isolation centres. 30,000 copies of COVID-19 guide booklets were printed, and are currently being transported to health offices.

A total of 992,374 doses of Penta, 611,300 doses of tetanus (Td) and 776,400 doses of Bacillus Calmette–Guérin (BCG) were delivered to the country during the reporting period for the delivery of routine vaccination services.

Routine vaccination continued through fixed and outreach service delivery points. A total of 45,361 of children under one year of age received their third dose of Penta, 41,367 of the children received their first dose of Measles Containing Vaccines (MCV1), and 19,803 women of childbearing age received Td vaccines.

The Second Round of Integrated Outreach Activities was implemented in July and August in 17 governorates. A total 24,167 children received the third dose of Penta, and 23,998 of children under two years of age received their first dose of Measles Containing Vaccine (MCV1). In addition, 38,190 women of childbearing age (15-19 years) received the Td vaccine. Meanwhile, 158,599 children under five years of age benefited from Integrated Management of Childhood Illnesses (IMCI), and 33,145 pregnant and lactating mothers benefited from maternal and reproductive health services.

A total of 95 solar direct drive (SDD) fridges were installed in 95 Health Facilities (HFs). This makes a total of 665 SDDs which have been installed in the country since January 2021, contributing towards improved cold chain storage in the country.

UNICEF and partners continued to support the scale-up of the integrated Community Management of Acute Malnutrition (CMAM) programme in response to the malnutrition situation throughout the country, as well as in the deteriorated 209 districts that were classified in the last Integrated Food Security Phase Classification Acute Malnutrition (IPC AMN) analysis released in March 2021. Since the beginning of the year there has been a nationwide average health facility reporting rate of 90 per cent, along with reports received from community health and nutrition volunteers (CHNVs), mobile teams, Mid-Upper Arm Circumference (MUAC) campaigns, outreach rounds, infant and young child feeding (IYCF) corners, and Vitamin A supplementation through the Polio campaign. A total of 5,131,689 children under 5 years were screened for malnutrition through all interventions. Out of these, 177,595 children with SAM were admitted for treatment of SAM without complications in Outpatient Treatment Programmes (OTPs), with an 88 per cent cure rate. 18,094 children with SAM and complications were admitted to therapeutic feeding centres (TFCs).

On the prevention side, 2,285,376 children received deworming tablets, 2,731,340 children received micronutrient sprinkles, and 3,128,521 children were reached with Vitamin A supplementation through routine programmes as well as through the Polio and Vitamin A campaign that was implemented in the northern part of the country. In addition, 1,345,677 mothers received Iron Folate supplementation, and 1,746,969 mothers received Infant and Young Child Feeding (IYCF) consultations.

The clearance from national authorities for the Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys in the north is still pending. In the south, the survey was completed in Abyan governorate, and plans are now well underway for conducting the remaining surveys throughout September and October.

In August, the authorities in the north directed that MUAC be included in the Food Security and Livelihood Assessment (FSLA), and requested UNICEF to support this, along with the Ministry of Public Health and Population (MoPHP) and the Central Statistical Organization (CSO). UNICEF will support and oversee the MUAC training in the north and will support the data analysis.

Under the Nutrition Information Technical Working Group (TWG), chaired by UNICEF, work is ongoing on the Acute Malnutrition (AMN) Risk Monitoring Framework and the development of a workplan to implement the recommendations from the Nutrition Information System Review Report is underway. The new Cluster coordinator has been appointed and joined the cluster at the end of August.

Child Protection

During the month of August, 32,227 conflict-affected people were reached through Mine Risk Education (MRE) activities, including 20,868 children (9,146 girls; 11,722 boys) and 11,359 adults (4,571 women; 6,788 men) in three governorates (Aden, Al Hudaydah, and Hajjah). MRE was delivered in schools and child-friendly spaces, as well as through community campaigns, using COVID-19 preventative measures.

Through a network of fixed and mobile child-friendly spaces, UNICEF provided psychosocial support to 48,276 people including 44,961 children (21,599 girls; 23,362 boys) and 3,315 adults (1,633 women; 1,682 men) across eleven governorates (Aden, Al Hudaydah, Al Jawf, Amran, Dhamar, Lahj, Hajjah, Raymah, Sa'ada, Sana'a and Taiz).

Through the case management programme, UNICEF continued to support the referral and provision of critical services for the most vulnerable children. 1,263 children (512 girls; 751 boys) were identified by trained case managers, out of which 1,243 children (497 girls; 746 boys) received more than one service.

A total of 281,276 people, including 242,618 children (114,490 girls; 128,128 boys) were provided with community-based mental health and psychosocial support by Child Protection Area of Responsibility (CP AoR) partners. The CP AoR in Aden organized training sessions on humanitarian standards, children's rights, Inter-Agency Standing Committee (IASC) clusters' approach, child safeguarding, and media and documentation, with the support of cluster's members and other clusters. In the framework of improving support to those children who are survivors of gender-based violence (GBV) violations, the CP AoR together with the GBV AoR launched Child and Adolescent Survivors Initiative (CASI) in Aden. This initiative aims to improve referrals and services for child survivors among CP and GBV actors. The project is now ongoing and targeting 35 participants from 11 organizations and agencies.

Education

The school year started 14 August in northern governorates and on 15 August in southern governorates. UNICEF continues its fundraising efforts to support teacher incentives in a sustainable manner for 171,600 teachers. A total of 2,162 Rural Female Teachers benefitted from payments of salary allowances covering two months. UNICEF has been supporting the MoE-led 'Back to Learning' campaign through outreach to communities with messages on the importance of education, as well as the distribution of 20,766 school bag kits (SBKs) (to 8,199 girls and 12,567 boys). 98 of those SBKs were distributed in Qahzah and in Al-Dhihar IDP camps, benefiting 95 children (42 girls; 53 boys). WASH facilities in 20 schools in Ibb were rehabilitated, benefitting 18,686 children (9,637 girls; 9,049 boys). Major rehabilitation activities were completed in two all-girl schools in Ibb, benefiting 3,210 children. A teacher training plan was endorsed by MoE aiming to reach more than 20,000 teachers, school staff, parents and students. Training activities will start at the end of September.

Preparation activities for school grant implementation, in coordination with education authorities, continued to take place during the reporting period. The final list of schools and bank account signatories was received from the MoE, and the pre-distribution monitoring exercise, which will be undertaken by the UNICEF Project Management Unit (PMU) to verify the eligibility of each school and to confirm the identity of each bank account signatory, is planned. The MoE has confirmed that the school development plans for 500 schools will be ready in early September, and submitted a revised orientation program to UNICEF. Schools should receive the first tranche of the school grant by the end of October.

Water, Sanitation and Hygiene (WASH)

Despite funding challenges, UNICEF is making substantive progress in WASH activities and has already reached a key target of the number of people accessing safe drinking water (6,839,772) through the distribution of fuel to water stations in the north and south. UNICEF was able to reach approximately three million people in August alone thanks to the support of the Famine Relief Fund (FRF) for the multisectoral response to malnutrition.

During the month of August one of the key priorities was to continue the cholera response across Yemen. The trend of the cholera prevalence has remained steady in many parts of the South, except for Taiz governorate which showed an upward trend. There was a total of 2,162 cases reported with three death cases. The cholera response included chlorination activities, as well as water quality management (WQM) activities which are being concurrently implemented in the same districts where high cholera cases were reported, supported by 125 Rapid Response Teams (RRT). UNICEF is expanding the role of RRTs to support the malnutrition response. In August, the RRT targeted 1,716 (76 per cent) of the total cholera cases and surrounding households, reaching 167,832 beneficiaries.

As part of the flooding response, UNICEF supported 779 households in affected IDP sites in Ibb governorate. The support included the distribution of hygiene kits, chlorine tablets, and awareness raising sessions. UNICEF also supported the Amran and Dhamar Water & Sanitation Local Corporations with emergency maintenance of collapsed sewage pipelines, as well as by cleaning and dislodging the sewage systems in Amanat al Asimah, benefiting 70,000 and 112,640 people, respectively.

The WASH cluster reviewed and approved UNICEF's proposal on fuel support under the Yemen Humanitarian Fund (YHF) Reserve Allocation. The WASH Cluster Strategic Advisory Group (SAG) was organized and members (including representatives from local NGOs, international NGOs, and UN agencies) agreed to include representatives from the Ministries of Water and Environment (MoWE) in both Aden and Sana'a. The WASH cluster also joined the Inter-Cluster mission to Al Jawf led by OCHA to observe WASH needs in Al Hazm District and at IDP sites near the district centre. A further detailed needs assessment will be conducted by the Social Fund for Development and the Yemen Al-Khair for Relief & Development Foundation in Al Jawf district to prioritize WASH needs in the governorate.

Social Protection and Inclusion

In August, a total of 5,838 households (HHs)/30,876 individuals were reached as part of the fourth cycle of the cash plus project targeting emergency cash transfer (ECT) beneficiaries, implemented in Amanat Al Asimah (Shuaub district) and Sana'a governorates (Bilad Ar Rus and Arhab districts). Key achievements of this cycle included measuring 3,188 cases with MUAC (90 pregnant women, 146 lactating women, 2,952 children). A total of 44 malnourished children and 63 babies in need of vaccinations were referred to government health centres supported by UNICEF. Furthermore, total of 5,838 HHs/9,131 individuals received key awareness messages from the Case Referral Officers (CROs) on COVID-19 protection and hygiene practices, and on the importance of education for children and obtaining birth certificates for

children and new babies. A total of 4,814 children have been referred to Civil Registration Authority (CRA) to obtain the birth certificates. CROs are following up with CRA to ensure birth certificates are provide to the referred children.

At the end of August, and as part of the social investment pillar of the Integrated Model of Social and Economic Assistance (IMSEA), 269 adolescents and youth from the poorest and most marginalized communities in Sana'a governorate (90 per cent of the target) were involved in a Life-Skills training programme which contains of three parts; Life Skills, Financial Literacy and Career Guidance. This training is delivered within 12 training days for four hours a day. After completing life-skills training, beneficiaries will participate in an employability/entrepreneurship training programme for 16 days, which is aims to enhance the employability of Muhamasheen adolescents and youth.

Monthly coordination meetings were conducted for 265 community committees and community volunteers (79 female; 186 male) to evaluate community initiatives and community outreach activities. A new community initiative promoting the right to education/back to school was developed in Sana'a governorate, reaching 5,412 individuals (2,558 males; 2,854 females) with information on floods in Amanat Al Asimah as well as 1,987 individuals (1,117 male; 870 female) on outreach activities on the right to education which resulted in returning 200 students to schools and supported 50 Muhamasheen children to buy the notebooks and pens. In addition, 45 cleaning campaigns in 55 informal settlements in Amanat Al Asimah and Sana'a were conducted benefiting 12,169 individuals.



Participants in Life-skills Training Programme, ©UNICEF Yemen/2021

Social Policy supported the Ministry of Planning in drafting and publishing the Yemen Social Economic Update, Issue #59. The issue was titled "Economic and Social Empowerment of Yemeni Women and their Role in Building Peace". It analysed the impact of war on women and the role of women in building peace. The issue noted that Yemen is ranked 155 globally in the Gender Gap Index in 2021, a drop from its ranking of 115 in 2006. The poverty rate among female-headed households in rural areas in Yemen is 72 per cent compared to 20.1 per cent in urban areas. In addition, the issue indicated that there are currently 4.6 million women and 5.5 million girls in need of assistance, and that 73 per cent of IDPs in Yemen are women and children.

Communication for Development (C4D)

During the reporting period, religious leaders continued COVID-19 Risk Communication and Community Engagement (RCCE) with people in mosques and schools, as well as in community gatherings and events, to sensitize them to COVID-19 prevention practices and physical distancing guidelines. Overall, 204,720 people were reached by religious leaders in mosques, schools, community gatherings, and women's social events. In addition, community volunteers reached 266,626 people with COVID-19 messages through house-to-house visits and Mother-to-Mother sessions. Community volunteers also engaged IDPs for COVID-19 RCCE in 24 IDP centres in Aden, Hadramout, and Abyan. To provide an additional platform for dialogue, some community volunteers, including religious leaders and members of Mother-to-Mother Clubs, created WhatsApp groups for engaging with their communities, reaching 49,800 people.

To strengthen feedback systems, UNICEF supported hotlines managed by MoPHP, where health professionals responded to questions, concerns, and medical consultations on COVID-19. UNICEF also supported a hotline for IDPs to enable them to raise complaints and concerns about humanitarian services provided to them. During the reporting period, 2,261 calls were responded to through those hotlines.

As part of the integrated multi-sectoral response to malnutrition in Yemen, members of Mother-to-Mother clubs and community volunteers mobilized for community engagement to promote healthy nutrition practices, support referrals of malnutrition cases, and increase demand for health and nutrition services, reaching 42,581 caregivers. Mass media support was provided for this intervention through 25 local radio stations that aired nutrition messages on a daily basis through flashes, public service announcements, and call-in programmes, reaching an estimated 5 million people.

AWD/Cholera Response

During the reporting period, Al-Tuhayta district in Al-Hudaydah governorate reported an increase in AWD cases, especially among IDPs in certain camps, and requested additional cholera supplies. UNICEF reallocated cholera supplies

to support the case management in 14 facilities in Al-Tuhayta district, and continued to support the case management of the persisting cases through diarrhoea treatment centres (DTCs) and oral rehydration centres (ORCs).

Rapid Response Mechanism (RRM)

Throughout August, conflict continued across an estimated 52 active front lines in Yemen. Conflict intensified in Marib during the reporting period, leading to further displacement of families within the governorate itself. Conflict also intensified on the Hudaydah, Shabwah, Al Bayda, and Taiz frontlines.

The RRM cluster reported that more than 50,000 additional people are displaced due to active conflict in August. The highest number observed was reported in Marib, Lahj, and Al Hudaydah. UNICEF, along with UNFPA and WFP, continued to reach displaced populations at frontlines with first line response packages. RRM reached 6,846 newly displaced households (47,922 individuals) in August, including those affected by floods, with RRM kits that include essential hygiene items, food, family basic hygiene kits, and female dignity kits. RRM kits have met the most critical and immediate needs of displaced families, as they are uprooted suddenly from their homes.

Supply and Logistics

Shipments between the north and south remained strictly controlled by the authorities. In Al Hudaydah, the Yemen Standardization, Metrology, and Quality Control Organization (YSMO) continued to prohibit imports of supplies with less than 50 per cent of their remaining shelf life and to impose strict processing requirements for supplies shipped from certain countries of origin. YSMO continues to require the shipping of Ready-to-Use Therapeutic Food (RUTF) exclusively in refrigerated containers despite recommendations from manufacturers and the Ministry of Public Health and Population (MoPHP) that refrigerated containers are not required. This requirement increases shipping costs up to 200 per cent. However, this requirement is being reviewed as a result of strong advocacy efforts by UNICEF and WFP.

New requirements were introduced by the Supreme Council for the Management and Coordination of Humanitarian Affairs (SCMCHA) for UN/INGO organisations to exclusively contract vendors registered with SCMCHA, limiting the sourcing and competitive selection of vendors in northern Yemen. The commercial market in southern Yemen is still limited and highly dependent on vendors based in the north. To ensure the availability of essential supplies, price competitiveness and timeliness of procurement sub-regional markets are being explored.

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 work in coordination with the Yemen Humanitarian Country Team, leading the WASH, Education and Nutrition Clusters and the Child Protection Area of Responsibility (AoR), and is an active member of the Health Cluster and is collaborating with other UN agencies and INGOs to efficiently deliver basic life-saving supplies and services in areas impacted by increasing armed violence.

In the context of the COVID-19 pandemic, UNICEF developed a COVID-19 preparedness and response plan in April 2020. The response plan also aligns with the UN's and the government's three priorities for Yemen: case management, RCCE, and the continuation health beyond the COVID-19 response – and UNICEF leads the last two priorities. The plan builds on the WHO-led National Preparedness and Response Plan and considers lessons learned from other affected countries. The first half of 2021 involved close coordination with GAVI, The Vaccine Alliance, and WHO to roll out the COVAX vaccine campaign in Yemen. In March 2021, 360,000 COVID-19 vaccines were delivered in Yemen through the COVAX facility to support the prevention of the life-threatening virus. UNICEF continued its RCCE response with campaigns to address disinformation on the vaccine, as well as to continue digital engagement and rumour monitoring.

Human Interest Stories and External Media

Field Update: Six-month-old Rayed overcomes malnutrition in dedicated centre that sees dozens of children each day



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UNICEF is working to provide treatment for children in the Malnutrition Treatment Centre at Al Sabain Maternity and Children's Hospital in the country's capital, Sana'a.

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

External Media

[World Humanitarian Day](#)



[Access to Education](#)



[Recruited Child by Armed Forces Gives Testimony](#)



Next SitRep: 31 October 2021

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Annex A Summary of Programme Results³

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2021 target	Total results	Change since the last report	2021 target	Total results	Change since the last report
Health							
Number of children aged 0 to 12 months vaccinated against measles	20,100,000	972,142	508,490	121,967			
Number of children aged 6 to 59 months vaccinated against polio		5,535,816	3,800,313	-. ⁴			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	1,884,942	469,920			
Number of health care facility staff and community health workers provided with personal protective equipment		15,000	15,873	5,110 ⁵			
Nutrition⁶							
Number of children aged 6 to 59 months with severe acute malnutrition admitted for treatment	321,558	320,108	177,595	3,354	320,108	177,595	3,354
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months	4,766,718	4,633,443	3,128,521	2,165	4,633,443	3,128,521	2,165
Child Protection, GBVIE & PSEA							
Number of children and caregivers accessing mental health and psychosocial support	8,600,000	900,000	262,168 ⁷	48,276	990,000	281,276 ⁸	50,246
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,100,000	4,112,976	113,697 ⁹			
Number of people with access to safe channels to report sexual exploitation and abuse		500,000	1,400,000	-. ¹⁰			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,160,000	407,987	32,227 ¹¹			
Education							

³ These figures reflect the updated, approved 2021 HAC appeal.

⁴ There was no progress in August because this indicator is planned to be achieved through National campaigns. The first campaign was held in May and the second is anticipated to be conducted in the last quarter of the year.

⁵ This indicator depends on the available supply and demand raised by MoHP. UNICEF's available supply of the PPE exceeded the target by 6 per cent. Based on a discussion between MoHP and UNICEF, MoHP requested to distribute the available supply of PPE to healthcare facilities' staff.

⁶ As data for these indicators is collected from thousands of Health Facilities and hundreds of Mobile teams scattered over the whole country, UNICEF and partners conducted data cleaning for the data provided from Jan till August. Accordingly, progress achieved of each month has been updated. There has not been much change in the total results of the indicator.

⁷ Local NGOs faced permit issues with governmental authorities to implement PSS activities. MoSAL hotline is still under activation which will help to reach people remotely through PSS counselling.

⁸ The speed of the implementation of the activities by partners was delayed and resulted in slow progression towards the target.

⁹ GBV data and progress of the previous months have been updated based on the data updated in WASH indicator that contributes to the GBV indicator.

¹⁰ The target of this indicator has been met and the total result was overachievement by 280 per cent as explained in the June update. This indicator depends heavily on the PMU payment cycle which was last quarter.

¹¹ Long and additional regulations by YEMAC to any agency working under MRE caused underachievement against the target. Due to the delay of teacher trainings and school closures, progress will be made in the last quarter of the year. Two National campaigns have been postponed to the end of September that will reach 60 per cent of the target.

Number of children accessing formal and non-formal education, including early learning	8,100,000	500,000	620,885	- ¹²	790,750	272,566	6,219
Number of children receiving individual learning materials ¹³		800,000	126,197	20,766	872,000	264,499	35,050
Number of schools implementing safe school protocols (infection prevention and control)		1,000	229	- ¹⁴	4,600	703	-
Number of teachers receiving teacher incentives each month		86,000	2,162 ¹⁵	2,162	181,603	6,129 ¹⁶	-3,498

Water, Sanitation & Hygiene¹⁷

Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	15,400,000	6,800,000	6,839,772	1,613,350	8,826,986	5,902,974	1,613,350
Number of people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services		5,910,000	3,972,994	451,600	4,529,704	4,436,453	473,951
Number of people in humanitarian situations reached with messages on appropriate hygiene practices ¹⁸		5,910,000	3,972,994	451,600	5,767,919	4,809,438	530,568
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	3,894,493	886,212 ¹⁹			

Social Protection & Cash Transfer

Number of households reached with humanitarian cash transfers across sectors		40,000	28,596	29 ²⁰			
Number of people benefiting from emergency and longer-term social and economic assistance		150,000	145,931	32,823			

C4D, Community Engagement & AAP

Number of people participating in engagement actions for social and behavioural change		8,000,000	8,069,753 ²¹	471,346			
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Rapid Response Mechanism

Number of vulnerable displaced people who received Rapid Response Mechanism kits		672,000 ²²	206,290 ²³	47,922			
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¹² National grade 9 + 12 exams were successfully completed in July 2021, allowing estimated 600,000 children to continue with their formal education. The final report is currently under review by the MoE, figures provided are indicative and may change in the next reporting period.

¹³ Learning materials are expected to be distributed at the beginning of the 2021-2022 schoolyear, which started mid-Aug 2021.

¹⁴ A comprehensive large-scale capacity development initiative for teachers, school-based staff, FMCs, Student Councils etc. is scheduled for 15 Aug-15 Dec 2021. The initiative includes training on the implementation and follow-up on safe school protocols. Reporting against this indicator will be done in Q4 2021.

¹⁵ Education Teacher Incentives and Temporary Teacher Incentives projects were completed; no funds available for the 2020/2021 schoolyear. High level advocacy to mobilise funds is ongoing, driven by UNICEF and partners. For Rural Female Teachers, payment cycles were completed in Aug 2021. Performance-based payments will restart for the 2021-2022 school-year under the WB REAL and ECHO projects (earliest payment foreseen to be made around Nov/Dec 2021).

¹⁶ It was determined that one of UNICEF's partners made an error in the previous reporting period, hence the decrease.

¹⁷ WASH section received late data from partners for both indicators presenting previous months; data has been updated and cleaned accordingly.

¹⁸ Low achievement is due to delays in WASH supplies distribution and hygiene promotion, which is planned under the World Bank (CERC) fund. A total of 3.6 million people is expected to benefit from the CERC project, which is delayed due to the TPM clearance and the project approval.

¹⁹ Overachievement is due to the large number of people reached through UNICEF supported emergency interventions which includes the maintenance of collapsed sewage pipelines, as well as cleaning and dislodging sewage systems in the cities like Sana'a.

²⁰ Underachievement is due to lack of funding.

²¹ The overachievement was due to scaling up COVID RCCE and mobilizing over 6,000 religious leaders who are able to reach large numbers of beneficiaries through group communication in mosques, schools, community gatherings, etc.

²² This target has increased to reflect the 2021 response where UNICEF and partners complement each other's efforts to reach more people.

²³ This indicator is linked to patterns of newly displaced people and the cluster verification process. The target that was set by the cluster in the HRP is the cause for seemingly low achievement, as it was set on the basis of previous years (trends of displacement in 2019 and 2020).

Annex B Funding Status

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other Allocations Contributing Towards Results (\$) ²⁴	Resources available from 2020 (Carry-over)	\$	per cent
Health	123,460,800	6,974,570		11,430,984	105,055,246	85%
Nutrition	119,875,460	65,725,798		16,978,141	37,171,561	31%
Child Protection, GBViE & PSEA	33,287,000	10,636,654	752,354	5,968,984	15,929,008	48%
Education	84,760,000	14,712,036	15,465,561	20,937,582	33,644,820	40%
WASH	100,000,000	17,906,369	28,278,451	27,425,386	26,389,794	26%
Social protection & cash Transfers	21,240,000	6,147,284		2,046,070	13,046,646	61%
C4D, Community Engagement & AAP	12,320,000	88,101		6,424,852	5,807,047	47%
Rapid Response Mechanism	6,878,200	2,729,871		2,923,215	1,225,114	18%
Cluster Coordination	7,000,000	1,024,816		307,112	5,668,073	81%
Being Allocated	-	8,859,640			- 8,859,640	
Total	508,821,500	134,805,140	44,496,366	94,442,326	235,077,668	46%

²⁴ 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 2021 HPM results.