Almost a year after the Government of Yemen and rebel forces in the northern governorate of Sa’ada signed a truce, around 320,000 internally displaced persons still live in camps, in scattered settlements or with host communities in the region. People in Sa’ada Governorate who have not been displaced also continue to suffer from lack of access to basic services and emergency relief assistance as a result of the conflict. Following mediation efforts of the Qatari Government in the autumn of 2010, limited handover of power to local authorities in Sa’ada has, in theory, taken place. However, these positive developments have yet to be translated into improved access for humanitarian agencies.

In southern Yemen, repeated clashes between government troops and armed elements dubbed Al-Qaida are particularly worrisome; thousands of civilians in the conflict-affected areas have been forced to flee their homes without having their basic needs guaranteed. Moreover, the presence of around 170,000 refugees in the region has placed significant strains on government capacity to respond. In other areas of the country, flooding and other natural disasters have caused havoc and exposed residents to suffering and epidemic outbreaks. High levels of undernutrition and food insecurity remain a concern.

In the midst of protracted emergencies, stabilizing the welfare of women and children in Yemen is crucial. UNICEF is requesting US$20,294,000 to carry out its planned activities, approximately the same amount as last year. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements. UNICEF in 2011 will continue to lead and remain the provider of last resort in the nutrition, WASH and education clusters as well as the child protection sub-cluster. UNICEF will focus on decreasing the alarming levels of childhood undernutrition, offering life-saving vaccinations and ensuring universal access to safe drinking water, sanitation and hygiene in emergencies throughout the country. UNICEF will also provide safe learning environments, either by rehabilitating schools or by providing temporary learning spaces. Finally, UNICEF will continue to provide child-friendly spaces and psychosocial support for children exposed to emergency situations.

CRITICAL ISSUES FOR CHILDREN AND WOMEN

Widespread high levels of undernutrition among children are of critical concern to Yemen. Fifteen per cent of children under age 5 suffer from moderate and severe wasting. The situation is more serious in the conflict-affected areas in the north: A UNICEF nutrition assessment carried out in five districts of Sa’ada in July 2010 revealed that the rate of severe acute malnutrition was 17 per cent and moderate acute malnutrition 28 per cent. These figures are far above the World Health Organization emergency thresholds of 15 per cent for global acute malnutrition and 5 per cent for severe acute malnutrition.

Children in Sa’ada are also at risk of morbidity and mortality due to vaccine-preventable and/or waterborne diseases. The current vulnerability will be exacerbated if health services are not re-established to protect young children weakened by high rates of acute malnutrition as well as lack of safe drinking water and hygiene.

Children and women are frequently exposed to violence. A report published in the autumn of 2010 by UNICEF and the ministry of social affairs and labour revealed that 17 per
In Yemen, more than one quarter of school-aged children are out of school. This percentage is even higher in the conflict-affected areas of the north. The number of damaged schools (250) and subsequent lack of safe learning spaces have been chief constraints in providing education for children.

**KEY ACHIEVEMENTS IN 2010**

In the mid-2010 request, UNICEF estimated that US$9,669,689 was needed to fund its humanitarian work in Yemen. As of October 2010, a total of US$6,343,774 had been received, or 66 per cent of the goal. The main thrust of UNICEF’s emergency response in 2010 was addressing the needs of families affected by the conflict in Sa’ada. However, UNICEF took part in developing a joint UN contingency plan for the southern governorates (coordinated by OCHA) in the summer of 2010; the organization distributed non-food items in Shabwa and Abyan Governorates to conflict displaced population, and also responded to the water, sanitation and hygiene needs of victims of floods in Ibb and Hodeidah Governorates.

Despite low funding levels in the health sector, UNICEF supported the ministry of health to mount an immunization campaign for measles in five districts of Sa’ada, immunizing 224,000 children under 15, reaching 75 per cent of the targeted group.

As of October 2010, 12 new sites for outpatient treatment of severe malnutrition have been established in conflict-affected areas, including parts of Sa’ada, bringing the total number of such sites in the region to 32. Over 11,000 children were treated at these sites in 2010. Hundreds of doctors and community volunteers received training on community-based management of acute malnutrition, breastfeeding promotion and nutrition screening.

Together with its partners, UNICEF has provided over 46,000 internally displaced adults and children in the northern governorates and 5,000 people from host communities with safe drinking water and thousands more displaced persons with access to basic sanitation. Over 130,000 people in the conflict-affected governorates benefited from hygiene kits and/or hygiene promotion.

Despite security concerns and low funding levels in the educational environment, 125,000 children in Sa’ada, Hajjah and Amran Governorates have received educational opportunities through the provision of essential teaching and learning materials and almost 70,000 were given necessary school supplies.

In 2010, UNICEF provided psychosocial support to around 3,500 children suffering from abuse or experiencing vulnerability related to health, poverty or separation from their families. Around 50,000 people have been reached by campaigns to raise awareness of mine risks, birth registration and protection from abuse and exploitation.

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**CORE COUNTRY DATA**

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population (thousands 2009)</td>
<td>23,580</td>
</tr>
<tr>
<td>Child population (thousands 2009)</td>
<td>12,062</td>
</tr>
<tr>
<td>U5 mortality rate (per 1,000 live births, 2009)</td>
<td>66</td>
</tr>
<tr>
<td>Infant mortality rate (per 1,000 live births, 2009)</td>
<td>51</td>
</tr>
<tr>
<td>Maternal mortality ratio (per 100,000 live births 2008)</td>
<td>210</td>
</tr>
<tr>
<td>Primary school enrolment ratio (net male/female, 2005–2009*)</td>
<td>79/66</td>
</tr>
<tr>
<td>% U1 fully immunized (DPT3, 2009)</td>
<td>66</td>
</tr>
<tr>
<td>% population using improved drinking-water sources (2008)</td>
<td>62</td>
</tr>
<tr>
<td>HIV/AIDS prevalence (% aged 15–49, 2009)</td>
<td>–</td>
</tr>
<tr>
<td>% U5 suffering from moderate and severe wasting (2003–2009*)</td>
<td>15</td>
</tr>
</tbody>
</table>

*Data refer to most recent year available during the period specified.
HUMANITARIAN ACTION: BUILDING RESILIENCE

“Clean water is very important for human life. Contaminated water, however, can infect us with dangerous diseases and even cause death.”

This quote by Amer Ali Gaber, a 16-year-old displaced boy living in the Al-Mazraq camps in the northern governorate of Hajjah, reveals the crucial importance of access to safe drinking water. Not only for the people displaced by the northern conflict but also for the communities hosting them, safe and sufficient water is crucial to quality of life. The Al-Mazraq Water Scheme, launched in August 2010, guarantees access to safe drinking water to over 30,000 beneficiaries in two camps for displaced persons and the surrounding host communities. According to UNICEF field reports on the scheme performance, the output of its two water sources could eventually reach 648,000 litres per day. While UNICEF has played a key role in funding the US$1 million scheme, it has been coordinated and implemented with key development partners. The project has opened the way for local authorities to connect 18 villages in the area with drinking water using the same network. Many of those villages had been waiting for such measures for over 20 years.

In 2011, UNICEF will continue to work with the Government of Yemen, other UN agencies, local and international NGOs as well as host communities in addressing the needs of nearly 1.2 million women and children affected by conflict, including those displaced in the northern and southern governorates and those affected by other potential emergencies. The organization will also continue to lead the WASH, nutrition and education clusters in Yemen, as well as the child protection sub-cluster. Due to the precarious security environment in Sa’ada Governorate, full return of displaced persons to their home areas in Sa’ada is deemed unlikely in 2011. Lack of access to some of the emergency areas, e.g., almost the entire Sa’ada Governorate and parts of the southern governorates of Abyan and Shabwa, will almost certainly remain a challenge to humanitarian efforts.

NUTRITION (US$6,952,000)

UNICEF will provide immediate and effective response to the extremely high rates of global acute malnutrition among conflict-affected children – in the northern governorates, levels of global acute malnutrition reach as high as 30–45 per cent in children under 5 years old.8

- Essential screening and therapeutic/nutritional management will expand to benefit 652,000 under-5 children and 190,000 women in displacement camps and host communities in Hajjah, Sa’ada, Amran and Al-Jawf, mainly through fixed sites, health facilities and outreach mobile clinics.
- 80,000 children suffering from severe acute malnutrition will benefit from enrolment in outpatient therapeutic programmes or therapeutic feeding centres in their vicinities.
- Rapid response to deteriorating nutrition status is crucial for saving lives. The UNICEF-led nutrition cluster will develop an effective nutrition surveillance system to monitor the nutritional status of conflict-affected children under 5 and will support community-based case management of acute malnutrition, along with other nutrition components such as the promotion of appropriate feeding practices.

HEALTH (US$2,151,000)

Child death and illness from preventable and treatable diseases is unnecessary. UNICEF will contribute to the reduction of under-5 child morbidity and mortality by providing all available vaccine antigens and an essential package of health services.

- At least 60,000 children under age 5 in Sa’ada will benefit from a full set of vaccines (three doses of polio (oral) and Pentavalent (injectable) vaccines and two doses of measles vaccine).

WATER, SANITATION AND HYGIENE (WASH) (US$5,145,000)

Mortality and morbidity related to lack of safe potable water, sanitation and hygiene is a real threat to children and women. At least 120,000 internally displaced adults, children and members of vulnerable host communities in conflict-affected areas in the northern and southern parts of the country as well as populations affected by natural disasters will benefit from one or more of the WASH humanitarian components: access to safe water, sanitation and hygiene promotion. A key goal of this work is to the well-being, dignity and education of affected people.

- WASH facilities in 20 schools in Sa’ada and Hajjah will be improved for the benefit of at least 8,000 children.
- Government capacity for emergency preparedness and response will be enhanced, e.g., by introducing a clear strategy for emergency preparedness and response.

CHILD PROTECTION (US$2,969,000)

UNICEF aims to provide life-saving measures to children exposed to abuse, violence and exploitation; build the engagement of local communities in the implementation of the protective environment; and enhance the coordination between agencies, including on the collection and analysis of evidence of abuse, violence and exploitation in the governorates of Sa’ada, Hajjah, Amran, Sana’a, Aden, Abyan and Shabwa.
• The incidence, circumstances and perpetrators of acts of violence against children are to be monitored by the Government and other service providers; children will be able to access appropriate and coordinated support to remediate such violence. Duty bearers and service providers work within communities to prevent violence against children within target areas.
• 1,600 children who have experienced violence will be assisted to overcome their psychological, medical and legal issues and be reintegrated into their communities.
• 2,000 separated and unaccompanied children will be identified and placed in family-based care or an appropriate alternative to ensure their safety. Unaccompanied immigrant children will be assisted to secure appropriate accommodation, including repatriation.
• 7,000 children and their caregivers will be able to access psychosocial support, referrals and recreation by attending child-friendly spaces; they will receive psychosocial support services that build resilience and social relationships and foster mental well-being.
• 100,000 persons (50,000 children and 50,000 adults) will benefit from awareness-raising activities aimed at reducing exposure to conflict-associated risks, such as exploitation, violence and accidents with explosive remnants of war. Mine risk education will target all children in affected areas – both displaced and from host communities.

EDUCATION (US$2,077,000)
UNICEF aims to improve educational access, retention and quality for Yemeni children through enhanced professional development training for school principals and teachers, and by providing support to the ministry of education to ensure that educational delivery is better managed.
• Ensure access to quality education for 218,000 children affected by the instability in different parts of the country by establishing safe learning spaces equipped with essential teaching and learning materials.
• More boys and girls will stay in school because school principals and teachers will be trained in effective school management strategies and child-centred teaching methods.
• Education service delivery will improve because personnel with the ministry of education will receive training in educational planning and analysis.

CLUSTER COORDINATION (US$1,000,000)
To enable an effective and efficient coordinated response to improve the prospects of people affected by emergencies, all cluster coordination costs need to be adequately funded. These costs include a team for coordination and information management, along with administrative and operational support, to undertake a number of key actions and outputs. These include coordinating the collective response to maximize synergy and minimize duplication of efforts; identifying priority needs of affected communities based on experience and the results of rapid impact assessments; and developing a common strategic operational framework and response strategy that meets priority needs. In addition, UNICEF as cluster lead expects to put in place an effective monitoring mechanism that tracks progress and identifies gaps in the type of services being provided and in their geographical scope, and also articulates impact and outcomes through periodic progress reports. Information will be disseminated in a timely way and used in decision-making and planning

UNICEF EMERGENCY FUNDING REQUIREMENTS FOR 2011

<table>
<thead>
<tr>
<th>By sector</th>
<th>US$</th>
<th>Total per sector (all beneficiaries)</th>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>6,952,000</td>
<td>652,000</td>
<td>320,000</td>
<td>332,000</td>
</tr>
<tr>
<td>Health</td>
<td>2,151,000</td>
<td>60,000</td>
<td>30,000</td>
<td>30,000</td>
</tr>
<tr>
<td>WASH</td>
<td>5,145,000</td>
<td>120,000</td>
<td>27,070</td>
<td>30,530</td>
</tr>
<tr>
<td>Child protection</td>
<td>2,969,000</td>
<td>115,000</td>
<td>32,500</td>
<td>32,500</td>
</tr>
<tr>
<td>Education</td>
<td>2,077,000</td>
<td>218,800</td>
<td>86,400</td>
<td>132,400</td>
</tr>
<tr>
<td>Cluster coordination</td>
<td>1,000,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>20,294,000</td>
<td>1,165,800</td>
<td>520,970</td>
<td>582,430</td>
</tr>
</tbody>
</table>

8. Nutrition assessment in five western districts of Sa‘ada Governorate, July 2010, supported by UNICEF and the Ministry of Public Health and Population, as well as assessments carried out by Médecins Sans Frontières-Spain and Save the Children in Haradh and parts of Amran Governorate.
9. Total number of beneficiaries may not equal the sum of beneficiaries per sector, due to overlap in services provided to individuals.