Thanks to WHO partnership with Germany, sustained access to maternal and child health is being provided and 8,500 severely malnourished children will be able to receive inclusive nutrition & medical care services at 83 therapeutic feeding centres in Yemen. Photo:WHO

HIGHLIGHTS

Malnutrition response: WHO and partners continue their fight against child malnutrition in Yemen as the country records new highs of acute food insecurity
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Malaria response: WHO supported malaria indoor residual spraying campaign in the southern parts of Tehama. The campaign targets 147,000 households in 28 districts in 6 governorates;
P 06

Wash support: WHO kickstarted a series of training sessions on healthcare waste management and disposal for 225 workers from 45 health facilities from several governorates.
P 05

Cholera response: As part of its support to Yemen’s national cholera response, WHO supported an oral cholera vaccination campaign targeting 24,000 households in Al Dhale’e and Hadramaout governorates.
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In 2020, almost one third of all health supplies provided by WHO's Office for the Eastern Mediterranean region were shipped to Yemen, ensuring essential medicines and equipment were available to support WHO's critical work on the ground. Photo: WHO Yemen

<table>
<thead>
<tr>
<th>30.5M</th>
<th>24.3M **</th>
<th>2,103 ***</th>
<th>17.9M ****</th>
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<td>ESTIMATED POPULATION*</td>
<td>NEED HUMANITARIAN ASSISTANCE</td>
<td>COVID-19 CONFIRMED CASES</td>
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HEALTH SECTOR

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<th>71</th>
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<tr>
<td>HEALTH CLUSTER PARTNERS</td>
<td>NUMBER OF WHO STAFF &amp; OTHER CONTRACTS MODALITY IN COUNTRY</td>
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* Yemen HRP 2020
** Yemen HRP 2020
*** COVID-19 Report as of December 2020
**** Yemen- HRP 2020
WHO Response

WHO and partners continue their fight against child malnutrition

In 2020, WHO supported 147 nutrition surveillance sites across 21 governorates. Photo: WHO/Omar Nasr
Early December, an Integrated Food Security Phase Classification (IPC) analysis for Yemen indicated that 13.5 million people (45% of the analyzed population) are facing high levels of acute food insecurity (IPC Phase 3 or above), despite ongoing humanitarian food assistance, including 16,500 people in IPC Phase 5 (Catastrophe). Moreover, the study expected these figures to increase between January and June 2021, with a staggering 16.2 million people likely to experience high levels of acute food insecurity. The number of those in Catastrophe is expected to increase to 47,000. These findings came after another IPC acute malnutrition analysis released in October 2020 had found that malnutrition surged among young Yemeni children, with the highest ever recorded malnutrition rates among children under five in parts of the country.

As food security and malnutrition in the country continue to worsen, WHO is working with partners to support health authorities fighting child malnutrition. As part of this support, WHO has helped the Ministry of Public Health and Population establish, maintain, and strengthen a nutrition surveillance system throughout Yemen, a network of sites located in areas with the highest malnutrition burden.

In 2020, more than 305,000 children were screened and referred for treatment in the 147 WHO-supported nutrition surveillance sites across Yemen despite the challenges posed by CoVID-19. Almost a third of the children aged 6–59 months were found to be suffering from severe or moderate wasting, and around two-thirds of them showed signs of stunting.

To increase access to treatment for severely malnourished children with medical complications, by November 2020 WHO supported 97 therapeutic feeding centres in more than half of Yemen’s priority districts across 22 governorates, providing 12,943 children with free-of-charge treatment, milk and medicines, and health and nutrition education for families. Figures suggest that the quality of service in these centres improved steadily in 2020, as 91 per cent of children were cured of acute malnutrition with complications.

In addition to the case-management in therapeutic feeding centres, preventive activities were conducted, including counselling on Infant and Young Child Feeding practices (IYCF). During November, 1385 caregivers were counselled on IYCF, Infection Prevention and Control (IPC) measures and best practices. They also received mental health and psychosocial support.

In the context of COVID-19, WHO continues to support guidelines development to set the standard of safe service delivery and training to build health and nutrition workers’ capacity in this regard. Skills of medical staff in COVID-19 treatment centres and rapid response teams were also built to assess and treat children for acute malnutrition in inpatient settings, during contact tracing and in IDP and refugee camps.
Training sessions on health care waste management

In December, WHO kickstarted a series of training sessions on health care waste management for 225 health workers from 45 health facilities from several governorates.

The sessions aim to improve healthcare workers’ knowledge and practices on hospital waste management and raise their awareness of risks and hazards related to health care waste management and their roles and responsibilities.

many dangers and serious diseases because they handle medical waste. If disposed of improperly, the waste produced by medical facilities can pose an even greater threat than the original diseases themselves”, says Dr Ibtisam Ali, Infection Control and Medical Waste Management Trainer.

“Now we can identify different classes of medical waste, and how to deal with each one in terms of segregation, collection, storing, and safe management”, says Salwa Ahmed, a trainee from Sare Al Ghani health facility in Al Baydha governorate.

In September 2020, WHO and the King Salman Humanitarian Aid and Relief Centre (KSRelief) joined hands to improve water, sanitation and hygiene (WASH) services in Yemen, through a US$ 7 million support to targeted health facilities and water quality monitoring and surveillance in high-risk cholera districts.

The training sessions also focus on hygiene practices and disinfectants used in different scenarios by raising awareness of waste separation practices, safe handling, storage and operation and maintenance of treatment technologies.

“Health care workers are exposed to...
“Improved WASH services at the hospital level will allow the functionality of preventative health programmes, including newborn care, elimination of childhood pneumonia and diarrhoea and control of cholera,” said Dr Adham Ismail, WHO Representative in Yemen.

“Through strengthening infection control practices and training health care personnel on safe waste management practices, the project will help enhance safe and environmentally sound management of health care waste and prevent adverse health and environmental impacts,” he added.

Overall, the project will benefit over 653,000 people in priority cholera high-risk districts across Yemen.

Malaria campaign in Tehama region:

As part of the National Malaria Control Program in Yemen, WHO supported the Ministry of Public Health and Population in conducting malaria indoor residual spraying campaign (22 December 2020- 1 January 2021) in the southern parts of Tehama region. Two hundred eighty-one spraying teams (1529 workers) were mobilized to target 147,000 households in 28 districts in six governorates (Al Hudaydah, Al-Mahweet, Raymah, Dhamar, Ibb, and Taizz). The campaign will directly protect over one million people against malaria and other mosquito-borne diseases.
OCV campaign in Al Dhale’e and Hadramaout governorates

As part of its support to Yemen’s national cholera response, in December WHO supported an oral cholera vaccination campaign targeting 24,000 households in Al Dhale’e and Hadramaout governorates. WHO mobilized 169 teams to reach 162,000 people in Al Dhalea and Alazareq districts in Al Dhalea governorate. In Hajer district, Hadramaout governorate, 46 teams were mobilized to reach up to 40,000 people. The campaign was implemented in partnership with UNICEF through the Emergency Health and Nutrition Project funded by the World Bank.

Support for health facilities:

In December, WHO continued its multifaceted support to health facilities, including central public health laboratories and dialysis centres in several governorates, including Al-Hudayda, Raymah, Al Mahweet, Hajjah, and Hadramout, through the provision of medicines and medical supplies to ensure the delivery of essential health care services. The support included refilling oxygen cylinders, laboratory supplies, cholera kits, PPE equipment, dialysis supplies, and other medical supplies.
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Furthermore, WHO continued its support to targeted hospitals to ensure functionality and continuous provision of Trauma Care Services. The support included 72 General Surgery Sets, 40 Ortho Surgery Sets, eight Ophthalmic Trauma Instruments Sets, eight Vascular Instruments Sets, and 18 TESK to the main referral hospitals across the country.

In 2020, WHO has distributed over $103 million worth of aid to 1470 locations across Yemen (159 per cent more than 2019). The support included ambulances, CT-Scanners, vaccine refrigerators, dialysis material, hospital and laboratory equipment, medicines for various diseases & nutrition kits.

**Fuel and water provision**

WHO continued its fuel and water support to targeted health facilities to ensure their functionality and continuous provision of life-saving health care services. A total of 1,238,04 litres was delivered to 252 health facilities across the country. A capacity of 5,361,460 litres of water was provided to 50 health facilities in Al-Hudeaydah, Hajjah, Raymah, Al-Mahweet and Hadramout governorates.
Epidemiological Update

COVID-19

In December 2020, health authorities reported 16 new confirmed cases of COVID-19 with four associated deaths and 11 recoveries, bringing the total number of reported cases 2,103 with 611 deaths and 1,396 recoveries.

Health partners remain concerned that underreporting may be continuing in some areas of the country due to a lack of testing facilities, delays in seeking treatment, stigma, difficulty accessing treatment centres or the perceived risks of seeking care. Moreover, it can indicate the large asymptomatic infections that are yet to be detected in the country.

![Number of COVID-19 Cases (Cumulative)](chart)


To have a better assessment of COVID-19 situation in the country, health Partners on the ground continue working towards increasing surveillance; deploying dedicated COVID-19 staff within agencies; tracking the virus’s impact on routine priority health programmes; refining messaging to encourage behavioural change; and boosting intensive care unit (ICU) capacity.

WHO is preparing for a potential spike in contaminations by refining its response strategies, including surveillance, contact tracing, risk communications, technical guidance and training, case testing and verification, and provision of medical devices and supplies.
**Cholera**

From 1 January to 27 December 2020, a total of 229,887 suspected cholera cases and 78 associated deaths were reported from northern governorates, with 73 related deaths. Within the previous four epidemiological weeks, 61 per cent of suspected cases were reported from four governorates: Taiz (21%), Al Hudaydah (17%), Sana’a (12%) and Al Bayda (11%).

**Diptheria**

From 1 January to 27 December 2020, a total of 1,425 probable cases including 116 associated deaths were reported from northern governorates. Within the previous four epidemiological weeks, 13 governorates reported probable cases with 61 per cent of probable cases reported from five governorates: Dhamar (15%), Amanat Al Asimah (13%), Sa’ada (12%), Al Hudaydah (11%) and Hajjah (10%).
**Dengue**

From 1 January to 27 December 2020, a total of 51,455 suspected Dengue Fever cases with 80 associated deaths were reported from northern governorates. Within the previous four epidemiological weeks, 97 per cent of suspected cases were reported from three governorates: Al Hudaydah (46%), Mareb (26%) and Hajjah (25%).

**Measles**

From 1 January to 27 December 2020, a total of 4,054 suspected measles case with 13 associated deaths were reported from northern governorates. Within the previous four epidemiological weeks, 87 per cent of suspected cases were reported from three governorates: Sa’ada (72%), Amanat Al Asimah (9%) and Al Bayda (6%). Children under the age of five represent 83 per cent of the total suspected cases.
SARI

From 1 January to 27 December 2020, a total of 5,769 suspected SARI cases with 304 associated deaths were reported from northern governorates. Within the last previous four epidemiological weeks, 93 per cent of suspected cases were reported from four governorates: Dhamar (49%), Amanat Al Asimah (29%), Sa’adah (8%) and Amran (7%).

The trend suspected cases between epidemiological weeks 1, 2019 to 52, 2020
Nutrition

As a total of 37,799 children under five were screened for all forms of malnutrition in November; 26 per cent were under six months. This number of children screened is almost back to the annual average after the sharp decline witnessed in May 2020. The improvement can be attributable to the increase in the number of reporting sites, as a result of the program scale-up, as well as to the measures (Infection Prevention Control (IPC)) and safe anthropometric assessment put in place to maintain safe access to surveillance and preserve population’s trust in the system’s ability to provide safe nutrition services, including during the COVID19 pandemic. This result is also confirmed by the increased number of sites with available IPC material and PPE, as per the charts below.

Acute Wasting by Mid-Upper Arm Circumference (MUAC) was detected in 16.5 per cent of the total children aged between six and 59 months screened in November 2020, with the highest rates recorded in Al Hudaydah and Sa’adah governorates. Children found with acute malnutrition were referred to appropriate nutrition services.
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