



Reporting Period: 1 – 31 March 2021

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# Yemen Country Office Humanitarian Situation Report



## Situation in Numbers

(OCHA, 2021 Humanitarian Needs Overview)

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

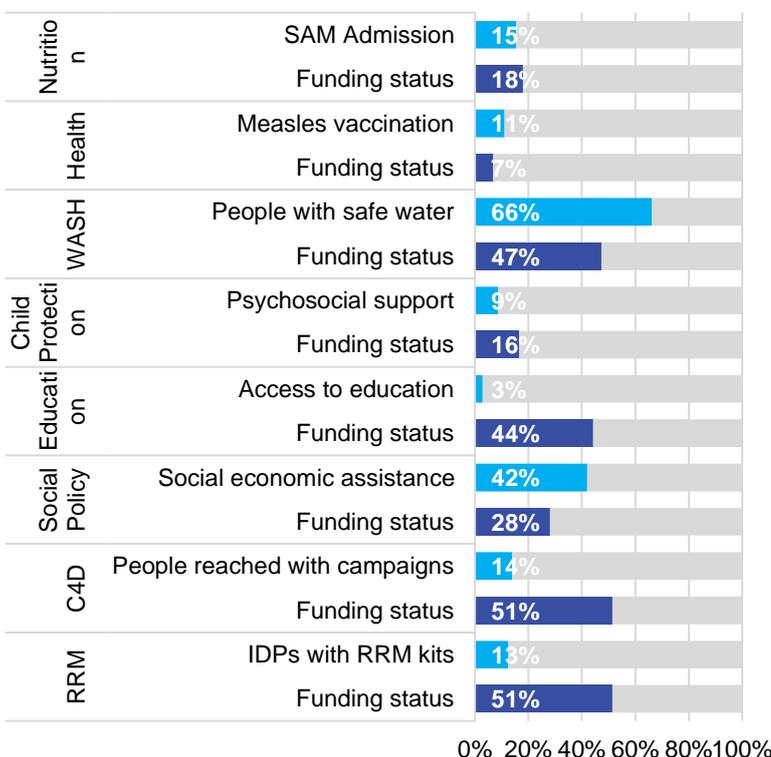
**20.7 million**  
people in need

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

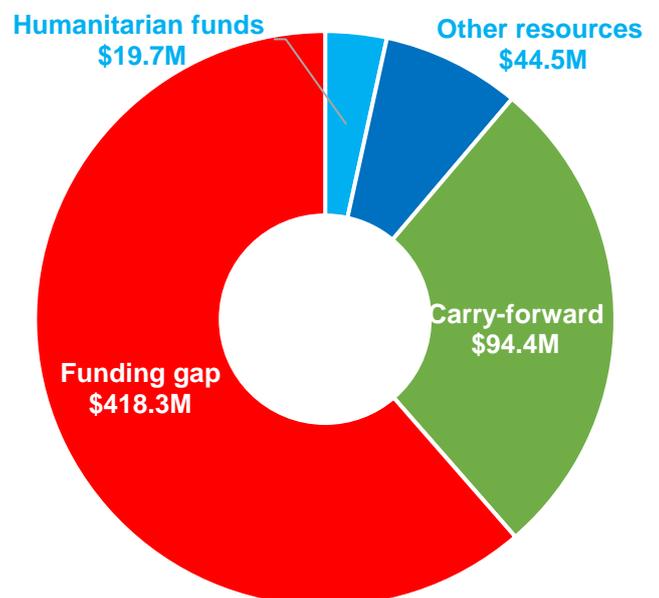
## Highlights

- The humanitarian situation in Ma'rib continued to be of concern, and with various waves of violence during the reporting period, the situation showed no signs of improvement. People's lives remained to be impacted every day by fighting, and thousands were being displaced from their homes and displacement sites. Conflict continued as well as in Al Hodeidah, Taizz, and Al Jawf.
- In March, 30,317 IDPs were displaced, with the majority of displacement waves coming from Ma'rib, Al Hodeidah, Taizz and Al-Jawf, as internal displacement within governorates towards safer districts increased.
- The Rapid Response Mechanism (RRM) reached an additional 3,500 newly displaced families, 2,200 families of which were in Ma'rib (24,500 individuals). Beneficiaries received RRM kits that included food, family basic hygiene kits, and female dignity kits.
- As of 5 April 2021, there were 4,798 COVID-19 officially confirmed cases in Yemen, with 946 associated deaths and 1,738 recovered cases (resulting in a 19.7 per cent confirmed fatality rate). 382 suspected cases were health workers, or 4.78 per cent of the total cases.

## UNICEF's Response and Funding Status



## Funding Status 2021 Appeal: \$576.9M



## Funding Overview and Partnerships

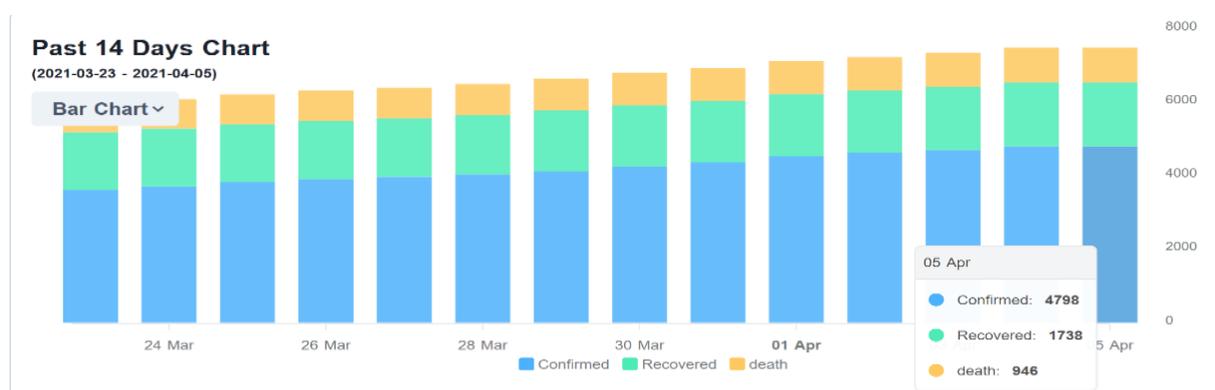
The Yemen Humanitarian Action for Children (HAC), which is currently aligned to the 2020 Yemen Humanitarian Response Plan (YHRP), appeals for \$576.9 million in 2021. The COVID-19 response is integrated into programmes planned within the HAC, which is expected to be revised with the release of the YHRP 2021 in the coming months. A total of \$94.4 million was carried forward from 2020, with an additional \$44.5 million in other allocations<sup>1</sup>. While UNICEF is actively fundraising for its 2021 HAC appeal, \$19.7 million has been received as of 31 March, for a total of \$158.6 million funds against the HAC. This leaves a funding gap of \$418.3 million required to continue UNICEF's lifesaving work in Yemen. The generous contributions received during the reporting period came from the governments of Slovenia, Japan, Denmark, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), the United States Fund for UNICEF, and the United Kingdom, Netherlands, Spanish, Japan, Canadian, Finnish, German, and Austrian Committees for UNICEF.

## Situation Overview & Humanitarian Needs<sup>2</sup>

21 March marked the sixth anniversary of the conflict. The country remains the worst humanitarian crisis in the world, with 20.7 million people – 71 per cent of the total population – in need of humanitarian assistance. The conflict has left three million people, including 1.58 million children, internally displaced. 138,000 additional people have become migrants and 137,000 people are seeking asylum abroad.

While UNICEF vigorously continues its nutrition interventions, severe acute malnutrition (SAM) continues to plague children under five, with more than 395,195 children suffering from SAM in Yemen and 2.25 million children facing acute malnutrition according to the Integrated Food Security Phase Classification (IPC). Nutritional needs continued to rise throughout March, and the lack of funding for emergency WASH interventions continues to threaten to undermine the integrated response. More than 15.4 million people urgently needed assistance to access WASH services. This shortfall has also heightened the risk of COVID-19 as well as waterborne diseases, including cholera and malnutrition. Approximately 20.1 million people still need health assistance. Women and children continue to be disproportionately affected, with 4.8 million women and 10.2 million children needing assistance to access health services during the reporting period.

As of 5 April 2021, there were 4,798 COVID-19 officially confirmed cases in Yemen, with 946 associated deaths and 1,738 recovered cases, resulting in a 19.7 per cent confirmed fatality rate (CFR). 382 suspected cases were health workers or 4.78 per cent of the total cases.



The COVID-19 pandemic has resulted in global shortages of COVID-19 supplies (e.g. personal protective equipment (PPE) and ventilators) and supply chain disruptions, putting additional pressures on the fragile health system and already poor healthcare infrastructure in Yemen. The pandemic's effect on children's access to education continued to suffer during March. More than 2.2 million children in Yemen continue to be out-of-school since the beginning of the conflict in 2015. While schools are now open, an additional 1.4 million children who had their education disrupted due to school closures in 2020 as a result of COVID-19 continue to require additional support. The increased vulnerability of children and women to exploitation, violence, abuse, child labour, domestic and gender-based violence and child marriage remains a major problem in Yemen and continues to affect progress on outcomes for children.

<sup>1</sup> "Other allocations" include other regular resources against the HAC 2021.

<sup>2</sup> The figures on people in need come from the 2021 Humanitarian Needs Overview (HNO). The 2021 UNICEF Yemen HAC will be revised during the second quarter to align to the new Yemen Humanitarian Response Plan and HNO.

Immunization coverage saw gains with the first phase of the second round of Integrated Outreach service delivery points in Sa'ada governorate reaching a total of 95,369 children. This brought the total number of children throughout the country receiving lifesaving vaccinations<sup>3</sup> to 284,326 throughout the reporting period. UNICEF continues to closely coordinate with the Ministry of Public Health and Population (MoPHP) to ensure the implementation of at least the second integrated outreach round (IOR) before June 2021 and 2-3 rounds of IOR in the second half of 2021. Meanwhile, discussions are ongoing with MoPHP to implement measles and diphtheria outbreak response activities, based on the availability of funds.

During the month of March, the UN Country Task Force on Monitoring and Reporting (UNCTFMR) documented 24 incidents of grave violations against children, of which 92 per cent of the incidents were verified. The majority of verified violations this month were identified as child casualties, including 12 children killed (25 per cent girls), and incidents of maiming of 37 children (24 per cent girl) by various parties to the conflict. There were no verified cases of recruitment or use of children, nor rape this month. Attacks on one school and one hospital were verified, as well as one case of abduction (one boy). Most of the incidents documented and verified were in the governorates of Taizz (nine) and Al Hodeidah (four), reflecting the continuing intense fighting along frontlines in these areas. These are only figures that the UN has been able to verify to date; the actual number of incidents may be higher.

## Summary Analysis of Programme Response

### AWD/Cholera Response

Between 1 January – 23 of March 2021, 13,013 AWD/cholera suspected cases and two associated deaths were reported, with a 0.02 per cent CFR, which is a significant decrease compared with the same period of 2020 (87,501 suspected cases and 26 associated deaths with a 0.03 per cent CFR). The available data shows that the cholera trends are still stable, as no cases were reported during the last two months. However, UNICEF is closely monitoring cholera suspected cases and associated deaths.

UNICEF supported 207 (out of 321) Oral Rehydration Centres (ORCs), and 35 (out of 234) Diarrhoea Treatment Centres (DTCs) in 68 districts in 11 governorates. The reported acute watery diarrhoea (AWD)/suspected cholera cases reduced by over 74 per cent compared to 2020. UNICEF continued to support case management of the persisting cases in March. Around 1,320 AWD drug periphery kits and 164 renewable kits were delivered to 23 Governorate Health Offices (GHOs) to support the work in all the supported DTCs/ORCs.

### Health and Nutrition

In response to the COVID-19 crisis, Yemen received 360,000 COVID-19 vaccine doses shipped via the COVAX Facility, a partnership between the Coalition for Epidemic Preparedness Innovations (CEPI), Gavi, the Vaccine Alliance, UNICEF and the World Health Organization (WHO).

As part of the effort to ensure the continuity of services provided in the COVID-19 context, by the end of March 2021 a total number of 7,804 staff (out of the accumulative planned 20,000) were oriented on infection prevention and control (IPC). PPE was provided to 43,805 healthcare providers in 3,376 health facilities throughout 286 districts within 23 governorates. 64 triage areas were established and supported by UNICEF in four governorates in the north (Amanat Al Asimah, Dhamar, Amran, and Ma'rib). 60 triage areas were established and supported in 10 governorates in the south (Aden, Abyan, Lahj, Al-Dhale, Taiz, Shabwah, Al-Mukalla, Sayu'n, Al-Maharah, and Socotra). During March, 29,995 cases were screened for COVID-19 (52 per cent female), and 556 suspected cases were referred for treatment (46 per cent female).

The first phase of the second round of Integrated Outreach (IOR) was implemented in the Sa'ada governorate on 1-8 March. As a result, a total of 29,580 children under five years of age were vaccinated against polio; 59,609 children aged 6 months – 15 years were vaccinated against Measles, and 6,180 children aged six weeks – 15 years were vaccinated against Diphtheria.

Vaccination services continued through routine, outreach and mobile team service delivery strategies, and a total of 73,020 children under the age of one received their third dose of pentavalent. 76,310 of the targeted children received their first doses of the Measles Containing Vaccine (MCV1). In addition, 41,290 women of childbearing age (CBA) 15-49

<sup>3</sup> These vaccines included: pentavalent, Measles Containing Vaccine (MCV1), and tetanus-containing vaccine (TCV).

years old received the tetanus-containing vaccine (TCV). A total of 55 Solar direct-drive (SDD) refrigerators were installed in March, for a total of 255 SDDs installed since the beginning of the year.

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 in the whole country as well as the 209 districts that were classified as deteriorating in the last Integrated Food Security Phase Classification/ Acute Malnutrition (IPC/AMN) analysis. Since the beginning of the year and through an average nationwide reporting rate of 88 per cent, a total of 857,310 children under 5 years were screened for malnutrition through all interventions. Out of these, 44,683 children with severe acute malnutrition (SAM) were admitted for treatment without complication with an 88.8 per cent of cure rate. On the prevention side, 233,562 children received deworming tablets, 300,280 children received micronutrient sprinkles, and 10,499 children reached with Vitamin A. In addition, a sum of 157,145 mothers received Iron Folate supplementation, and 321,729 mothers received infant and young child feeding (IYCF) consultation.

In line with the acceleration plan, 73 mobile teams have been supported, and Mid-Upper Arm Circumference (MUAC) screening campaigns were conducted in 24 districts, with 217,958 children screened and 26,045 referred for treatment. The Ministry of Public Health and Population (MOPHP) in the north continues to insist on using weight and height for treatment admission of acute malnutrition, with the application of infection prevention controls (IPC), while MOPHP in the south has agreed to continue to use MUAC criteria for admission in light of the increase in the number of COVID-19 cases.

UNICEF will continue scaling up nutrition interventions while progressively phasing in multi-sectoral activities which address other drivers of malnutrition (such as lack of water, sanitation and hygiene services), both at the community and health facility levels.

The 2020 cluster coordination performance monitoring (CCPM) national validation workshop was conducted in March 2021. During this workshop, the performance monitoring of the seven cluster functions was done for Sana'a and Aden. An action plan to address the cluster coordination related gaps from the seven core cluster functions was developed. Meanwhile, the 2021 nutrition cluster annual work plan was prepared during a workshop involving all partners. A hub level multi-sectoral coordination forum was formed in four hubs (Sa'ada, Ibb, Sana'a and Hodeidah) to scale up responses in the 192 districts that were classified as having deteriorating nutrition situations.

### **Water, Sanitation and Hygiene (WASH)**

During the reporting period, UNICEF supported the distribution of 1,576,492 litres of fuel, targeting 33 Local Water and Sanitation Corporations (LWSC) in 14 governorates for the operationalization of water supply pumping systems. A total of 2.4 million people will benefit daily from the provision of safe water supply through UNICEF's support.

Rapid Response Teams (RRTs) commenced work in Al-Baidah, Dhamar, Amran and Al-Amanah governorates to respond to cholera and nutrition cases. UNICEF supported Training of Trainers (ToT) for 20 participants selected from northern governorates at the national level to rolling out training on the implementation of integrated WASH responses to address malnutrition, Cholera/AWD, and other WASH-related outbreaks. The training was also used to introduce the new roles and responsibilities of RRTs as well as new activities they will cover under their new name which is "Crisis and Disaster Response Sustainable Committees (CDRSC)".

As part of the integrated nutrition response in the south, UNICEF WASH response prioritized nine districts in Aden, Lahj and Hadramout governorates to scale up the multisectoral nutrition response, focusing on 110 communities in urban and rural areas that have the highest SAM cases. Planning of activities for the remaining priority districts are ongoing within the WASH cluster to ensure no duplication of activities. Additional resources for the integration of behaviour change activities, including the distribution of Non-Food Items (NFI) have been finalized.

Technical assessments of 30 outpatient therapeutic programmes (OTPs) in Hadramout governorate were completed by the General Authority for Rural Water Supply Projects (GARWSP), which will determine any changes needed to improve WASH facilities. The technical assessment for 10 water supply projects and additional OTPs in communities with high WASH severity scores (as a result of high numbers of Cholera and SAM cases) are ongoing.

Throughout March, UNICEF continued to support water trucking, the chlorination of trucked water, and the monitoring of water quality at all water distribution points, benefitting 1,800 IDPs in Dhamar, 6,164 IDPs in Amran, Al Qafalh, Khamir

and districts in Amran Governorate, 127,897 IDP's in Abs, Kua'aydenah, Aslam Hajjah, Al-Zuhrah and Al-Qanawis districts in Hodeidah Governorate, and 20,279 in Al-Hazm, Al-Maton, Al-Ghayl, Al-Maslub and Al-Khaleq districts in Al-Jawf governorate. In addition, UNICEF supported the implementation of the water quality monitoring program targeting Al Wadi, Siryah, and Ma'rib city in partnership with the National Water and Sewerage Authority (NWSA). This intervention included the collection of random water samples from water distribution points in IDP camps, private wells, water tankers, and drinking water stations. The physical, chemical and bacterial parameters of these samples were then tested. Water contamination is being tracked and any pollution or deviation from acceptable standards are being reported to concerned WASH partners for proper corrective actions including the chlorination of water sources and collection points. A total of 126,282 people (60,000 host communities (HC) + 66,282 IDPs) will benefit from this project in Ma'rib. In the south, UNICEF provided chlorine powder for the chlorination for 1,800 cubic metres of water and monitored the free residual chlorine (FRC) to maintain within the acceptable quality standard (0.2-0.5mg/litre). These efforts benefited 100,000 people in Al Ghaydah district in Alahara'a governorate.

In the south, the Rapid Response Teams (RRTs) started the comprehensive risk assessment targeting the districts with the highest cases of cholera to identify the specific risk factors and provide a more targeted response in these villages and communities. In partnership with the Emergency Unit of the Ministry of Water and Environment (MWE) in the south, UNICEF continued to support the WASH response in eight governorates using the RRTs. During March, a total of 1,028 cases were reported and a total of 141,235 people were reached with integrated hygiene awareness messages. Beneficiaries were also provided 7,981 consumable hygiene kits (CHKs), 2,276 jerrycans, and disinfectants (120,200 tabs of 33mg/l aqua tabs, 222,300g of chlorine powder, and 17,363 tabs of 1.67g aqua tabs) for the treatment of water in the household. In addition, 4,533 CHKs and 2,468 basic hygiene kits (BHKs) were distributed in Al Jawf governorate with UNICEF's support, benefitting 31,395 people (19,173 in Al-Hazm, 10,521 in Al-Khalq, and 1,701 in Al-Maton) and 17,276 people (3,628 girls, 3,282 boys, 5,356 women and 5,010 men) respectively. The construction of 150 latrines in Al-Hazm and Al-Ghayl districts in Al-Jawf governorate with UNICEF provided access to adequate sanitation to 1,414 beneficiaries.



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### Child Protection

Despite the ongoing challenges caused by the COVID-19 pandemic, 37,239 conflict-affected people, including 37,195 children (52 per cent girls) and 44 adults (59 per cent female) were reached through mine risk education (MRE) activities in Ma'rib and Shabwah governorates. MRE was delivered in schools and child-friendly spaces, as well as through community campaigns with COVID-19 preventative measures.

Through a network of fixed and mobile child-friendly spaces, UNICEF supported children in overcoming the immediate and long-term consequences of exposure to violence. In particular, UNICEF provided psychosocial support services (PSS) to 21,154 people, including 19,903 children (39 per cent girls) and 1,251 adults (49 per cent female) across seven governorates (Aden, Al Jawf, Ma'rib, Raymah, Sa'ada, Shabwah, and Taizz).

Through the case management programme, UNICEF continued to support the referral and provision of critical services for the most vulnerable children. 817 children (33 per cent girls) were identified by trained case managers, out of which 658 children (33 per cent girls) received more than one service.

The child protection (CP) Area of Responsibility (AoR) contributed to Ma'rib's inter-cluster response plan by ensuring that the needs of children and gaps in the response were addressed in Ma'rib. The CP AOR continues to work with child protection actors and integrated community case management providers to ensure that coordination is in place in Ma'rib as the humanitarian situation deteriorates. During the reporting period, 24,871 children and primary caregivers in Ma'rib were provided with community-based mental health and psychosocial support. The CP AoR will continue to work with other key sectors such as education, nutrition, health among others to ensure that response to children's needs will be integrated into other sectors' responses.

## Education

UNICEF continued its multi-pronged strategy to ensure the continuity of learning for all children in Yemen. Due to the increase of COVID-19 cases, the Ministry of Education (MoE) in Aden and Sana'a adjusted the school calendar to finalize education activities earlier than it had in past years. UNICEF is collaborating with MoE to support the national examination for grades 9 and 12 across all governorates in Yemen. In addition, as a preparedness measure, UNICEF supported the training of 32 trainers (1 per cent female) in the Ibb governorate on safe school protocols. In the southern region, UNICEF, in collaboration with the Training Unit of the MoE, revised three of the teachers' preparedness manuals on a) safe school in emergencies, b) COVID-19 and c) WASH in school guidance for students. Once endorsed, these manuals will be included in training packages for teachers to build their capacities to respond to the changing operating environment amidst the COVID-19 pandemic.

The Education cluster trained 97 partners on the HRP framework on why and how to report activities. A response plan was developed as the conflict escalated in Ma'rib, affecting more than 30,000 internally displaced school-aged children.

## Social Protection and Inclusion

As part of preparing beneficiaries for the Humanitarian Cash Transfer Project (HCTP), a total of 7,116 identifications (IDs) of registered children with disabilities (CWDs) were distributed in Amanat Al-Asimah, Sana'a and Ibb governorates in March. Through this distribution of IDs, CWDs will be able to benefit from the upcoming cycle of the HCTP.

The third cycle of Cash Plus continued, reaching 6,023 households (HHs) and 42,836 individuals in the three targeted districts (Ma'ain in Amanat Al Asimah, and Bani Hushaysh and Jihanah in Sana'a governorate) which are IPC priority districts. Overall, the cumulative number of beneficiaries reached since January 2021 is 8,774 households and 62,994 family members. These beneficiaries were reached by Case Referral Officers (CROs) who assessed their needs and provided them with Cash Plus services either through direct support or referrals to services.

CROs assessed that 7,258 children required MUAC measurements, 399 children required vaccinations, 136 children showed signs of malnourishment, and one child required treatment at a health centre for cholera. 7,980 children were referred to the Civil Registration Authority (CRA) where 44 per cent of them (3,515 children) received their birth certificates. CROs, with support from UNICEF, are following up with the CRA to ensure the remaining referred children receive their birth certificates. 30,626 cases were provided with awareness messages on COVID-19 protection and hygiene practices.

In addition, the UNICEF health and nutrition programmes are coordinating to refer 14,522 women and children to healthcare service providers, including 2,137 cases in need of folic acid, 6,313 in need of micronutrient supplements, and 6,072 cases in need of deworming treatment.

20 Handicap Care and Rehabilitation Fund (HCRF) employees received training of trainers (ToT) from UNICEF on the case management system. These trainers will train case managers on the case management system that will be established at HCRF. The system aims to enhance the accessibility of Persons with Disabilities (PWDs) - especially Children with Disabilities (CWDs) - to services provided by the HCRF and other organizations.

As part of the scale-up of the Integrated Model of Social Economic Assistance (IMSEA) community engagement component, UNICEF initiated institutional capacity development trainings for 8 Community-Based Organizations (CBOs) working with Muhamasheen groups living in slums in Amanat Al Asimah. 28 participants received training called "Social protection, strategic planning, reports writing, budget preparations, project proposal writing, institutional building, project monitoring and evaluation, community mobilization and life skills (resilience, problem-solving, self-management)". Two community initiatives - hand washing and the importance of education - were conducted by the trained adolescents who were equipped with the knowledge and necessary skills last November to be agents of change within their communities in two slums (Bab Sabah and Al Moa'me in Amanat al Asimah). Around 1,550 households benefited from these initiatives. Under the social services pillar, the Social Policy section (with technical support from the WASH team and Sana'a Field Office), installed 34 water tanks to benefit 9 slums (around 4,822 households in Amanat Al Asimah) with clean water.

## Communication for Development (C4D)

In collaboration with the government and NGO partners, UNICEF continued Risk Communication and Community Engagement (RCCE) support for COVID-19 prevention interventions across Yemen.

Community volunteers, including religious leaders, continued engagement with communities while adhering to physical distancing guidelines, reaching 207,537 people with COVID-19 messages through a variety of interpersonal communication activities.

RCCE interventions to support the integrated shielding initiative continued in three districts in Aden Hub, providing populations and high-risk households with the information and skills to adopt COVID-19 prevention practices to reduce human to human transmission and to protect the highest risk family members from infection. Volunteers were trained and mobilized to facilitate community engagement in the target districts, reaching 8,800 people through 1,500 house-to-house visits.

With the evolution of the COVID-19 situation and the need for timely information to guide RCCE efforts, the third round of the COVID-19 Rapid assessment was conducted this month to measure awareness, attitudes, risk perceptions, and the adoption of prevention practices. It also assessed COVID-19 vaccine hesitancy. The assessment was administered by partners in 22 governorates, utilizing quantitative and qualitative methodologies. The findings from the assessment will inform messaging on the COVID-19 vaccine and RCCE interventions. For example, only one-quarter of participants indicated that they would take the vaccine to prevent COVID-19. Of those who responded 'no' or 'not sure', the majority indicated they would be motivated to take the vaccine if they were assured of its safety or had the clear endorsement of the vaccine by "official health authorities".

As part of the integrated multi-sectoral response to malnutrition in Yemen, members of mother-to-mother clubs and religious leaders in the south were mobilized to engage with communities to promote positive nutrition practices and increase demand for health and nutrition services. Mass media support was provided for this intervention by 22 community radios stations which aired nutrition messages through flashes, public service announcements and discussion programmes, reaching an estimated 4 million people. Communication materials, Qur'an bookmarks, and Ramadan calendars branded with COVID-19 and nutrition messages were printed and disseminated to an estimated 150,000 people.

### **Rapid Response Mechanism**

The humanitarian situation in Ma'rib continued to be of concern, and with various waves of violence during the reporting period, the situation showed no signs of improvement. People's lives continued to be impacted every day by fighting, and thousands were being displaced from their homes and displacement sites. Conflict continued as well as in Al Hodeidah, Taiz, and Al Jawf.

Humanitarian access to some of the most vulnerable communities near conflict points remained a challenge. In March, according to the Rapid Response Mechanism (RRM) IDPs tracker, around 30,317 people were displaced. The majority of displacement occurred in Ma'rib, Al Hodeidah, Taizz and Al-Jawf as people fled to safer districts. UNICEF, along with UNFPA and WFP, continues to reach displaced populations at frontlines with first-line response packages. RRM reached an additional 3,500 newly displaced families (24,500 individuals), of which 2,200 families were in Ma'rib in March, with RRM kits that included essential hygiene items and other supplies, including food, family basic hygiene kits, and female dignity kits. RRM kits are designed to meet the most critical and immediate needs of displaced families as they are uprooted suddenly from their homes.

### **Supply and Logistics**

The movement of supplies from northern to southern Yemen remained a challenge during the reporting period as movements are subjected to exceptional approvals through the Supreme Council for the Management and Coordination of Humanitarian Affairs (SCMCHA) for supplies distributed from UNICEF warehouses.

UNICEF is assessing the possible resumption of cross-border in-land transportation from Salalah to Sana'a, in parallel with sea shipments via Hodeidah. Both the WFP and WHO continue to use this route. In addition, with the Supply Division's support, UNICEF is assessing the possible use of Jeddah to Hodeidah port via WFP's Bilateral Service Provision (BSP) to decongest the port YCO pipeline.

## Humanitarian Leadership, Coordination and Strategy

The humanitarian strategy remained the same as written 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](#). The Humanitarian Response Plan was finalized in March, and the Humanitarian Needs Overview for 2021 is being finalized. UNICEF's strategy will be updated as needed to align with both.

## Human Interest Stories and External Media

Outside the Walls: Helping hard-to-reach populations meet their medical needs.



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UNICEF staff conduct field visits to remote areas with the Outside the Walls team to provide vaccination for children and women, and vitamin supplements to children and pregnant and lactating women (PLW) who are malnourished, as well as to educate women on family planning methods and nutrition.

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

### External Media

#### [Screening malnourished children in Socotra](#)



#### [2<sup>nd</sup> Round of oral cholera vaccination campaign in Al Dhale](#)



#### [World Water Day](#)

#ForEveryChild, Clean Water

### Next SitRep: 31 May 2021

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# Annex A

## Summary of Programme Results<sup>4</sup>

Sector	Overall Needs	UNICEF and IPs response			Sector response		
		2021 target	Total results	Change since last report	2021 target	Total results	Change since last report
<b>Health</b>							
Number of children aged 0 to 12 months vaccinated against measles	20,100,000	972,142	107,664	76,310			
Number of children aged 6 to 59 months vaccinated against polio		5,535,816	- <sup>5</sup>	N/A			
Number of children and women accessing primary health care in UNICEF-supported facilities		2,500,000	419,644	232,858			
Number of health care facility staff and community health workers provided with personal protective equipment		25,000	10,763	701			
<b>Nutrition</b>							
Number of children aged 6 to 59 months with severe acute malnutrition admitted for treatment	325,000	289,402	44,683	26,045	320,108	44,683	26,045
Number of children aged 6 to 59 months receiving vitamin A supplementation every six months	4,766,718	1,800,000	10,499	5,366	4,633,443	10,499	5,366
<b>Child Protection, GBVIE &amp; PESA</b>							
Number of children and caregivers accessing mental health and psychosocial support	8,600,000	900,000	78,357	21,154	990,000	85,250	24,871
Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions		6,100,000	- <sup>6</sup>	N/A			
Number of people with access to safe channels to report sexual exploitation and abuse		500,000	- <sup>7</sup>	N/A			
Number of children accessing explosive weapons-related risk education and survivor assistance interventions		2,160,000	225,910	37,195			
<b>Education</b>							
Number of children accessing formal and non-formal education, including early learning	8,100,000	850,000	24,472	5,004	790,750	113,704	45,532
Number of children receiving individual learning materials		850,000	100,219	- <sup>8</sup>	872,000	160,482	32,796
Number of schools implementing safe school protocols (infection prevention and control)		1,000	229	28	4,600	456	244
Number of teachers receiving teacher incentives each month		160,000	- <sup>9</sup>	N/A	181,603	8,777	1,351
<b>Water, Sanitation &amp; Hygiene<sup>10</sup></b>							
Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	15,400,000	6,800,000	4,497,424	2,877,475	8,826,986	1,741,901	39,178
Number of people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services		5,910,000	540,387	513,871	4,529,704	301,711	42,293

<sup>4</sup> These figures reflect the current 2021 HAC.

<sup>5</sup> No progress has been made as the planned Polio campaign in the northern governorates was delayed by MoPHP. UNICEF and WHO are following up with MoPHP on implementation.

<sup>6</sup> PMR and CP sections are currently working on a reporting template to systematise sectors the monthly data collection against this cross sectoral indicator. Once the tool is finalised, compiled data (from January) will be reported.

<sup>7</sup> PMR and CP sections are currently working on a reporting template to systematise sectors the monthly data collection against this cross sectoral indicator. Once the tool is finalised, compiled data (from January) will be reported.

<sup>8</sup> The distribution of learning materials for children was finalized for this academic year. During the summer school break, UNICEF will prepare the distribution of learning materials for the next academic year.

<sup>9</sup> This number represents results only from a project implemented in the south of the country. The larger programmes on teacher incentives, which include performance-based payments and Rural Female Teachers, have not taken place yet. They will start being implemented in June.

<sup>10</sup> Cluster figures have been amended to reflect only the aggregated numbers from the various clusters, not including UNICEF cumulative figures. These will therefore appear lower initially but avoid double counting.

Number of people in humanitarian situations reached with messages on appropriate hygiene practices		5,910,000	491,737	491,737	5,767,919	221,269	20,711
Number of people in humanitarian situations accessing safe means of excreta disposal		3,400,000	1,426,281	26,286			
<b>Social Protection &amp; Cash Transfer</b>							
Number of households reached with humanitarian cash transfers across sectors		30,000	- <sup>11</sup>	-			
Number of people benefiting from emergency and longer-term social and economic assistance		150,000	62,994	42,836			
<b>C4D, Community Engagement &amp; AAP</b>							
Number of people participating in engagement actions for social and behavioural change		8,000,000	1,119,487	440,153			
<b>Rapid Response Mechanism</b>							
Number of vulnerable displaced people who received Rapid Response Mechanism kits		500,000	62,685	24,500			

<sup>11</sup> During the first quarter, UNICEF prepared for the cash transfer cycle 2 by completing registration and verification of beneficiaries including Children with Disabilities in Amanat Al Asimah, Sana'a, and Ibb, as well as distribution of IMSEA beneficiaries' ID cards in Aden governorate. Data will be available in the second quarter.

## Annex B

### HAC Funding Status<sup>12</sup>

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other Allocations Contributing Towards Results (\$) <sup>13</sup>	Resources available from 2020 (Carry-over)	\$	%
Health	158,351,425	604,647		10,133,889	147,612,889	93%
Nutrition	119,875,460	5,543,545		15,996,212	98,335,703	82%
Child Protection, GBViE & PSEA	48,223,500	1,612,517	752,354	5,573,974	40,284,655	84%
Education	92,712,000	5,312,486	15,465,561	20,178,156	51,755,797	56%
WASH	120,571,656	2,267,688	28,278,451	26,437,754	63,587,763	53%
Social protection & cash Transfers	11,300,000	1,220,535		1,953,509	8,125,956	72%
C4D, Community Engagement & AAP	12,320,000	4,475		6,323,936	5,991,589	49%
Rapid Response Mechanism	6,500,000	537,340		2,801,112	3,161,548	49%
Cluster Coordination	7,000,000	2,543		249,773	6,747,684	96%
Being Allocated	0	2,623,054		4,725,151	-7,348,205*	
<b>Total</b>	<b>576,854,041</b>	<b>19,728,831</b>	<b>44,496,366</b>	<b>94,373,466</b>	<b>418,255,379</b>	<b>73%</b>

\*The budget is available however has yet to be allocated to the specific sector at this time.

<sup>12</sup> Funds Available' as of 31 March 2021 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.

<sup>13</sup> 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 2021HPM results.