

April 2021 – February 2022

OVERVIEW

World Vision has now concluded its 2nd phase of programming in Yemen (April 2021 - February 2022) with our implementing partner Medair. This follows the successful Phase 1 implementation (November 2019 - July 2020) with the Adventist Development and Relief Agency (ADRA). The aim of the partnering response in Phase 2 was to improve the health care and nutrition of acutely vulnerable people through targeted emergency aid in Lahj governorate, in southern Yemen. In addition to the successful partnerships with Medair and previously with ADRA, World Vision worked throughout Phases 1 and 2 in cooperation with Response Innovation Lab on public health messaging. Phase 3 of the Yemen response is now underway, continuing the provision of needed health and nutrition services to remote communities in Lahj governorate. An extension of Yemen Response with more projects is currently being discussed and planned.

LOOKING BACK AT PHASE 2

(April – February 2022)

Funding for Phase 2

Support Office / Source	Pledge (\$)
WV Canada	43,758
WVGermay (ADH*)	540,182
WV Malaysia	5,000
WV New Zealand	3,172
WV Taiwan	130,000
WV South Korea	60,000
Emergency Fund (EPRF)	120,000
Total	902,112

WORLD VISION - MEDAIR HEALTH AND NUTRITION PROJECT

- A formal partnership had been established with Medair after a thorough partner assessment process in April 2021.
- The project focused on the provision of primary health care and nutrition support activities in remote communities in Lahj governorate with a focus on children under five, pregnant/breastfeeding women.
- The project funded ambulance provided referrals to specialized health facilities.
- The project was implemented from 1st April until 31st December 2021, while the support to five local health facilities started in June.



The ambulance making its way through the rugged and mountainous areas of Lahj.

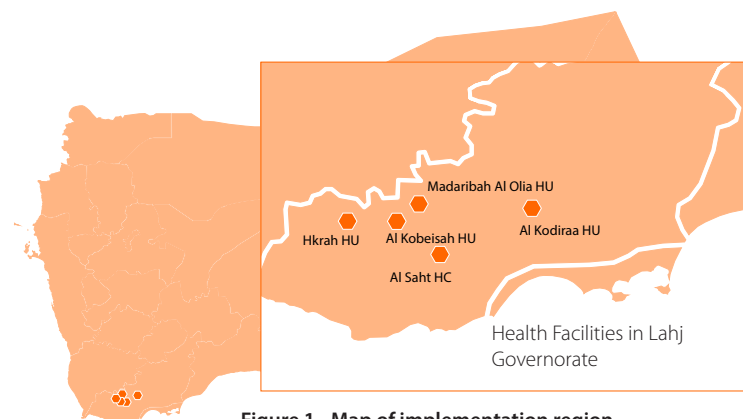


Figure 1 - Map of implementation region

The Yemen Response has not faced any serious security incidents in the context of this health and nutrition project, though there have been several security-related occurrences and challenges which the partner successfully resolved without significant impact on the project. These include unofficial checkpoints and threats to the Implementing Partner and the ambulance team, interference from the local government and power cuts.

Despite the challenges of the context, World Vision and Medair reached a total of 12,880 people, including 7,037 children benefitted from the provided health services and a total of 2,811 people, including 2,270 children, received support through the nutritional services.

HEALTH

12,880 beneficiaries

Women: 2,887
Men: 2,956
Total: 5,843

Girls: 3,441
Boys: 3,596
Total: 7,037

NUTRITION

2,811 beneficiaries

Women: 541
Men: 0
Total: 541

Girls: 1,110
Boys: 1,160
Total: 2,270

*ADH: Aktion Deutschland Hilft e.V.

Among the achievements of the project were:



The provision of 15,746 primary health care consultations, out of those 8,526 for children in five supported health facilities.



A clinical utilization rate which increased from 1.8 cons/pers/yr in the first quarter to 2.5 in the final quarter of the project implementation due to increased confidence of the community in the provided services.



Children's clubs were set up in five schools, reaching over 100 children with public health and behaviour change (BCC) messaging.



An overall acute malnutrition cure rate of 96% with no deaths.



775 female participants to BCC messaging on improved infant and child feeding practices.



35 Community Health Volunteers were trained and have conducted over 2,600 MUAC (mid-upper arm circumference) screenings.

RESPONSE INNOVATION LAB (RIL) PROJECT



The RIL Project is a continuation of a pilot experiment led by World Vision Yemen in 2020 to develop and disseminate public health content based on the innovative Adaptive Response Management (ARM) model.



The public health messages, which provided streamlined messages to vulnerable populations, were disseminated via social media and reached over 100,000 people.



While the first RIL project in 2020/2021 relied on contextualizing existing public health content from Somalia, the second phase in 2021/2022 focused on developing new Yemeni-produced content.



The produced videos are in the public domain and can be used by other humanitarian or developmental stakeholders to further their public health messaging.



The project was implemented from 1st June 2021 until 14th February 2022.



All of the produced health messaging videos for Yemen can be found on RIL's country webpage: <https://www.responseinnovationlab.com/yemen>

The titles of some of the videos that can be found there are:

- Vaccination is a safe and effective way to prevent disease and save lives – now more than ever (on Facebook this video had accumulated over 117,000 views by the end of February)
- Leila & Latif - Vaccinations
- What did Aisha see?
- Murad & Marwa – Clean Water
- Clean Water is Healthy!

OUTLOOK ON PHASE 3 (January 2022 onwards)

TRENDS

Health:

The conflict has led to a collapse Yemen's healthcare system. Only 50% of health facilities are functional and those that remain open lack qualified health staff, basic medicine and medical equipment.

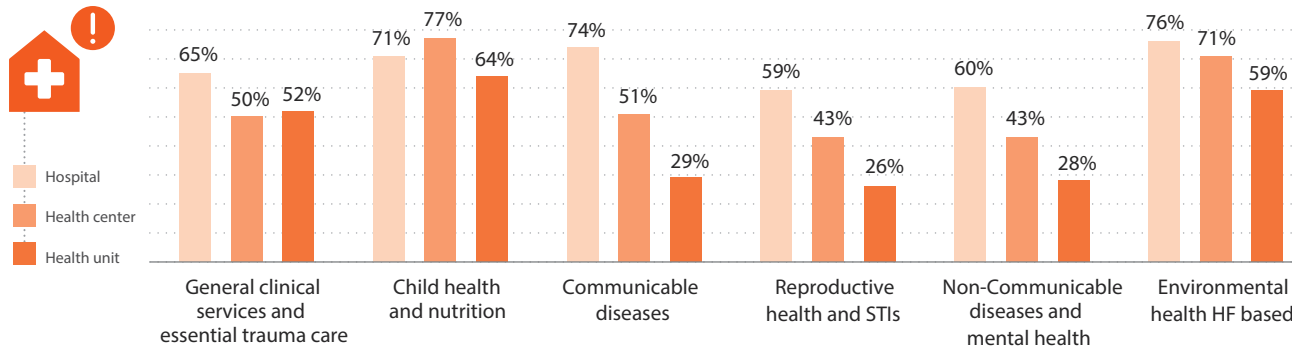


Figure 2. Availability of Health Services – OCHA 2021 Humanitarian Needs Overview, p.70

- Approximately [20.1 million people need health assistance, including 11.6 million people in acute need.](#)
- Routine vaccination coverage has stagnated, with [37% of children under one year of age missing routine vaccinations.](#)
- Outbreaks of cholera, measles, diphtheria and other vaccine-preventable diseases are occurring regularly.

Nutrition:

- Food insecurity continues to remain a key challenge and is [most severe in areas of active conflict and surrounding areas.](#)
- Acute food insecurity is a reality for [16.2 million people in the country](#); close to [400,000 children are suffering from severe acute malnutrition](#) and [47,000 people are facing famine-like conditions.](#)

COVID-19:

- The reality of the COVID-19 situation in Yemen remains unknown because the country's limited capacity to test and monitor its cases.
- Official case numbers are low, with only [11,061 cases, including 9,050 reported recoveries and 2,011 deaths](#) across the period of the pandemic reported on 1st February 2022.
- [The de-facto authority \(DFA\) in the north of Yemen \(also known as the Houthis\) deny the presence of COVID-19,](#) thus almost no testing or vaccination rollout for the virus is taking place.
- Vaccination rollouts are limited to the southern governorates, whereas of 31st January 2022, [only 744,060 vaccine doses had been administered,](#) which is about 2.6% of Yemenis having received their first COVID-19 vaccine dose.

WASH:

- Yemen has the [lowest water per capita ratio globally – 18 million people lack access to safe water and sanitation.](#)
- Communities and especially internally displaced people in informal settlements with limited access to clean water often have to resort to negative coping practices which are heightening the risk of malnutrition and increase risks for waterborne diseases and outbreaks including cholera.



Child Protection:

- Four out of five children in Yemen need humanitarian assistance.
- The number of children out of school and therefore exposed to multiple protection risks, [is estimated at 2 million](#). Over 19,000 grave violations against children have been verified since 2015, including [over 8,500 violations recorded between 2019 and 2020 alone](#).

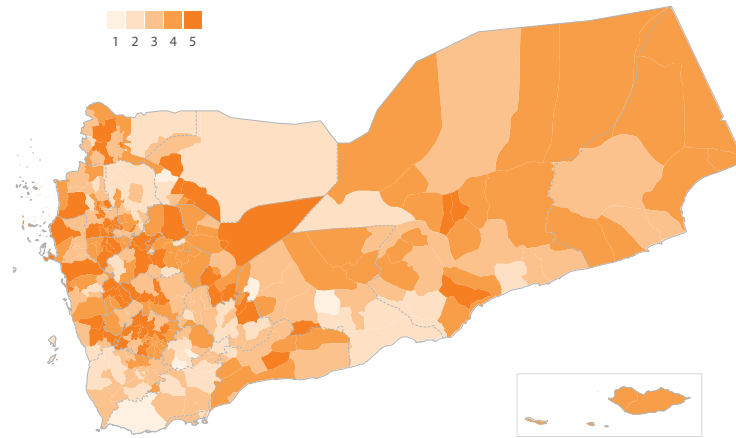


Figure 3. Child Protection Severity of Needs
OCHA 2021 Humanitarian Needs Overview, p.80



Security:

- The general security situation has [deteriorated significantly since October 2021](#).
- [In January 2022, a series of airstrikes by the Saudi-led coalition](#) on a detention center and a water reservoir in Sa'dah, multiple attacks on Hodeidah and on a residential area in Sana'a caused hundreds of civilian casualties: At least 108 people died, including three children, over 200 were wounded, more than 120,000 people were without access to safe water and the whole country was left without internet connection for four days.

Funding for Phase 3

Support Office / Source	Pledge (\$)
WV Canada	102,738
WV Germany (ADH)	516,000
WV Taiwan	150,000
WV South Korea	150,000
Emergency Fund (EPRF)	37,787
Total	956,525

As for January 2022 WV Yemen has mobilized up to USD 1 million for the new phase of programming. The funding is allocated towards health and nutrition sectors.

World Vision is continuing to explore opportunities for expansion of programming in new sectors, such as WASH, nutrition and child protection to reach more children in Yemen, exploring new internal and external funding streams.

The above-described health and nutrition project from Phase 2 that had been implemented in cooperation with Medair has just been renewed for another 9 months until the end of September 2022. It is being funded through contributions from ADH (through WV Germany) and private non-sponsorship contributions from WV Canada, WV Korea and WV Taiwan.

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