Highlights

- Armed clashes and air strikes continued to be reported across the country. Sa’ada, Sana’a and Taiz regions were the most affected. In Taiz City, despite ongoing blockades, some areas are accessible by humanitarian partners. On 18 February, the United Nations Security Council urged all parties to the conflict to take urgent steps towards resuming a ceasefire and to facilitate the delivery of humanitarian assistance.

- Since the beginning of the year, UNICEF has ensured regular access to safe water for nearly 2.6 million. Plans are to provide and maintain regular water supply for over 5.1 million people in 2016.

- UNICEF continues to support the establishment and functioning of outpatient treatment programmes (OTPs) across the country. A total of 2,836 OTPs are now functional, 220 were established during the reporting period. In Sa’ada, as a consequence of security concerns, nine OTPs were closed.

- The Humanitarian Country Team launched the 2016 Yemen Humanitarian Response Plan (YHRP) in Geneva on February 18, appealing for US$ 1.8 billion to provide life-saving assistance to 13.6 million people UNICEF’s Yemen Humanitarian Action for Children (HAC), aiming to reach 7.5 million people, is included in this appeal. Nearly 4 per cent of the 2016 YHRP has been funded to date, further efforts from partners and donors are needed to prevent the ongoing needs from being forgotten.

Situation Overview & Humanitarian Needs

As the one-year mark of the escalation of the conflict approaches, hostilities, extensive ground fighting and violations of international humanitarian law continue to be reported across Yemen. The humanitarian situation continues to deteriorate with over 21.2 million people in need of some kind of humanitarian assistance, including access to safe water, health services, malnutrition treatment, protection and education.

The situation of internally displaced persons (IDPs) is dire, IDPs are dispersed across the country making it difficult for humanitarian agencies to assess and respond to their specific needs. Some regions (i.e. Ibb) are host to increasing numbers of IDPs, posing additional strain on already vulnerable communities and weakened social services.

People in need of urgent humanitarian assistance:

21.1 million people, of which:
- 9.9 million are children
- 2.5 million are IDPs (31% children)

(Task Force on Population Movement, Protection Cluster)

320,000 children under 5 at risk of Severe Acute Malnutrition (SAM)
19.3 million people in need of WASH assistance
14.1 million people in need of basic health care

UNICEF 2016 Requirements:
US $180 million

Funds received in 2016:
US $9.6 million (95 per cent gap)

Overall Funding Status*

*Excludes US$ 59.7 million carry-over funds pledged against the 2015 appeal.
Sustained efforts from humanitarian partners are needed to ensure that those in need receive humanitarian assistance. On February 18, the Yemen Humanitarian Country Team launched the Yemen Humanitarian Response Plan (YHRP) 2016, urgently appealing for US$ 1.8 billion to provide critical and life-saving assistance to 13.6 million people affected by the escalation of the conflict across the country. Included in this appeal is the UNICEF 2016 Yemen Humanitarian Action for Children (HAC) 1, aiming to reach 7.5 million people – including 5.2 million children – to provide support across different sectors, including, but not limited to, health and nutrition, WASH, education, child protection and social protection.

Humanitarian Leadership and Coordination
UNICEF continues to work in coordination with the Yemen Humanitarian Country Team (HCT) and is leading the WASH, Education and Nutrition Clusters and the Child Protection Sub-Cluster. UNICEF has also established sub-national level Clusters for WASH, Child Protection and Education in Aden and Nutrition Sub-Clusters in all field offices, and continues to be an active member of the Health Cluster.

UNICEF has been the lead agency to establish humanitarian hubs in Ibb and Sa’ada. This was successfully achieved in November and February respectively, with 23 staff (including three international) based in Ibb and 12 national staff based in Sa’ada. UNICEF continues to review and monitor programme implementation through local partners, utilising remote monitoring and innovative mobile technology. Efforts continue to diversify and expand partnerships with local NGOs to deliver humanitarian programmes on the ground.

Humanitarian Strategy
UNICEF’s humanitarian strategy remains focused on providing an integrated package of health, nutrition and vaccination services and preventive measures to mothers, newborns and children, expanding treatment services for children with malnutrition and supporting displaced families through provision of safe water and hygiene facilities. UNICEF supports government partners to re-open schools, provide catch up classes, provide school supplies and encourage strategies for alternative accommodation for displaced persons occupying schools. Acknowledging the psychological distress experienced by children, UNICEF supports partners to provide psychosocial support through schools and community facilities including child friendly spaces (CFS). UNICEF and partners are scaling up efforts to reach the most vulnerable children and their families especially internally displaced persons. In light of the huge impact of poverty on children, targeted cash grants reach thousands of the most vulnerable families in Yemen. UNICEF continues to generate new evidence on geographic vulnerabilities, effectiveness of early relief efforts and remaining gaps in lifesaving interventions. UN leaders at country, region and HQ level continue to advocate for unhindered humanitarian access and the protection of humanitarian supplies and sites. Given the disputed nature of the government of Yemen, UNICEF has maintained both its political neutrality and working relationships with government by partnering with technical ministries and sub-national government entities to deliver impartial humanitarian relief. To maintain coordination, UNICEF’s rolling working plans have been shared with and signed by relevant line ministries.

In July 2015, UNICEF activated its Level 3 Corporate Emergency Procedure which mobilizes the highest level of organization-wide support to the current crisis in Yemen. Given the scale of the need, UNICEF’s Executive Director announced the extension of the L3 Procedure up until 30 June 2016.

Summary of Programme Response

Health & Nutrition
Nutrition partners estimate that in 2016, 2 million acutely malnourished children and pregnant or lactating women will need treatment, and an additional one million children require preventive services. At least 14.1 million people are facing insufficient access to healthcare.2

To respond to the emergency, UNICEF continues to provide integrated health and nutrition services to the most vulnerable groups in Yemen, in collaboration with local partners and authorities. As a result of efficient collaboration, over 4.5 million children under 5 have been vaccinated against polio since January 2016.

Between 10 and 23 February, over 25,000 people received health and nutrition services through 70 mobile teams (see Table 1). By the end of the reporting period, a total of 2,386 outpatient treatment programmes (OTPs) were functional nationwide, since the last situation report 220 new OTPs were established, five were reopened in Shabwah governorate and nine were closed due to the ongoing conflict in Sa’ada – overall 197 OTPs remain closed for this reason. To support

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1 For more information, go to: http://www.unicef.org/appeals/yemen.html
OTPs, 19,143 cartons of Plumpy Nut (ready to use therapeutic food) were distributed and will be enough to treat approximately 21,536 children (6-59 months) suffering from Severe Acute Malnutrition (average treatment duration 4-8 weeks). Capacity-building remains at the core of UNICEF’s health support. During the reporting period, more than 150 people (health workers, district monitors and nutrition zonal supervisors) took part in training activities organised by UNICEF including integrated CMAM3 and IYCF,4 screening for acute malnutrition, CMAM and IYCF monitoring and reporting.

| Table 1: Health and nutrition services provided by 70 mobile teams MTS (10-23 Feb 2016) |
|--------------------------------------------------|-------------------------------|
| Children screened for acute malnutrition through routine nutrition services in Sa’ada, Hodeidah, Taiz, Sa’ada and Aden governorates (7,336 male, 6,656 female) | 13,992 |
| Severely malnourished children under 5 years admitted to feeding programmes in Hodeidah, Hajjah, Al Mahwit, Raymah, Aden, Shabwah, Abyan, Sa’ada, Aman, Hadramaut and Taiz (500 boys, 657 girls) | 1,157 |
| Mothers of children under 5 received infant and young child feeding counselling in Amran, Sana’a, Hodeidah, Hadramaut, Al Jawf, Raymah, Aden, Taiz, Lahj, Al Dhale’e and Abyan. | 5,161 |
| Children under 5 received vitamin A and micronutrient supplementation | 3,257 |
| Children under 5 received deworming capsules | 2,039 |
| Pregnant and lactating women received iron/folate supplementation | 9,866 |

UNICEF provided IMCI5 medicines to Sana’a, Amran, Al Bayda and Dhamar health offices which will benefit an estimated 20,000 children. Additionally, a shipment of medicines – sufficient to treat nearly 172,000 newborns - arrived in the port of Hodeida to be distributed to households to ensure safe deliveries and prevent newborn sepsis. During the reporting period, 50 midwifery bags were delivered to community midwives in Sa’ada, 25 midwifery medical kits were delivered in district facilities in areas where health facilities have been completely destroyed, these kits will allow for safe childbirths (approx. 1,250 cases).

In Sa’ada, UNICEF conducted an initial telephone rapid assessment for health facilities closed due to direct and indirect consequences of the conflict. Results of the assessment will be published in following reports.

Water, Sanitation and Hygiene (WASH)

About 19.3 million people in Yemen are now unable to meet their basic WASH needs as a consequence of the ongoing conflict. To address identified needs, UNICEF strategy focuses on providing access to safe water and restoring lost service provision capacity in highly populated and conflict-affected locations.

The number of people receiving safe water with UNICEF support continues to increase in terms of cumulative achievement. The overall number of those reached during the current reporting period has increased to 1.8 million people. The cumulative number of people assisted by UNICEF with safe drinking water in 2016 is nearly 2.6 million. UNICEF continue to expand coverage through further support to Local Water Corporations in Hodeidah, Amanat Al Asimah (Sana’a city), Amran, Hajjah, Sa’ada and Lahj governorates. UNICEF also provided fuel for the operation of 28 rural water projects in six districts of Sa’ada governorate, ensuring water supply to 147,397 persons. Rehabilitation and maintenance of public water infrastructures allow for ensuring access to drinking water for 67,000 beneficiaries in Amanat Al Asimah and Sa'ada governorates.

Through water trucking, 64,149 displaced people and their host communities in Amanat Al Asimah, Sa’ada and Taiz, received water for drinking and domestic use. In Hajjah and Taiz, 672 households have benefited from installation of 69 water tanks. In Al-Shamayateen district (Taiz governorate), a further 598 received jerry cans for water transportation and storage.

Sanitation conditions for 1.4 million people were improved through the provision of a sewage pumping station for the wastewater treatment plant in Amanat Al-Asimah. Latrines were installed to serve 705 IDP families (in Hajjah and Sa’ada) and 93 latrines were rehabilitated in IDPs settlements (Abs district - Hajjah). Consumable hygiene materials were distributed to 1,000 households (in Aden and Lahj), and about 113,000 people participated in hygiene awareness sessions (in Hajjah governorate).

UNICEF continued to support the Sa’ada Cleaning Fund, providing fuel and oil for daily operation, cleaning supplies and maintenance of three cleaning vehicles. With this support, the Sa’ada Cleaning Fund has collected and disposed-off 690 tons of garbage and solid waste from Sa’ada city.

Education

After the escalation of the conflict in Yemen last March, over 1.8 million school-aged children were forced out of school due to the closure of 3,584 schools. In November 2015, 387,000 children remain out of school.

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3 CMAM: Community-based Management of Acute Malnutrition Model.
4 IYCF: Infant and Young Child Feeding
5 IMCI: Integrated Management of Childhood Illness.
schools reopened, but over 1,600 remain closed due to insecurity, damages and the use of schools as IDPs shelter, the closure of schools is now affecting about 387,000 children.

While mid-year exams began in most governorates on February 13, UNICEF continued to support affected children to attend classes and continue their education. During the reporting period, UNICEF and the Governorate Education Offices (GEOs) provided over 23,000 school bag kits among children attending community-provided classes and IDPs (12,000 in Sa’ada, 2,571 in Taiz, 6,000 in Marib, 2,500 in Al-Mahwit). To date, UNICEF has provided school bags, learning materials and recreational kits to almost 190,000 affected children in 14 of the most affected governorates.

To date, UNICEF and the Ministry of Education have started the rehabilitation of 160 schools in seven governorates. During the reporting period, UNICEF and the GEO launched the rehabilitation process for 31 affected schools (in Alamanah). Rehabilitation and construction works in schools are expected to benefit 56,000 children in the coming weeks.

For 2016, UNICEF and its partners have prioritized emergency classroom repairs, temporary learning spaces, alternative education and psychosocial support, as critical activities to mitigate the impact of conflict on children’s right to education. From 10 to 23 February, UNICEF has ensured the continuation of education in Temporary Learning Spaces (TLS) in six governorates, benefiting at least 1,145 IDPs and other conflict-affected children. Following a training of teachers and social workers in Alamanah and Sana’a schools, 8,933 affected children have received Psychosocial Support (PSS) in schools.

Child Protection
As a result of the ongoing conflict in Yemen, it is estimated that 7.4 million children are in need of protection services.6

In 36 districts of eight governorates, UNICEF - in partnership with MOSAL,7 local and international NGOs – provided Psycho-Social Support (PSS) via Community based and mobile Child-Friendly Spaces (CFS) for at least 34,274 people8 from conflict-affected populations, host communities and IDPs. In addition, 23 cases of vulnerable children, including separated, unaccompanied and physical violence victims, were identified and received psychosocial support and health services. In three governorates, 944 people (including 150 children) received information and skills on the protection of children in emergency.

UNICEF contributed to the implementation of the Child Protection Sub Cluster (CPSC) capacity building plan in partnership with the Yemen Executive Mine Action Centre (YEMAC) by equipping 82 staff members of implementing partners (from Al Jawf, Sana’a and Al Amanah) with information and skills on mine risk education (MRE). In Dhale, Abyan, Aden, Ibb and Sa’ada, 101,918 people3 received life-saving information on how to protect themselves from the risks of mines, UXOs10 and ERW.11

Between 10 and 23 February, fighting led to the killing and maiming of at least eight boys and two girls, according to reports verified by the CTF MR12 in Taiz, Sa’ada, Amanat Al Asimah and Aden. Furthermore, during the reporting period, the CTF MR verified cases that took place in January 2016 involving the killing of eight children (7 boys; 1 girl) and maiming of 26 children (21 boys; 5 girls) in Taiz. The strengthening of the MRM networks is ongoing since the beginning of the year, 39 child protection committee’s members have been trained to report and monitor on grave violations against children in Marib, Sana’a, Al Jawf, Hodeidah and Al Bayda.

Social Policy
Since March 2015, the suspension of the Social Welfare fund (SWF) - government unconditional cash transfer programme – as well as the limited access to traditional safety nets and livelihoods, has left nearly 8 million people in need of urgent social protection.13 With humanitarian cash transfers UNICEF aims to alleviate the basic needs of most conflict-affected and poorest households in Yemen.

During the reporting period, UNICEF provided a second cycle of cash transfers to 5,222 beneficiary households in Taiz. In Amanat Al-Asima, preparations are underway to disburse the fourth cycle of cash assistance next week to almost 5,000

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7 MOSAL: Ministry of Social Affairs and Labour.
8 Including 29,440 children, 4,834 parents.
9 Including 85,475 children, 16,443 adults.
10 UXO: Unexploded ordinance.
11 ERW: Explosive Remnant of War.
13 Estimated by UNICEF, based on SWF quarter 4-2014 report.
beneficiary households. According to post-distribution interviews, most beneficiaries reported that cash assistance has contributed significantly to their family’s wellbeing.

Communication for Development (C4D)
During the reporting period, 23,589 individuals were reached and engaged around key life-saving messages and practices, making a total of 272,358 individuals reached in 13 governorates through interpersonal means since the beginning of 2016. UNICEF—with support from local partners—promoted key life-saving messages on disease prevention and reporting, routine immunization services and the importance of completing immunization schedules, handwashing with soap, household water storage, avoiding injuries from mines/UXOs and self-protection from falling debris.

Supply and Logistics
Since the escalation of the crisis in late March, a total of 4,157 metric tons of emergency supplies have been sent to Yemen. During the reporting period, two dhows were arranged to deliver supplies to Hodeidah port carrying medicines and Therapeutic spread. However, the first shipment faced a significant delay in getting the clearance to dock. In view of logistics capacity in the Djibouti Hub and the Ministry of Health storage capacity, vaccine shipments going through Djibouti Hub were restricted to smaller capacity planes. Such restrictions pose a new challenge in the supply chain to fulfill the high demand, efforts are ongoing to find the best suitable alternative.

Funding
In line with the Humanitarian Response Plan (HRP), UNICEF’s 2016 appeal is for US$180 million, UNICEF has received US$ 9.6 million against the appeal, leaving a 95 per cent funding gap. Additionally, US$ 59.7 million have been rolled over pledged against the 2015 appeal.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funding Received</th>
<th>Funding Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>US$</td>
<td>%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>61,500,000</td>
<td>1,362,700</td>
<td>2%</td>
</tr>
<tr>
<td>Health</td>
<td>36,000,000</td>
<td>3,772,130</td>
<td>10%</td>
</tr>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td>48,500,000</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>14,000,000</td>
<td>9,500</td>
<td>0%</td>
</tr>
<tr>
<td>Education</td>
<td>14,000,000</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>Social Protection in Emergency</td>
<td>6,000,000</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>Being allocated</td>
<td></td>
<td>4,476,768</td>
<td></td>
</tr>
<tr>
<td>Sub-Total</td>
<td>US$ 180,000,000</td>
<td>US$ 9,621,098</td>
<td>5%</td>
</tr>
<tr>
<td>Carry-forward</td>
<td></td>
<td>US$ 59,692,673</td>
<td></td>
</tr>
<tr>
<td>Total funding available**</td>
<td></td>
<td>US$ 69,313,771</td>
<td></td>
</tr>
<tr>
<td>Grand Total</td>
<td>US$ 180,000,000</td>
<td>US$ 69,313,771</td>
<td>39%</td>
</tr>
</tbody>
</table>

*Funds received do not include pledges.
**Total funding available includes total funds received against current appeal plus carry-forward.

Next SitRep: First week of April 2016.

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UNICEF Yemen Twitter: [@UNICEF_Yemen](https://twitter.com/UNICEF_Yemen)

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14 As of 22 February, 2016.
## SUMMARY OF PROGRAMME RESULTS

### 2016 PROGRAMME TARGETS AND RESULTS*

<table>
<thead>
<tr>
<th>Cluster UNICEF</th>
<th>2016 Overall needs</th>
<th>2016 Target</th>
<th>Total 2016 Results</th>
<th>2016 Target</th>
<th>Total 2016 Results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children under 5 are treated for Severe Acute Malnutrition (SAM)</td>
<td>319,966</td>
<td>178,562</td>
<td>6,283</td>
<td>178,562</td>
<td>6,383</td>
</tr>
<tr>
<td>Number of PLWs benefitted from the IYCF counselling</td>
<td>2,076,914*</td>
<td>313,119</td>
<td>25,757</td>
<td>313,119</td>
<td>25,757</td>
</tr>
<tr>
<td>Number of children under 5 given micronutrient interventions</td>
<td>4,298,163*</td>
<td>276,000</td>
<td>14,147</td>
<td>4,000,000</td>
<td>14,147</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children under 1 vaccinated against measles (MCVs)</td>
<td>953,363</td>
<td></td>
<td></td>
<td>770,000</td>
<td>2,775</td>
</tr>
<tr>
<td>Number of children under 5 vaccinated against polio</td>
<td>5,039,936</td>
<td></td>
<td>5,039,936</td>
<td>4,544,708*</td>
<td></td>
</tr>
<tr>
<td>Number of children under 5 receiving primary health care</td>
<td>2,387,000</td>
<td></td>
<td>815,000</td>
<td>62,007</td>
<td></td>
</tr>
<tr>
<td>Number of pregnant and lactating women receiving primary health care</td>
<td>2,076,000</td>
<td></td>
<td>680,000</td>
<td>73,368</td>
<td></td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of affected population (men, woman, boys and girls) provided with improved water sources and environmental sanitation services by developing, rehabilitating and maintaining the Public and community infrastructures</td>
<td>8,391,079</td>
<td>6,384,984</td>
<td>2,602,682</td>
<td>5,186,000</td>
<td>2,577,782*</td>
</tr>
<tr>
<td>Number of affected people with access to safe water as per agreed standards (7.5-15L per person per day)</td>
<td>1,750,000</td>
<td>682,332</td>
<td>307,917</td>
<td>100,000</td>
<td>64,149*</td>
</tr>
<tr>
<td>Number of affected people provided with standard basic hygiene kits</td>
<td>1,750,000</td>
<td>1,382,461</td>
<td>62,854</td>
<td>500,000</td>
<td>58,882</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children in conflict-affected areas covered by MRM interventions</td>
<td>2,473,352</td>
<td>1,372,933</td>
<td>66,500</td>
<td>1,372,933</td>
<td>66,500</td>
</tr>
<tr>
<td>Number of children in conflict-affected areas receiving psychosocial support</td>
<td>1,821,656</td>
<td>399,594</td>
<td>143,289</td>
<td>279,716</td>
<td>133,283*</td>
</tr>
<tr>
<td>Number of children and community members receiving knowledge to protect themselves against injury/death of mine/UXO explosion</td>
<td>1,927,153</td>
<td>502,158</td>
<td>253,753</td>
<td>351,511</td>
<td>253,373*</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of affected school-aged children provided with access to education via Temporary Learning Spaces and School Rehabilitation</td>
<td>497,200</td>
<td>244,500</td>
<td>3,276</td>
<td>156,000</td>
<td>2,676</td>
</tr>
<tr>
<td>Number of affected children receiving psychosocial support services in schools</td>
<td>1,800,000</td>
<td>575,500</td>
<td>10,361</td>
<td>173,000</td>
<td>9,671</td>
</tr>
<tr>
<td>Number of affected children with access to basic learning supplies, books and classroom furniture to be integrated into education systems</td>
<td>2,000,000</td>
<td>522,710</td>
<td>196,870</td>
<td>360,000</td>
<td>189,938*</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of vulnerable individuals reached with humanitarian Cash transfer in Yemen</td>
<td>8,000,000</td>
<td></td>
<td></td>
<td>34,285</td>
<td>25,613</td>
</tr>
<tr>
<td><strong>C4D</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of affected people reached through integrated C4D efforts</td>
<td>2,000,000</td>
<td></td>
<td></td>
<td>1,200,000</td>
<td>272,358</td>
</tr>
</tbody>
</table>

**Footnotes:**

(*) Some programme results appear high as they are part of ongoing efforts initiated in 2015 (i.e. “Number of affected population provided with improved water sources and environmental sanitation services”—an indicator which measures large-scale urban and rural water programmes; “Number of children under 5 vaccinated against polio” were results are mostly attributed to the national vaccination campaign ongoing since January). Other results are expected to be achieved more gradually.

1. UNICEF’s target for the indicator is 4,000,000 US children as Micronutrients interventions that UNICEF is supporting include Vit A supplementation and micronutrients sprinkles supplementation, while Nutrition cluster target did not include the Vit A supplementation and will consider only micronutrients sprinkles supplementation target 276,000 children under 5.

2. Number of PLWs benefitted from the IYCF counselling” estimated based on the total number of PLWs (8% of population). “Number of children under 5 given micronutrient interventions”, estimated based on the total number of children from 6 to 59 months old.

3. Cumulative catchment number of people accessing safe drinking water through rehabilitation / repair of the existing urban water supply systems with established operations/maintenance routines, rehabilitation of rural and urban water and sewage systems infrastructure including supply of equipment, spare parts, fuel, chemicals for treatment and other operation and maintenance costs, and the cumulative catchment of number of people benefiting from solid waste management services with supply of equipment, spare parts, fuel and other operational costs.

4. Number of people in need for urgent social protection, estimated by UNICEF based on SWF quarter 4-2014 report.

5. Total overall needs under this HPM indicator includes the total overall needs for “Number of affected children receiving psychosocial support services in schools”. Henceforth the total overall needs is 2,497,200.

6. UNICEF target for 2016 is markedly low compared to 2015 since this activity moved from being under the NFI/Shelter Cluster to being under the Protection Cluster. Associated with this change in clusters was a change in the limits of funds that could be appealed, and thus a change in the target.