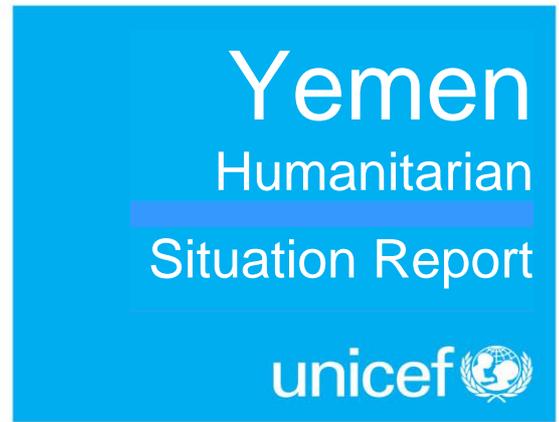




©UNICEF Yemen/2019/Mahmoud AlFalastini. A ten-year-old boy displaced from Al Hudaydah to Aden where he lives in an IDP camp. "Before the conflict I used to live with my father and mother in our home in Al Hudaydah. After the conflict, I got some friends here from the child friendly space implemented by UNICEF. The most thing I miss is my home, school and friends. My dream is to back to my home in Al Hudaydah".



Highlights

- Between January and September 2019, there have been 687,135 acute watery diarrhoea (AWD)/cholera suspected cases and 898 associated deaths recorded. In September, UNICEF vaccinated 1.1 million people with the second dose of oral cholera vaccination (OCV) in three high-risk districts in Amanat Al Asimah; this number accounts for 93 per cent of the campaign's target, a record achievement.
- In September, 22 children (11 girls and 11 boys) were killed, and 39 children (11 girls and 28 boys) were injured by various parties to the conflict, according to the United Nations Country Task Force on Monitoring and Reporting.
- Between January and September 2019, 215,578 children under five (67 per cent of annual target) with severe acute malnutrition (SAM), received treatment through fixed and mobile outpatient therapeutic programmes (OTPs).
- In September, more than 600,000 people, including host communities and internally displaced persons, accessed safe drinking water through the operation and maintenance of the water supply systems.
- 32,292 people including 27,537 children in 16 governorates received psychosocial support through a network of fixed and mobile child friendly spaces to help them overcome the immediate and limit long-term consequences of their exposure to violence.

September 2019

- 12.3 million**
of children in need of humanitarian assistance (estimated)
- 24.1 million**
of people in need (OCHA, 2019 Yemen Humanitarian Needs Overview)
- 1.71 million**
of children internally displaced (IDPs)
- 4.7 million**
of children in need of educational assistance
- 357,487**
of children under 5 suffering Severe Acute Malnutrition (SAM)
- 17.8 million**
of people in need of WASH assistance
- 19.7 million**
of people in need of basic health care

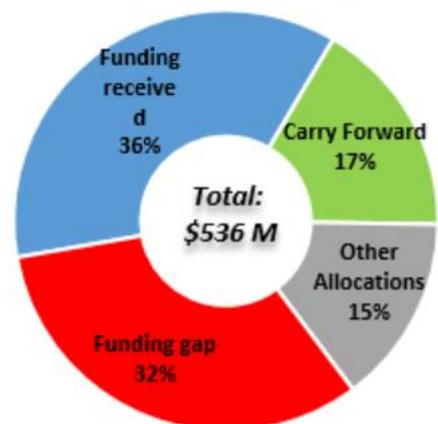
UNICEF Appeal 2019

US\$ 536 million

Funding Available*

US\$ 341 million

Overall 2019 Funding Status



*Funds available includes funding received for the current appeal (emergency and other resources), the carry-forward from the previous year and additional funding which is not emergency specific but will partly contribute towards 2019 HPM results.

UNICEF's response with partners	UNICEF		Sector/Cluster	
	UNICEF Target	Jan - Sep 2019 Results	Cluster Target	Jan - Sep 2019 Results
Nutrition: Number of targeted children 0-59 months with Severe Acute Malnutrition admitted to therapeutic care	321,750	215,578	321,750	215,578
Health: Children from 6 months - 15 years vaccinated in MR campaigns	13,032,803	11,837,521		
WASH: Number of people having access to drinking water	6,000,000	6,079,185	7,288,599	6,643,555
Child Protection: Number of children and caregivers in conflict-affected area receiving psychosocial support	794,825	427,248	882,268	507,273
Social Policy: Number of targeted marginalized/excluded benefiting from emergency and longer-term social and economic assistance (through case management)	175,000	100,854		

*Explanation for results vs. targets are available in the Humanitarian Performance Monitoring (HPM) table at the end of the Situation Report.

Situation Overview & Humanitarian Needs:

In September, numerous incidents continued to occur across the country highlighting the ongoing conflict and volatility of the context. On 1 September, airstrikes hit a former community college compound in Dhamar city, where 170 prisoners were being held in a detention facility in the compound. More than 100 people were killed from the airstrikes. On 13 September, shelling in Al Hudaydah killed 11 people including seven children¹. On 23 September, airstrikes hit a mosque in Al Sawad in Amran governorate and killed seven people including women and children from the same family. On the next day, 15 people were killed, and 15 people were injured by airstrikes that hit a house in Al Fakhir in Al Dhale'e governorate².

During the reporting period, the United Nations Country Task Force on Monitoring and Reporting verified 88 per cent of reported incidents, including 22 children (11 girls and 11 boys) killed, and 39 children (11 girls and 28 boys) injured, perpetrated by various parties to the conflict. Most of the incidents documented and verified were in the governorates of Al Hudaydah followed by Al Dhale'e and Al-Byda'a. So far in 2019, 699 children (202 girls and 497 boys) were killed or maimed by various parties to the conflict. Child casualties recorded between January and September 2019 decreased by 47 per cent compared to the same period of 2017 (1,315 children; 292 girls; 1,020 boys; 3 unknown gender).

Since the second wave of acute watery diarrhoea (AWD)/cholera outbreak on 27 April 2017, the cumulative total of suspected cholera cases as of 30 September 2019 reached 2,091,442 with 3,656 associated deaths (case fatality rate [CFR] 0.17 per cent). Suspected cholera cases have increased since the start of 2019, with 320 out of 333 districts reporting suspected cases. Between January and September 2019, there have been 687,135 suspected cases and 898 associated deaths recorded (CFR 0.13 per cent)³. Thanks to the enormous efforts done by all the humanitarian partners to respond to this epidemic, the weekly number of deaths associated to AWD was divided by 3.6 between the week 14 that has recorded the highest number of cases in 2019 and the week 39 that corresponds to end of September. The average weekly case fatality rate is remained at a low level, around 0.08 per cent in average, since beginning of May. The proportion of children under 5 years represented 18 per cent of cases at the 2019 epidemic peak versus 30 per cent of cases end of September. This change in the age distribution of cases may reflect a switch in the predominant etiological cause of the AWD, that may not be all cholera cases. While children under five representing 25 per cent of the total suspected cases, the elderly are most seriously affected where deaths are higher among the people over 60 indicating possible comorbidity causes. The suspected cases (85,965) in September 2019 were increased by 25,731, comparing to September 2018; however, the associated deaths were decreased from 107 in September 2018 to 81 in September 2019.

Humanitarian Leadership and Coordination:

Nutrition Cluster⁴

During the January to August reporting period, Nutrition Cluster partners treated a total of 215,578 children with SAM that were enrolled in 3,159 OTP sites. This represents 67 per cent of the revised annual cluster target (321,750) and 60 per cent of the annual caseload (357,487) with an overall 85 per cent⁵ of reporting rate. The number of SAM admissions in 2019 decreased from 221,931 during the same reporting period in 2018 to 215,518 in 2019, due to the low reporting rate.

376,148 moderately acutely malnourished (MAM) children, 40 per cent of the 2019 Nutrition Cluster target (937,878) were enrolled in 2,179 Targeted Supplementary Feeding Programme (TSFP) sites. The admission rate of children under five with MAM (376,148) is 4.5 per cent higher than those reported during the same period in 2018 (359,832). Moreover, the number of moderately malnourished pregnant and lactating women (PLW) enrolled in TSFP reached 57 per cent of the annual target of 639,210 between January and August 2019. More PLWs with moderate acute malnutrition have been admitted in 2019 (366,040) compared to the same period in 2018 (265,110). The increase in MAM admissions for children and PLWs could be associated with expansion of TSFP services that increased from 107 districts in 2018 to 139 in 2019. The Blanket Supplementary Feeding Programme (BSFP) coverage for under two children stood at 63 per cent of the annual target (458,732) in 139 districts out of the planned 165⁶.

WASH Cluster

The WASH cluster conducted over 18 site visits it's via hubs across the whole country, including IDP sites in Amran, Ibb, Hajjah and cholera response hotspots and monitoring sites in Sana'a city and Al hudaydah. The site visits aimed to identify WASH needs, gaps and support in response monitoring. Monthly WASH coordination meetings were held in five hubs as well as bi-weekly cholera coordination in high priority locations to strengthen responses. A two-day joint Health and WASH cholera workshop was

¹ OCHA. 14 September 2019. Briefing to the Security Council on the humanitarian situation in Yemen.

² OCHA. 24 September 2019. Scores of people killed and wounded in Amran and Al Dhale'e.

³ Yemen Cholera Outbreak – Interactive Dashboard (<http://yemeneoc.org/bi/>), data as at 30 September 2019.

⁴ As Nutrition Cluster programme data is one month delayed, the September admissions information will be reported in October.

⁵ The August OTP reporting rate of 76 per cent is still below the minimum reporting rate threshold of 80 per cent.

⁶ Note that 8 districts are not accessible due to security reasons as reported to the cluster coordination team by WFP.

conducted in Al Hudaydah, where partners and authorities developed a joint action plan to tackle the cholera outbreak. In Sana'a, a chlorination training was conducted for 30 participants from NGOs and authorities to strengthen water treatment and quality in districts highly impacted by the cholera outbreak. WASH Cluster partners conducted rapid assessments of flood affected areas in Al Hudaydah, Hajjah, Lahj, Aden, Abyan and Hadramout. Partners scaled up preventive and responsive interventions including rehabilitating damaged latrines, discharging stagnant water, de-sludging overflowing cesspits, chlorinating water sources, scaling up awareness and distributing hygiene items for affected households.

The WASH response has been significantly impacted by the fuel crisis that has led to reduced operating hours of water supply and sanitation systems, as well as increased cost of trucked water. The resulting reduction in access to safe water and interrupted sanitation services has heightened exposure to communicable diseases. Due to fuel shortages, in Ibb, Dhamar and Al Mahwit, central water systems were already forced to completely stop and only few days of fuel remain in several major cities. Urban water systems in Sa'ada and Al Hazm have reduced water output by 40 per cent. Over 30 rural water systems completely stopped, affecting more than 120,000 people. In addition, partners are facing significant delays in signing sub-agreements with authorities, to carry out WASH activities and responses. Without signing sub-agreements with authorities, partners were not able to access the project sites and it limited partners to conduct rapid assessments. Due to these challenges, some projects, including life-saving cholera projects, have been delayed up to ten months.

Child Protection Sub-Cluster

The Child Protection Sub-Cluster faced challenges in delivering its capacity building package due to clearance delays by the de-facto authorities. Negotiations and advocacy sessions with authorities were conducted and are yet to yield any positive results. Implementation in newly displaced communities in Al Dhale'e and Hajjah Governorates were constrained by lack of partners' presence and access. Despite a challenging environment, in September, the Child Protection Sub-Cluster reached 83,147 beneficiaries including 61,436 children⁷ with critical child protection services such as case management, victim assistance, family tracing and reunification and mine risk education and awareness.

Education Cluster

As planned, the 2019-2020 school year started on 1 September in the southern governorates, Taizz and Marib, and schools in the rest of the governorates in mid-September. In September, the Education Cluster supported 33,660 children, through rehabilitation of schools and provision of school desks in order to improve learning environment. In 2019, a total of 707,107 children (79 per cent of annual target) accessed education via improved learning environment. In September, 64,005 children affected by the conflict received psychosocial support (PSS) to help them build their resilience and overcome the trauma caused by the conflict. In 2019, Education Cluster reached 385,611 children (21 per cent of annual target) with PSS. The low achievement is because the provision of PSS and peace building education was not approved by the authority in the areas they control. 257,054 students (17 per cent of annual target) have been provided with basic learning supplies so far in 2019; of those, 157,013 students were provided with learning materials by the Education Cluster partners in September. Sufficient learning supplies have not been provided to target children due to funding gap. In addition, different requirements and priorities from different authorities limited the implementation of this activity. In September, the Education Cluster with the support of the Global Education Cluster conducted a 4-day workshop to develop the new strategy for Education Cluster covering 2020 and 2021. The strategy is expected to be finalized in November.

The four Clusters finalized accountability to affected population chain matrix that was designed by OCHA in consultation with the Humanitarian Country Team Inter-Cluster Coordination Mechanism. The tool provides guidance and standards for first and second line response to the 2019 Humanitarian Response Plan (HRP) nutrition interventions that should be followed and applied by all nutrition stakeholders.

Humanitarian Strategy: Humanitarian Strategy remained as same as in [the situation report for May](#).

Summary Analysis of Programme response

⁷ 35,378 girls and 26,058 boys.

AWD/Cholera Response: 70 per cent of AWD/cholera suspected cases are reported from six governorates. Amanat Al Asimah, Al Hudaydah, Sana'a, Amran, Ibb governorates and 169 districts have been identified as a priority for the response. Health and WASH clusters have significantly scaled-up their responses. UNICEF is working closely with the relevant ministries, WHO and other humanitarian partners to ensure an effective response.

Since the beginning of the year, UNICEF treated one third of the national AWD/cholera suspected cases, by supporting 608 Oral Rehydration Centres (ORC) and 76 Diarrhoea Treatment Centres (DTC) in 201 districts in 18 governorates. Over 190,000 cases of AWDs were treated in those ORCs/DTCs.

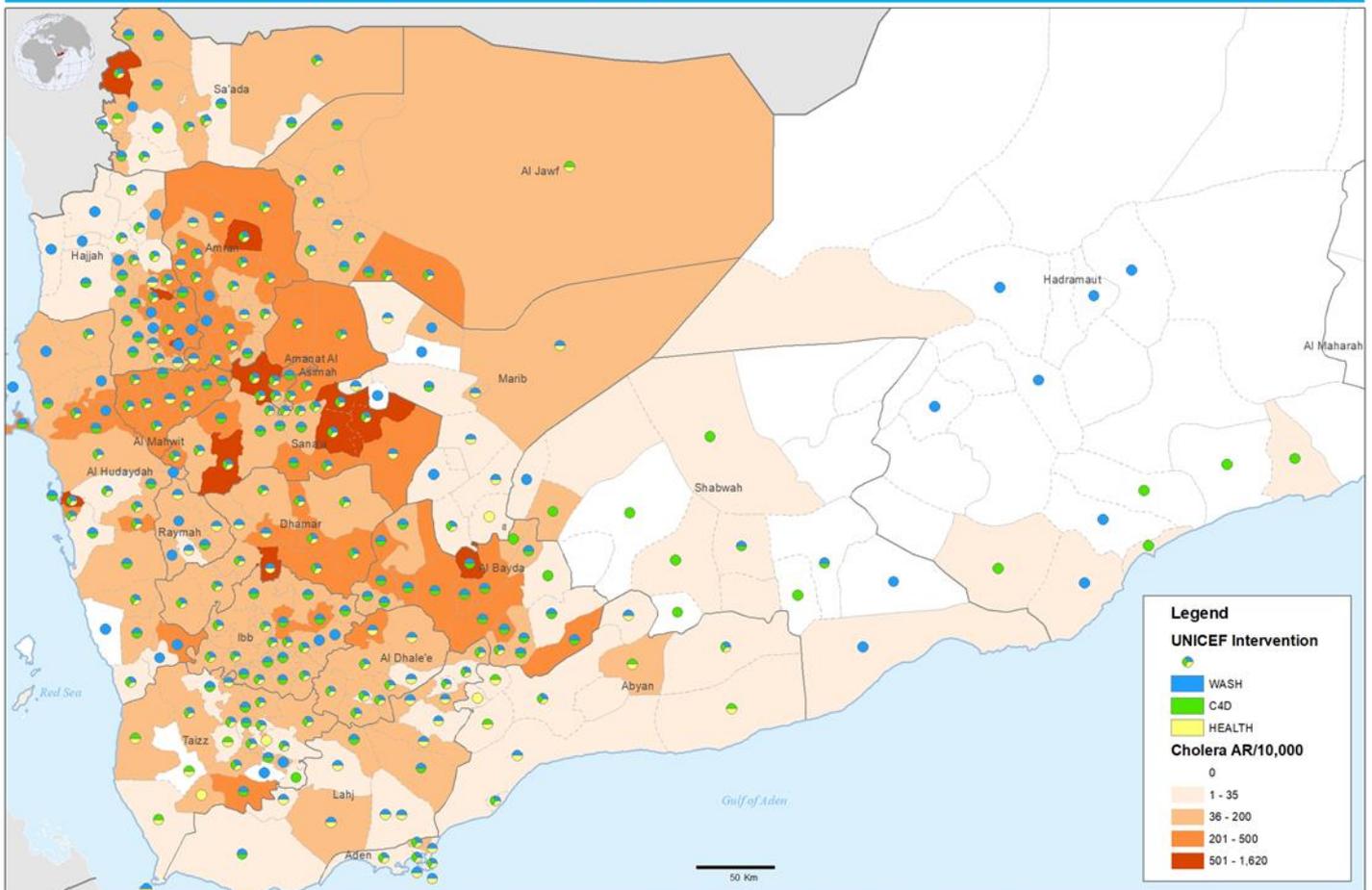
To respond immediately and prevent new cholera suspected cases and associated deaths, the health authority in partnership with UNICEF and WHO implemented the second round of Oral Cholera Vaccine (OCV) campaign in the three high-risk districts identified in Amanat Al Asimah in September. The door-to-door nine-day-long OCV campaign has targeted 1,260,098 people above one. Vaccination teams were able to reach 191,445 houses and vaccinated 1,131,188 people, giving them three-year prolonged immunity against Cholera, which is 90 per cent of the target.

The OCV campaign was supported with 13 days of community engagement and social mobilization interventions through 450 community volunteers, 72 teachers and 120 male and female religious leaders. In addition, 30 Yemeni celebrities helped to mobilise households and individuals, especially in areas with vaccine refusals. 995,357 individuals learned about cholera and importance of vaccination with OCV through 178,318 house to house visits by volunteers who conducted cholera awareness and social mobilization activities. 558,563 people were also reached with the information on OCV through communication activities focusing on groups, including 4,838 community meetings, 813 mosques events, 6,139 women's gatherings, 122 health facility awareness sessions and 147 school events. These activities were reinforced by 25 vehicles mounted with public address systems and 6 mobile cinemas, reaching approximately one million people. 18 mass media organisations aired radio and television flashes as well as dedicated discussion programmes on Cholera to support the OCV campaign. A major effort was undertaken to track



©UNICEF Yemen/2019. QIPs in Al Hali district in Al Hudaydah governorate.

YEMEN: UNICEF Intervention in Cholera Attacked Districts (as of September 2019)



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Data source:GoY/CSO/EWARS/UNICEF team

and address rumours and misconceptions on OCV. UNICEF and partners facilitated participation of the Yemeni celebrities and known influential people who engaged refusing households, personally took the OCV dose and administered the vaccine to those who insisted they would only take the vaccine from the celebrities.

To prevent the spread of cholera, five essential key practices were promoted by the network of community volunteers and religious leaders. These five essential key practices are handwashing with soap, household water safety including water chlorination, food hygiene, safe disposal of waste including faeces, and care of the people with illness including use of oral rehydration therapy at the household level. Over 265,046 people became aware of those key practices, through 27,593 home visits, 135 group discussions, 2,691 counselling sessions, 14 community drama shows, 281 school-based activities and 357 awareness sessions in health facilities. Through the partnership with the Ministry of Endowment, religious leaders continued to volunteer their services to create awareness of cholera in mosques and in their communities. In addition to integrating cholera information in sermons and talks delivered during prayers in mosques, trained religious leaders including female religious leaders, facilitated 5,553 mosques events and 3,410 community meetings and events. Additionally, female religious leaders conducted 2,468 community-level women's group meetings. Overall, 1.21 million people, including 7,066 people from marginalized communities and 11,770 displaced people, were reached with the information on cholera by religious leaders.

UNICEF AWD/cholera response is ongoing with a strong focus on high priority areas and districts, to minimize the risk factors leading to infection and the sources of transmission. During the reporting period, 450,000 people received hygiene kits and aqua tabs and learned how to improve hygiene behaviour by Rapid Response Teams (RRTs). 2.1 million people in 36 priority districts benefited from access to safe water from water chlorination activities to kill bacteria and microbes in tap water. In high priority districts of Amanat Al Asimah and Al Hudaydah, more than 50 Quick Impact Projects (QIPs), which consists of minor rehabilitation of water and sanitation systems, were implemented in September.

To increase capacity of RRTs, UNICEF provided training on the implementation of the new AWD/Cholera targeting strategy that focuses on the most likely cholera cases (moderate and severe dehydration patients and rapid diagnostic tested cases with a cluster of suspected cases around) to the RRTs led by the General Authority for Rural Water Supply Projects (GARWSP). This has resulted in a significant boost in the overall coverage of cases from 30 per cent to 50 per cent in September. The aim is to reach an 80 per cent coverage which is the coverage level where RRTs are most effective to control cholera. Moreover, UNICEF provided technical guidance to the GARWSP to enable 750 RRTs (1,750 RRT members) to conduct a team restructuring exercise with the introduction of two new type of teams: (1) the Area Wash Assessment Teams that conduct an environmental assessment of affected communities and develop QIPs (small-scale rehabilitation projects); and (2) the Post Distribution Monitoring (PDM) teams to verify the quality of the RRT responses.

In parallel, UNICEF is commissioning a series of key studies that will help better understanding of risk factors for cholera and fine-tune the WASH responses. These studies will be completed in the first quarter of 2020 and the planned studies will be as follows:

- Behavioral study to understand people's motivations and constraints of using chlorinated water, in collaboration with C4D
- Study on the effectiveness of RRTs who assess the efficiency and impact of the WASH responses
- Exposure-outcome study to understand cholera risk factors at household level

In September, the fuel shortage had affected many business including life saving interventions across the country. The operations of water supply and sanitation systems were also been affected due to lack of fuel in the country. Since the availability fuel is linked with movement of response teams, some effect has been reported but not as serious delayed were reported. If the situation remain same in October, the impact will be adverse.

Health and Nutrition: 79,289 children under one received Penta 3, protecting them against diseases such as Diphtheria, Hib, Tetanus and Hepatitis, and 76,412 children were protected against Measles and Rubella as part of the routine Expanded Programme on Immunization (EPI).

In September, MoPHP, with a full support from UNICEF, launched the implementation of the first round of Integrated Outreach (IO) in eight northern governorates. Through IO, MoPHP delivered a minimum package of vaccination, nutrition, Integrated Management of Childhood Illness (IMCI), Reproductive Health (RH) and referral service to individual and communities at tier 2 and 3 of health facility's service catchment areas where people have difficulties to reach health facilities. This approach contributes to 30 per cent of the annual vaccination coverage in the country. The activity is still ongoing, and data will be available in the next situation report.

UNICEF continues to provide its full support in achieving the Maternal and Neonatal Tetanus (MNT) elimination goal in Yemen, having less than one MNT case per 1,000 live births per district. To achieve the MNT elimination goal, the first round of MNT vaccination campaign in 53 hard-to-reach districts in Aden, Lahj, Abyan, Shabwa, Al Mukalla, and five districts in Al Dhale'e has been conducted from 29 September for six days. This campaign is initiated by MoPHP, targeting 429,461 women aged 15-49 years with Tetanus and

Diphtheria (Td) vaccine. Td vaccine will protect the women and newborn babies from Tetanus and Diphtheria. The campaign is ongoing until 4 October, and the data of reached beneficiaries will be reported in October. The first round of MNT vaccination campaign is followed by a second and third round of the campaign after one and six months respectively. The vaccination campaign is being accompanied with social mobilization and awareness campaign.



©UNICEF Yemen/2019/Ahmed Haleen. Children are receiving diphtheria vaccination during the Diphtheria outreach activities in Dhamar city.

On 24 September, to improve preparedness to Type 2 Polio outbreak, UNICEF has carried out an orientation/training session on the “Management of Type 2 Mono Oral Polio Vaccine (OPV) during Polio Type 2 Outbreak Vaccination Response”. Approximately 20 MoPHP and partners participated in this training. This training is the second orientation conducted following the first orientation in March 2019.

931,950 doses of Penta vaccines and 368,600 doses of Pneumococcal Conjugate Vaccine (PCV) were delivered to the national EPI warehouse. This will sustain uninterrupted supply of EPI vaccines in Yemen and ensure a continuous delivery of routine vaccinations to and protect more than 300,000 children under one.

Six cold rooms and 211 Direct Drive Solar refrigerators were distributed to health facilities, to replace outdated refrigerators in health facilities that provide EPI services. This would improve the cold chain system and expand storage capacity of vaccines in health facilities in six governorates.

For the IMCI, 275,939 children under five have been provided with services for common childhood illness including 34,388 children who were treated against pneumonia, in September. So far in 2019, a total of 1,535,216 children (97 per cent of annual target) under five received primary health care. UNICEF supported the printing and distribution of the IMCI daily and monthly registries and IMCI training manual for training and recording of the cases under IMCI programme.

UNICEF continued to ensure the access to maternal and neonatal health services for highly vulnerable women and new-borns, both at community and facility level. The community level support for primary health care was delivered through community midwives (CMW), mobile teams and outreach activities. In September, 53,042 women received primary health care services. Of them, 23,132 women received antenatal care, 13,118 women had deliveries by skilled birth attendants and 16,792 women and their new-borns received post-natal care services. Between January and September, 783,157 PLW (93 per cent of annual target) received primary health care services, in 2019.

To strengthen maternal and neonatal health systems and capacity, UNICEF supported MoPHP to develop the Yemen-specific Essential New-born Care (ENC) manual, which was reviewed by a national academic team in coordination with UNICEF, WHO and UNFPA. With the ENC manual, a six-day training of trainers was conducted for 26 participants. 32 midwives from rural and hard-to-reach areas in Sana'a governorate graduated and completed three years pre-service training fully support by UNICEF. Graduated midwives will return to their villages to provide maternal and new-born health services at the doorstep of their respective communities. In coordination with MoPHP, UNICEF supported 21 days of training on the updated community-based maternal new-born care, for 90 midwives from Sana'a, Amanat Al Asimah, Amran, Sa'ada, Dhamar, and Hajjah.

To reduce the prevalence of acute malnutrition, UNICEF and partners continued to support the scale-up of the integrated Community Management of Acute Malnutrition programme, in coordination with the Nutrition Cluster partners. Between January and September 2019, 215,578 children⁸ (67 per cent of target) were admitted for treatment of SAM through fixed OTPs and 128 mobile teams across the country. This achievement is attributed to programme scale-up, which is provided in 3,928 health facilities (86 per cent of the functional health facilities). Between January and September, 2,771,191 children under five were screened for malnutrition in the health facilities and by community outreach workers and community health volunteers in 2019.

To assess and monitor the nutrition situation in Yemen, UNICEF continued to conduct SMART surveys, which will provide the evidence base to UNICEF and partners, for strategic planning and implementation of nutrition interventions. In September, UNICEF completed the data collection of a SMART survey in Dhamar, that was started in August. Out of the planned SMART surveys in 22 governorates, surveys in ten governorates have been completed as of September 2019; these were in: Ibb, Hadhramout, Sa'ada, Shabwa, Hajjah Lowland, Taiz Lowland, Abyan selected districts, Socotra, Al Maharah, and Dhamar. Five of the survey results indicated very high global acute malnutrition rates in 22 districts in Hajjah (17 districts) and Taizz (five districts), which are above the 15 per cent WHO emergency threshold.

⁸ 120,762 girls and 92,591 boys.

To prevent chronic malnutrition among children under five, since the beginning of the year 1,064,978 children⁹ have received micronutrient powder supplementation that represents 37 per cent of the annual target, since the beginning of the year. It is anticipated that UNICEF will reach higher percentages with the implementation of more integrated outreach activities in the remaining months of the year and once data collection of all reports from community health volunteers has been completed or progressed. 580,377 children¹⁰ aged 12 to 59 months received deworming medications and 1,893,852 PLW received counselling on Infant and Young Child Feeding (IYCF) which represents 93 per cent of the annual target, and 1,365,799 PLW received iron-folate supplementation. These interventions will reduce the risk of damage to children's development and cognitive abilities caused by malnutrition.

Water, Sanitation and Hygiene (WASH): In September, UNICEF reached more than 18,000 internally displaced persons (IDPs) in Hajjah and Al Hudaydah, with emergency water trucking, construction of emergency latrines, distribution of hygiene kits and hygiene promotion in IDP settlements, which will reduce risk of disease. However, UNICEF is currently experiencing \$7 million of funding gaps to implement first line WASH response activities for IDPs, especially in Hajjah, Al Hudaydah and some areas in the Southern governorates such as Lahj and Aden.



©UNICEF Yemen/2019. Rural water supply system in Hajjah.

UNICEF is also working with GARWSP to support to implement rural water supply rehabilitation projects. The rural water supply rehabilitation projects include operation and maintenance of the rural water schemes, provision of spare parts, rehabilitation, supply, installation of solar pumping units, and the establishment and training of community-based management. Between January and September 2019, 8 rural water supply rehabilitation projects have been completed in Abyan for 43,245 beneficiaries, 8 projects in Raymah for 13,986 beneficiaries, 21 projects in Al Hudaydah for 55,000 beneficiaries, and 7 projects in Al Mahwit for 10,315 beneficiaries. All these projects involve the introduction of solar systems as a cost effective and environmentally friendly alternative. A recent Return on Investment (ROI) analysis of five similar projects on rural water supply rehabilitation in Sa'ada governorate shows that the rural water supply systems can save more than \$4.5 million and 495 metric tonnes of carbon dioxide (equivalent to the emissions for a car driven for 1.2 million miles), by using the solar systems for more than 10 years.

Child Protection: Child casualties continue to be reported as a result of airstrikes and other conflicted related causes. There is an unconfirmed report of children captured by Ansar Allah in the recent fight within Najran and currently held in detention centres. Child protection needs are increasing as conflict continues to escalate in the Aden, Al Dhale'e and Taizz governorates. Stringent administrative demands on 2 International NGOs and 2 National NGOs continued to cripple implementation of child protection activities.

Despite ongoing operational challenges, UNICEF continued to provide lifesaving education on the risks posed by mines, unexploded ordnances and explosive remnants of war reaching 2,107 conflict affected people¹¹ across Aden and Sa'ada governorates. UNICEF provided mine risk education to 1.6 million children and community members (120 per cent of annual target) in schools and in child friendly spaces, as well as through community campaigns. UNICEF will continue to provide mine risk education in areas where conflict is being escalated with increased displacement.

In September, PSS was provided to 32,292 people¹² in 16 governorates through a network of fixed and mobile child friendly spaces to help them overcome the immediate and limit long-term consequences of their exposure to violence. So far in 2019, UNICEF has reached 427,248 children (54 per cent of annual target) with PSS.

Through the case management programme, UNICEF supported the referral and provision of critical services to children including facilitating access to life-saving health services for the most vulnerable children. In September, case managers identified 1,448 children¹³ affected by conflict who needed individual follow-up and child protection services. In addition, 1,408 children¹⁴ were provided with interventions on individual counselling, family tracing and reunification, legal services, education services, medical

⁹ 523,593 girls and 541,384 boys.

¹⁰ 284,967 girls and 295,410 boys.

¹¹ This includes 1,749 children (727 girls and 1,022 boys) and 358 adults (208 females and 150 males).

¹² This includes 27,537 children (12,625 girls and 14,912 boys) and 4,755 adults (2,907 females and 1,848 males).

¹³ 530 girls and 918 boys.

¹⁴ 515 girls and 893 boys. This includes 22 children who accessed victims' assistance (8 girls and 14 boys); 822 children who accessed individual counselling (308 girls and 514 boys); 152 children who accessed family tracing (59 girls and 93 boys); 96 children who were reunified with their families (41 girls and 55 boys), 195 children who accessed economic empowerment and livelihood support (81 girls and 114 boy); 30 children who accessed legal services (7 girls and 23 boys), 343 children (98 girls and 245 boys) who accessed education services; and 280 children (102 girls and 178 boys) who accessed medical services. Some of these children were referred to and accessed more than one service.

services, economic empowerment and livelihood support and victims' assistance. In total, UNICEF has reached 11,464 children (110 per cent of annual target) with critical child protection services since the beginning of the year.

Education: The Education programme focused on preventing the system from collapse and ensuring that key inputs are in place, particularly, support for Grades 9 and 12 national examinations, infrastructure as well as provision of learning materials to children. Due to the severe shortage of financial resources of education authorities, UNICEF supported the preparation of exams and grading processes of national exams for 9 and 12 grades.

Between January and September 2019, UNICEF and its partners have completed the verification of technical need assessments to rehabilitate 585 affected schools in 18 governorates¹⁵, tendering and contracting processes have been initiated in 190 schools. More than 270,000 children (average of 350 children per school) will have access to safe learning spaces from the rehabilitation work. In September, the rehabilitation of WASH facilities in 25 schools in Lahj and Ibb governorates have been completed and 16,887 students¹⁶ now have access to safe and functioning WASH facilities. Those WASH facilities will contribute to prevent the spread of diseases. Additionally, 456 school children benefited from the repair of 152 desks in two schools in Al Dhehar and Dhi Al Sufal districts. 600 teachers in 61 schools in Al Dhale'e and Lahj governorates have been trained in PSS programme to enhance their capacity to attend to the needs of 28,208 conflict-affected children¹⁷. UNICEF was able to reach only 36 per cent of targeted children in schools with PSS so far in 2019, as the activity implementation was only permitted in certain areas. Due to the challenge, it is unlikely that the full target will be reached with PSS this year.



©UNICEF Yemen/2019/Mahmoud Alfalastini. A third-grade girl is washing her hands at a school bathroom that UNICEF rehabilitated in Aden.

As the 2019-2020 school year started in September, 112,129 children¹⁸ in grades 1-3 in 169 schools in Aden and Al Dhale'e governorates were provided with school bags and other essential learning materials to support and encourage access and reduce economic barriers to schooling. Other school supplies are in pipeline and a total of over 500,000 school bag kits will be distributed to children during the school year 2019-2020. The distribution of school bag kits and other school supplies has been delayed due to a long consultation process with the Ministry of Education to agree on school items' specification and the recent escalation of conflict in Aden.

Social Inclusion: In September, 12,204 individuals (Muhamasheen) from 2,034 marginalized households in Amanat Al Asimah governorate started to receive monthly food baskets as a result of the UNICEF's partnership with WFP on the Integrated Model of Social and Economic Assistance and Empowerment (IMSEA). This is the second tranche of beneficiaries from marginalized groups who are added to the WFP list of beneficiaries. Between January and September 2019, a total of 35,179 individuals from 6,242 marginalized households are benefiting from food assistance, through IMSEA project's support. 54 per cent of the 35,179 individuals are children, including IMSEA participants who live in slums along with those Muhamasheen groups appealing from outside the slums. These families will continue receiving food assistance for the next months. UNICEF and WFP agreed that food assistance will be gradually provided to all IMSEA project participants and other non-participants from the marginalized groups, including non-slum dwellers (approximately 10,000 households), who appeal through the project's Grievance Redressal Mechanism (GRM). The Vulnerability and Needs Assessment (VNA) on the marginalized 6,800 households that was conducted between March and April 2018 found that 98 per cent of marginalized households were in acute need of food, and 56 per cent were in severe hunger stage. The findings also show that as negative coping mechanisms, 77 per cent of the slum dwellers do not have enough food during the day while 29 per cent of them spend a day without any food. Based on the VNA findings, IMSEA has prioritized to provide food assistance to marginalized groups.

In September, IMSEA social mobilizers, with support from the UNICEF C4D section, carried out the awareness educational sessions (Communication for Change campaigns) in the targeted slums of Amanat Al Asimah and Sana'a. In September, two key messages on exclusive breastfeeding and back to school have been conveyed. 1,036 households were reached with the breastfeeding messages and 949 households were reached with the back to school messages.

¹⁵ Hajjah, Al Hudaydah, Amanat Al-Asimah, Aden, Lahj, Shabwah, Al Dhale'e, Sa'ada, Taiz, Ibb, Amran, Dhamar, Hadhramaut, Abyan, Marib, Raymah, Al-Jawf and Albaydha.

¹⁶ 8,413 girls and 8,474 boys.

¹⁷ 13,060 girls and 15,148 boys.

¹⁸ 53,473 girls and 58,656 boys.

In addition, UNICEF conducted a Management Information System training for 200 IMSEA case managers and supervisors. The training aimed to build the skills and knowledge of the case managers on how to use the Case Management Application to carry out and document their case referral. In addition, the supervisors of supervisors were trained how to use the Case Management Web-based Interface to supervise, manage and support the case managers. This training laid the ground for field work – referral process – to start in October 2019.

UNICEF is currently experiencing \$1.7 million of funding gaps to scale up the IMSEA project.

Communication for Development (C4D): In September, UNICEF launched a Back-To-Learning campaign, for access to school amid continuing conflict in Yemen. UNICEF C4D and Education teams supported the development of communication materials including posters and leaflets on six key messages on the importance of education and motivating parents to enroll all children in school. Those six key messages are (1) Right to education, whatever the situation; (2) Education for a better future for all; (3) Let’s enroll every child in school; (4) All children have a right to education – including IDP, marginalized children; (5) I have a right to learn – not to work; (6) My future lies in my pen and my book. The mass media component of the Back-To-Learning campaign disseminated messages through 31 radio and television institutions using six Radio flashes, three TV flashes, a theme song and three radio discussion programmes, reaching approximately 12 million people. The Back-To-Learning campaign promoted the importance of education among parents and it will contribute to reduce the school drop-out rate.

Rapid Response Mechanism (RRM): In September, UNICEF along with UNFPA and WFP have reached 6,568 newly displaced families (45,976 people) with RRM kits which include essential hygiene items and other supplies. These families have been displaced mainly due to increasing escalations around the front lines in Sa’ada, Al Hudaydah, Aden, Ibb and Sana’a governorates. RRM kits will meet to 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. In addition, UNICEF RRM consortium (ACTED, OXFAM, Norwegian Refugee Council, Danish Refugee Council, Save the Children International led by Action Against Food) reached 12,214 individuals from 1,823 vulnerable displaced families with RRM multi-purpose cash assistance (MPCA) in conflict affected areas in Al Dhale’e (Al-Had, Al-Milah and Rafdan districts), Hajjah (Abs district), Al Hudaydah (At Tuhayta and Az Zahra districts), Amran and Sa’ada (Qataber and Munabbih districts). MPCA provides the displaced families with the flexibility and dignity to choose how to cover their needs.

Media and External Communication:

Overall media coverage featuring the humanitarian situation and children increased by 21 per cent, compared to August. Programmes implemented by UNICEF and partners were featured in almost 30 per cent in traditional media and similar percentage of the content circulated on social media. 42 per cent of local media coverage featured children and humanitarian situation in September.

A social media campaign was initiated to encourage parents and send their children to health centers to receive routine vaccines. In addition, another social media campaign was carried out for the second round of the OCV campaign. This month, the [top tweet](#) gathered nearly 46,000 impressions, with photos of children in Aden happy to be back to schools. On Facebook, the [top post](#), with over 23,400 impressions, covered press statement by the UNICEF Representative on the number of children out of school in Yemen as the school year kicks off.

The media coverage featuring the education, child protection and health programmes implemented by UNICEF and partners was increased in September, compared to August. The coverage featuring the UNICEF and partners’ responses to crucial children’s issues in the international Arabic media was increased by 73 per cent. The regional Arab media coverage featuring UNICEF was also increased by 17 per cent. The content featuring the programmes implemented by UNICEF and partners in the international English media was declined by 19 per cent.

SOCIAL MEDIA HIGHLIGHTS FOR SEPTEMBER 2019	
TWITTER	
New Followers	Approximately 600
Tweets impressions	645K
Top tweet	45.8K impressions
Total tweets (Arabic/English)	94
Profile Visits	11.6K
Total mentions	635
FACEBOOK	
Total posts (mostly bilingual)	73
Net new page likes/followers	420
Total reach	257K people
Key post	23.4K people reached

Supply and Logistics:

Supplies worth more than \$3.8 million with total weight and volume of 423 metric tons and 2,818 cubic meters respectively arrived in Yemen in September. The delivery was completed with two dhows to Al Hudaydah and one chartered flight to Sana’a. During the reporting period, \$6.6 million worth of supplies was delivered from UNICEF warehouses to end-user beneficiaries.

Funding:

Between January and September 2019, UNICEF received \$173.4 million of contributions towards the 2019 HAC appeal, that has been aligned with the Yemen HRP for 2019. In September, UNICEF received \$570,000 from the Switzerland National Committee for UNICEF towards the HAC appeal; however, a funding gap of \$194.4 million remains. Without this funding, UNICEF will be unable to reach all the children in urgent need of assistance in Yemen. In order to meet the immediate and longer-term needs of children and their families in Yemen, UNICEF particularly welcomes predictable, flexible and multi-year funding.

Funding Requirements (as defined in the revised Humanitarian Appeal of 2019 for a period of 12 months)							
Appeal Sector	2019 Requirements (\$)	Funding Received Against 2019 Appeal (\$)	Carry Forward From 2018 (\$)**	Other Allocations Contributing Towards Results (\$)*	2019 Funds Available (\$) **	Funding Gap	
						\$	%
Nutrition	124,678,000	37,493,898	26,969,221	20,500,890	84,964,009	39,713,991	32%
Health	85,788,673	10,803,027	26,645,256	24,487,066	61,935,349	23,853,324	28%
Water, Sanitation and Hygiene	135,000,000	35,724,204	24,988,022	19,153,893	79,866,119	55,133,881	41%
Child Protection	38,348,211	7,755,881	2,637,437	1,600,000	11,993,318	26,354,893	69%
Education	106,000,000	72,278,456	5,883,688	2,504,291	80,666,435	25,333,565	24%
Social Policy	14,009,396	1,178,899	481,960	3,600,000	5,260,859	8,748,537	62%
C4D	10,857,795	972,681	323,965	5,915,188	7,211,833	3,645,962	34%
RRM	21,000,000	7,209,617	2,163,227	-	9,372,845	11,627,155	55%
<i>Being allocated</i>	-	-	-	-	-	-	-
Total	535,682,075	173,416,663	90,092,776	77,761,327	341,270,767	194,411,308	36%

*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 2019 HPM results.

**'Funds Available' as of 30 September 2019 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 was adjusted to reflect the actual values.

Next SitRep: 28/11/2019

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UNICEF Instagram: UNICEF_Yemen

UNICEF HAC 2019: www.unicef.org/appeals/yemen.html

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Annex

SUMMARY OF PROGRAMME RESULTS (January - September 2019)

2019 Programme Targets and Results	Overall needs	Cluster Response			UNICEF and IPs		
		2019 Target ¹	Total Results	Change since last report ▲▼	2019 Target ¹	Total Results ¹	Change since last report ▲▼
NUTRITION⁵							
Number of targeted children 0-59 months with Severe Acute Malnutrition admitted to therapeutic care	357,487	321,750	215,578	21,940 ▲	321,750 ¹	215,578	21,940 ▲
Number of targeted caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding	2,403,337	1,682,336	1,893,852	336,341 ▲	1,514,102	1,893,852 ⁴	336,341 ▲
Number of children under 5 given micronutrient interventions (MNPs)	4,766,718	2,860,031	1,064,978	114,615 ▲	2,860,031	1,064,978 ²	114,615 ▲
Number of children under 5 given micronutrient interventions (Vitamin A)	4,766,718	4,290,047	67,936	3,089 ▲	4,290,047	67,936 ³	3,089 ▲
HEALTH							
Number of children under 1 vaccinated against measles (MCV1)					942,842	405,362 ³	76,412 ▲
Children from 6 months – 15 years vaccinated in MR campaigns					13,032,803	11,837,521 ¹	-
Number of children under 5 vaccinated against polio					5,352,000	466,781 ²	79,289 ▲
Number of children under 5 receiving primary health care					1,575,000	1,535,216	275,939 ▲
Number of pregnant and lactating women receiving primary health care					841,097	783,157	53,042 ▲
WASH							
Number of people having access to drinking water through support to operation/maintenance of public water systems		7,288,599	6,643,555	600,233 ▲	6,000,000	6,079,185 ²	600,233 ▲
Number of people gaining access to emergency safe water supply		1,703,359	979,622	44,792 ▲	1,000,000	638,827 ³	7,656 ▲
Number of people with access to adequate sanitation (through emergency latrine construction or rehabilitation)		1,223,908	786,869	205,303 ▲	800,000	596,401	123,959 ▲
Number of people provided with standard hygiene kit (basic and consumables)		2,322,981 (BHKs)	459,248	12,463 ▲	800,000	212,961 ⁴	9,009 ▲
		5,332,045 (CHKs)	6,891,296	1,787,825 ▲	4,000,000	6,741,185 ⁵	1,763,325 ▲
Number of people living in cholera high risk areas having access to household level water treatment and disinfection		4,202,324	18,725,433	2,353,781 ▲	3,500,000	18,487,615 ¹	2,353,781 ▲
CHILD PROTECTION							
Percentage of MRM incidents verified and documented from all the reported incidents		90%	80%	6% ▲	90%	80%	6% ▲
Number of children and caregivers in conflict-affected area receiving psychosocial support		882,268	507,273	64,632 ▲	794,825	427,248	32,292 ▲
Number of children and community members reached with lifesaving mine risk education messages ¹		1,684,106	1,647,756	2,107 ▲	1,365,128	1,636,623 ¹	2,107 ▲
Number of children reached with critical child protection services, including case management and victims' assistance		12,932	11,928	1,408 ▲	10,345	11,464 ²	1,408 ▲
UNICEF staff and implementing partners trained on Protection from Sexual Exploitation and Abuse (PSEA)					500	701 ³	-
EDUCATION							
Number of affected children provided with access to education via improved school environment and alternative learning opportunities		891,352	707,107	33,660 ▲	816,566	233,807 ¹	17,343 ▲
Number of affected children receiving psychosocial support services and peace building education in schools		1,794,689	385,611	64,005 ▲	170,000	61,732 ²	28,208 ▲

Number of affected children supported with basic learning supplies including school bag kits		1,500,000	257,054 ⁵	157,013 ▲	996,994	127,380 ³	112,129 ▲
Number of teachers/staff in schools (in a total of 10,331 schools) will receive incentives each month		135,359	-	-	135,359	- ⁴	-
Social Policy							
Number of targeted marginalized/excluded benefiting from emergency and longer-term social and economic assistance (through case management)					175,000	100,854	11,760 ▲
RRM							
Number of vulnerable displaced people receiving RRM kits within 72 hours of trigger for response					2,000,000	1,118,783	45,976 ▲
Number of vulnerable persons supported with multipurpose cash transfer					350,000	124,497	12,214 ▲
C4D							
Affected people reached through C4D integrated efforts in outbreak response and campaigns					6,000,000	6,321,878 ¹	265,046 ▲
Number of community mobilisers/volunteers trained and deployed for engaging communities in social and behaviour changes practices					5,000	4,170 Reflect narrative	450 ▲
Footnotes							
Target 1: The Yemen Humanitarian Appeal for Children (HAC) has been revised in April 2019.							
Total Results 1: Data from the field is collected and reported through Field Offices; delays in reporting figures may occur to do lengthy reconciliation. As a result, figures reported may not be an accurate reflection of the results achieved that month and results are added to the next reporting month instead.							
Nutrition 1: The SAM target has been revised as part of the HAC revision in April 2019 and is now higher than that of the Cluster and the minimum number of SAM children targeted under the 2019 HRP. The UNICEF target increased from 80 per cent to 90 per cent of estimated SAM caseload for 2019 (which is estimated at 357,487 cases). UNICEF contributes to 100 per cent of SAM targets at the community level.							
Nutrition 2: The result of this indicator appears low as it is features results from fixed health facilities and mobile teams only. However, almost half of the results of this indicators are attributed to the community health volunteers (CHVs) and the integrated outreach activities. The current result is as of August 2019.							
Nutrition 3: Vitamin A supplementation will be implemented jointly with national polio campaigns; the first polio campaign is yet to take place.							
Nutrition 4: UNICEF is targeting 63 per cent of the total need. The overachievement of this indicator is attributed to the scale up of IYCF interventions at health facilities and community levels. However, there is slight possibility of double counting between different delivery platforms where mothers are receiving this service in two locations. UNICEF is working on improving the reporting tools to minimize the double counting specifically for this indicator and the screening indicator.							
Nutrition 5: Nutrition Cluster results are as of 31 August 2019.							
Health 1: A nationwide Measles and Rubella vaccination campaign held in January has been very successful and reached a high number of children.							
Health 2: Low results as no polio campaign has taken place yet; only as part of routine vaccinations. A polio campaign is currently being planned.							
Health 3: The cumulative result is expected to be higher. Results are communicated from district to governorate, then processed at national level, therefore results are communicated with delays.							
WASH 1: This year there have been a higher number of suspected cholera cases than the usual trend in previous years. Therefore, the original planned target is much lower than the current need, and this is reflected in the over-achievement of the targets.							
WASH 2: Due to an upsurge and increase of expected cases of AWD/suspected cases in the first quarter of 2019, the operational plan for water supply was scaled up to ensure safe drinking water in the affected area. This has led to an over-achievement of this indicator.							
WASH 3: This number has not included the results on water supply chlorination in Amanat Al Asimah and Al Hudaydah, as it was not tracked during the monitoring period.							
WASH 4: This indicator has been under-achieved as it is based on the IDP settlements and needs which have been less than anticipated. It is expected that the reach of BHKs will increase in the rest of the year, as the IDP strategy and guidelines are reviewed.							
WASH 5: This year there have been a higher number of suspected cholera cases in first half of the year than the usual trend in previous years. Therefore, the RRTs scaled up their response to deliver CHKs to break the transmission of the outbreak, resulting in over-achievement of this indicator.							
Child Protection 1: UNICEF was able to reach more students and community members with mine risk education messages than targeted, with lower cost. Furthermore, due to the conflict in Al Hudaydah and Hajjah, as well as displacement in Abyan and Al Dhale'e, UNICEF scaled up the intervention on MRE.							
Child Protection 2: There is significant achievement for this indicator, due to an over-achievement of the provision of victims' assistance. This is in part due to large numbers of children sustaining injuries as a result of the conflict, in comparison to planned targets. Furthermore, the unit cost for victims' assistance is sometimes lower than planned when a victim does not require the full package of services, enabling partners to reach more children in need.							
Child Protection 3: This indicator has been over-achieved because more staff members and partners have engaged in the training than initially planned.							
Education 1: This indicator is under-achieved because the process of identification and technical assessment of affected schools is taking more time than expected. In addition, some schools within the planned target are part of a suspended grant, which is pending donor approval for reprogramming.							
Education 2: This indicator has low achievement because it can now be implemented in the areas controlled by the internationally recognized government only, as authorities in the areas controlled by de facto authorities have not approved it. Alternatively, UNICEF will resume the PSS interventions in the child friendly spaces within the communities in the areas controlled by the de facto authorities.							
Education 3: The procurement of learning supplies is through an offshore supplier; the supplies are currently in the pipeline and more than 500,000 school bag kits during the school year 2019-2020.							
Education 4: Teacher incentives were not provided during the month of September.							
Education 5: This indicator has low achievement due to funding gap. In addition, different requirements and priorities from different authorities limited the implementation of this activity.							
C4D 1: In responding to the rapid increase of AWD/Cholera cases, since March 2019, C4D scaled-up its contingency plan through partnership with MoPHP-HEC and NGOs focusing on the 38 highest priority districts which was generating 60 per cent of the cholera cases. The partnership was aimed at reaching households, engaging children in schools, and food places such as restaurants and food vendors. Through the interventions UNICEF reached the reported number of people in the indicator.							