

YEMEN - COMPLEX EMERGENCY

FACT SHEET #5, FISCAL YEAR (FY) 2018

MARCH 9, 2018

NUMBERS AT A GLANCE

29.3 million

 Population of Yemen
 UN – December 2017

22.2 million

 People in Need of
 Humanitarian Assistance
 UN – December 2017

2 million

 IDPs in Yemen
 UN – December 2017

17.8 million

 Food-Insecure People
 UN – December 2017

16.4 million

 People Lacking Access to Basic
 Health Care
 UN – December 2017

16 million

 People Lacking Access to Basic
 Water and Sanitation
 UN – December 2017

9.9 million

 People Reached with Humanitarian
 Assistance in 2017
 UN – December 2017

HIGHLIGHTS

- Al Hudaydah Port remains open to humanitarian and commercial shipments
- Violence displaces more than 4,100 households within and from Al Hudaydah
- Risk of Famine persists amid ongoing conflict, limited food and fuel imports
- KSA and GoUAE pledge \$930 million to UN response plan

HUMANITARIAN FUNDING

FOR THE YEMEN RESPONSE IN FY 2017–2018

USAID/OFDA ¹	\$229,783,475
USAID/FFP ²	\$499,626,445
State/PRM ³	\$38,125,000
\$767,534,920	

KEY DEVELOPMENTS

- As of early March, Al Hudaydah Port continued to receive commercial and humanitarian shipments despite the mid-February 2018 expiration of the Kingdom of Saudi Arabia (KSA)-led Coalition's second 30-day extension of the port opening, the UN Verification and Inspection Mechanism (UNVIM) reports. As of March 9, the Coalition had not reinstated a time limit on the port remaining open. Total commercial imports through Yemen's Red Sea ports, including Al Hudaydah, remain approximately 30 percent lower than levels before the November 2017 port closures, as clearance delays, resulting higher costs, and concerns about future port restrictions continue to discourage shipping companies from using the port, according to UNVIM.
- Fighting between December 2017 and late February 2018 displaced more than 4,100 households from Al Hudaydah Governorate, damaged critical infrastructure, and disrupted coastal livelihoods activities, the UN reports. In response, humanitarian agencies—including U.S. Government (USG) partners—are providing affected populations with emergency food, health, shelter, and water, sanitation, and hygiene (WASH) assistance.
- As ongoing conflict continues to erode household purchasing power and restrict market access for many vulnerable households in Yemen, some populations already experiencing Emergency—IPC 4—levels of acute food insecurity may begin to experience Catastrophe—IPC 5—conditions in 2018 as they exhaust their coping capacities, according to the Famine Early Warning Systems Network (FEWS NET).⁴

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5. A Famine classification applies to a wider geographical location, while the term Catastrophe—IPC 5—refers to an extreme lack of food at the household level even with full employment of coping strategies. Famine is determined when more than 20 percent of households in an area are experiencing Catastrophe, when global acute malnutrition levels exceed 30 percent, and when the crude mortality rate exceeds two people per 10,000 persons per day.

HUMANITARIAN ACCESS, POPULATION DISPLACEMENT, AND INSECURITY

- Al Hudaydah Port remained open to commercial and humanitarian shipments as of early March, several weeks beyond the mid-February 20 expiration of the Coalition’s second 30-day extension of the port’s opening; the Coalition has not indicated that it will place a further time limit on access to the port. However, uncertainty about the possibility of future port closures and delays in receiving entry and exit clearances continue to discourage shipping companies, particularly those transporting containerized cargo, from using the port, UNVIM reports. As a result, relief actors report delays in procuring and distributing humanitarian commodities and increased operational costs, according to the UN. As of mid-February, total commercial imports through Yemen’s Red Sea ports of Al Hudaydah and Al Saleef were approximately 30 percent less than before the port closures in November 2017, UNVIM reports.
- In response to increased need for humanitarian imports into Yemen, the UN World Food Program (WFP) has chartered a second vessel, VOS Theia, to transport humanitarian cargo and personnel between Al Hudaydah Port and Djibouti and to serve as a humanitarian security outlet in event of an evacuation. WFP’s other chartered vessel, VOS Apollo, serves Aden Port.
- Clashes and airstrikes that escalated in December 2017 continue in western Yemen’s Al Hudaydah and Ta’izz governorates. As of late February, the violence had displaced more than 4,100 households—approximately 28,700 people—within Al Hudaydah and to nearby governorates, according to the UN. In addition, the fighting has limited road access between Al Hudaydah’s Hays and Al Jarrahi districts, resulting in commodity shortages and price increases in local markets. The clashes and airstrikes have damaged public infrastructure in Hays, including the district’s main health facility, water desalination plant, and the primary bridge connecting Hays to Al Jarrahi, restricting humanitarian access. Violence in coastal areas of the governorates has disrupted farming and fishing activities, negatively impacting large populations of Yemenis dependent on fishing and agriculture for livelihoods.
- In response, relief agencies, including State/PRM partner the Office of the UN High Commissioner for Refugees (UNHCR), are providing emergency assistance to newly displaced households, including hygiene kits, shelter supplies, and other emergency relief items. In late February, USAID/FFP partner WFP provided emergency food assistance to approximately 6,000 internally displaced persons (IDPs) in Al Hudaydah. Between December and early February, USAID/OFDA partner the UN World Health Organization (WHO) delivered 20 tons of medicines and medical supplies to health facilities in the governorate.

FOOD SECURITY AND NUTRITION

- Sustained essential commodity imports are necessary to reduce the risk of Famine—IPC 5—levels of acute food insecurity in Yemen in 2018, according to a February 16 FEWS NET alert. Even without additional disruptions, such as port closures or access restrictions, FEWS NET anticipates many Yemenis will continue facing Crisis—IPC 3—levels of acute food insecurity. Emergency food assistance is likely preventing a further deterioration of food security conditions; however, FEWS NET projects that conflict could further constrain economic activities, eroding purchasing power and restricting market access for many vulnerable households in Yemen in the coming months. As a result, some vulnerable populations already experiencing Emergency levels of acute food insecurity may begin to experience Catastrophe conditions as they exhaust their coping capacities.
- The combined effects of limited economic activity and purchasing power, rising food and fuel prices, and devaluation of the Yemeni rial, which depreciated approximately 60 percent during 2017, have rendered staple food commodities too expensive for many food-insecure households, according to the UN Food and Agriculture Organization (FAO). A January rapid food security assessment conducted by FAO in conflict-affected southern districts of Al Hudaydah indicated a more than 30 percent increase in food commodity prices—including wheat and other local cereals—since the beginning of the crisis. Additionally, the devaluation of the rial may increase the cost of future imports, leading to additional price increases, FEWS NET reports.

- As of February, global acute malnutrition levels exceeded the WHO emergency threshold of 15 percent in the southwestern governorates of Abyan, Al Hudaydah, Ibb, and Lahij, as well as Hadramawt Governorate in eastern Yemen, according to the Nutrition Cluster.⁵ The most frequent instances of untreated cases of severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) are among children located in conflict-affected Al Hudaydah and Ta'izz, with some districts reporting up to 6,000 untreated SAM cases and up to 36,000 untreated MAM cases, the cluster reports. Nutrition Cluster partner organizations treated more than 255,000 children experiencing SAM and more than 360,000 children experiencing MAM in 2017.
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HEALTH AND WASH

- WHO reported more than 1,075,000 suspected cholera cases, including 2,264 related deaths, between late April 2017 and early March. Although the prevalence of new cholera cases has been declining since October 2017, the risk of a cholera resurgence remains as the 2018 rainy seasons approach. Health actors anticipate surges in the number of cases in April and August following the March and July rainy seasons, respectively. USAID/OFDA partners are pre-positioning materials, maintaining contingency funds for health worker incentives, and providing cholera treatment centers (CTCs) with cholera supplies in advance of a potential cholera resurgence.
 - In February, a USAID/OFDA partner supported 28 oral rehydration centers and 12 CTCs in Aden, Ad Dali', Ibb, Lahij, Sana'a, and Ta'izz governorates by providing essential medications, health worker incentives, intravenous fluids, and safe drinking water, to benefit more than 2,200 suspected cholera patients. The partner also provided safe drinking water to 13 health facilities in Sana'a and 28 health facilities in Lahij from late January to late February. In January, the partner provided safe drinking water to four CTCs in Ad Dali' and 30 health facilities in Lahij, distributed cholera-specific hygiene kits to nearly 1,900 households in Lahij, and reached nearly 22,000 people with health messaging on cholera prevention methods.
 - Health authorities reported more than 300 new suspected cases of diphtheria—a preventable, highly infectious respiratory disease—in February, bringing the total number of suspected diphtheria cases to more than 1,260, including 73 associated deaths, since mid-August 2017, the Sana'a Ministry of Public Health and Population (MoPHP) reports. Al Hudaydah and Ibb remain the most-affected governorates, accounting for nearly half of the diphtheria caseload. As of early March, the MoPHP had yet to initiate diphtheria vaccination activities, despite receiving adequate vaccine supplies in late December.
 - A USAID/OFDA partner is supporting rapid response teams (RRTs) to detect and refer suspected diphtheria cases to a diphtheria treatment unit in Ibb. The organization also provides essential drugs and equipment to RRTs responding to the outbreak. From late January to late February, the partner reached nearly 1,500 people with hygiene promotion activities and 600 people with information on the prevention of diphtheria, in addition to distributing handwashing materials, water storage containers, and other sanitation supplies to improve medical waste management and infection prevention measures in Sana'a Governorate health facilities.
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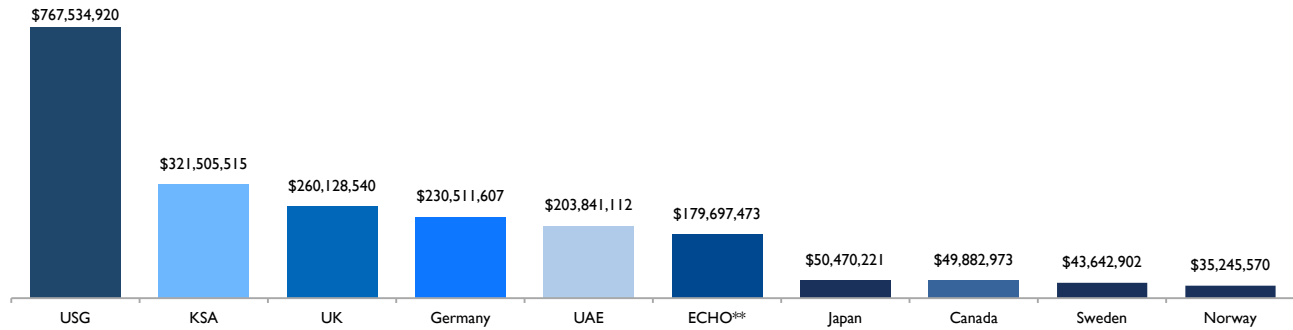
OTHER HUMANITARIAN ASSISTANCE

- On February 12, UN Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator Mark Lowcock announced a commitment from the KSA and the Government of the United Arab Emirates (GoUAE) to contribute \$930 million to the 2018 Yemen Humanitarian Response Plan (HRP) by March 31. Once received, the contribution will account for nearly one-third of the HRP's approximately \$3 billion funding request. The two countries also committed to raising \$500 million from other regional donors to meet the \$1.5 billion pledged by the Coalition's Yemen Comprehensive Humanitarian Operations plan launched on January 22.

⁵ The coordinating body for humanitarian nutrition activities, comprising UN agencies, non-governmental organizations, and other stakeholders.

2017–2018 HUMANITARIAN FUNDING*

PER DONOR



Funding figures are as of March 9, 2018. All international figures are according to UN Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service and based on international commitments during the calendar year, while USG figures are according to the USG and reflect publicly announced USG funding for FY 2017 and FY 2018, which run from October 1 to September 30.

**European Commission's Directorate-General for Humanitarian Aid and Civil Protection (ECHO)

CONTEXT

- Between 2004 and early 2015, conflict between Republic of Yemen Government (ROYG) and Al Houthi opposition forces in the north and between Al Qaeda-affiliated groups and RoYG forces in the south affected more than 1 million people and repeatedly displaced populations in northern Yemen, resulting in humanitarian needs. Fighting between RoYG forces and tribal and militant groups since 2011 limited the capacity of the RoYG to provide basic services, and humanitarian needs increased among impoverished populations. The expansion of Al Houthi forces in 2014 and 2015 resulted in the renewal and escalation of conflict and displacement, further exacerbating already deteriorated humanitarian conditions.
- In March 2015, the KSA-led Coalition began airstrikes against Al Houthi and allied forces to halt their southward expansion. The ongoing conflict has damaged or destroyed public infrastructure, interrupted essential services, and reduced commercial imports to a fraction of the levels required to sustain the Yemeni population; the country relies on imports for 90 percent of its grain and other food sources.
- Since March 2015, the escalated conflict, coupled with protracted political instability, the resulting economic crisis, rising fuel and food prices, and high unemployment, has left more than 17.8 million people food-insecure and more than 22.2 million people in need of humanitarian assistance. In addition, the conflict had displaced nearly 3 million people, including more than 900,000 people who had returned to areas of origin, as of December 2017. The volatility of the current situation prevents relief agencies from obtaining accurate, comprehensive demographic information.
- In late April 2017, a cholera outbreak that began in October 2016 resurged, necessitating intensive humanitarian response efforts throughout the country, particularly health and WASH interventions. The USG is supporting partners to respond to increased humanitarian needs resulting from the cholera outbreak.
- On October 24, 2017, U.S. Ambassador Matthew H. Tueller re-issued a disaster declaration for the ongoing complex emergency in Yemen for FY 2018 due to continued humanitarian needs resulting from the complex emergency and the impact of the country's political and economic crises on vulnerable populations.

USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2017–2018¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
Implementing Partners (IPs)	Agriculture and Food Security, Economic Recovery and Market Systems, Health, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Nutrition, Protection, Shelter and Settlements, WASH	Abyan, Aden, Amanat al-Asimah, Amran, Ad Dali', Dhamar, Hadramawt, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Al Mahwit, Marib, Raymah, Sa'dah, Sana'a, Shabwah, Ta'izz	\$114,085,513
International Organization for Migration (IOM)	Health, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Nutrition, Protection, Shelter and Settlements, WASH	Countrywide	\$26,500,000
OCHA	Humanitarian Coordination and Information Management	Countrywide	\$10,500,000
UN Children's Fund (UNICEF)	Health, Nutrition, Protection, WASH	Abyan, Aden, Amran, Al Bayda', Ad Dali', Dhamar, Hadramawt, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Al Mahwit, Marib, Sa'dah, Sana'a, Shabwah, Ta'izz	\$25,000,000
UN Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Aden, Al Hudaydah, Sana'a	\$2,500,000
WFP	Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities	Countrywide	\$10,000,000
WHO	Health, Humanitarian Coordination and Information Management, Nutrition	Abyan, Aden, Amanat al-Asimah, Al Bayda', Ad Dali', Al Hudaydah, Hajjah, Al Jawf, Lahij, Marib, Sa'dah, Ta'izz	\$36,000,000
	Health, WASH	Abyan, Aden, Amran, Al Bayda', Ad Dali', Dhamar, Hadramawt, Hajjah, Al Hudaydah, Ibb, Lahij, Sa'dah, Sana'a, Ta'izz	\$2,282,413
	Program Support		\$2,915,549
TOTAL USAID/OFDA FUNDING			\$229,783,475
USAID/FFP³			
FAO	Food Security and Livelihoods	Countrywide	\$800,000
IPs	Food Vouchers	Abyan, Ad Dali', Hajjah, Al Hudaydah, Lahij, Al Mahwit, Sana'a, Ta'izz	\$28,153,721
UNICEF	Transport of 830 metric tons Ready-to-Use Therapeutic Food	Abyan, Aden, Ad Dali', Hadramawt, Lahij	\$3,381,730
WFP	U.S. In-Kind Food	20 governorates	\$365,290,994
	U.S. In-Kind Food, Food Vouchers, Local Purchase and Milling	20 governorates	\$102,000,000
TOTAL USAID/FFP FUNDING			\$499,626,445
STATE/PRM			
IP	Health, Logistics Support and Relief Commodities, Protection, Shelter and Settlements, WASH	Countrywide	\$16,125,000

IOM	Evacuation and Humanitarian Assistance for Vulnerable Migrants	Regional, Djibouti, Ethiopia, Yemen	\$6,100,000
UNHCR	Camp Coordination and Camp Management, Logistics Support and Relief Commodities, Protection, Refugee Response, Shelter and Settlements	Countrywide	\$15,900,000
TOTAL STATE/PRM FUNDING			\$38,125,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2017–2018			\$767,534,920

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of March 9, 2018.

² USAID/OFDA funding represents anticipated or actual obligated amounts as of September 30, 2017.

³ Estimated value of food assistance and transportation costs at time of procurement; subject to change.

PUBLIC DONATION INFORMATION

The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.

USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.

More information can be found at:

- USAID Center for International Disaster Information: www.cidi.org or +1.202.661.7710.
- Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>