



YEMEN - COMPLEX EMERGENCY

FACT SHEET #7, FISCAL YEAR (FY) 2018

MAY 4, 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

- Conflict intensifies in northern and western Yemen, resulting in civilian casualties, water infrastructure destruction, and additional displacement
- Low commercial imports contribute to high prices and shortages, hindering access to basic items and services
- Health actors identify seven laboratory-confirmed cholera cases

HUMANITARIAN FUNDING

FOR THE YEMEN RESPONSE IN FY 2017–2018

USAID/OFDA ¹	\$231,180,626
USAID/FFP ²	\$571,018,096
State/PRM ³	\$52,025,000
\$854,223,722	

KEY DEVELOPMENTS

- From late March to late April, several Kingdom of Saudi Arabia (KSA)-led Coalition airstrikes caused the deaths of at least 109 civilians, the UN reports. Additionally, escalating insecurity in Sa'dah and Ta'izz governorates resulted in the death of an International Committee of the Red Cross (ICRC) staff member and destroyed a water system that supplies safe drinking water to approximately 7,500 people. Relief actors issued statements condemning the incidents and emphasizing the importance of protecting civilians and civilian infrastructure.
- Humanitarian actors are concerned for the safety of more than 4,000 civilians located near the frontlines of the conflict in Al Hudaydah Governorate, according to the UN. In response, relief organizations have pre-positioned emergency relief commodities, such as hygiene kits, for rapid dispatch to displacement sites in the governorate.
- Two ships chartered by USAID/FFP partner the UN World Food Program (WFP) discharged 57,000 metric tons (MT) of U.S. in-kind wheat grain—sufficient to feed more than 5 million people for one month—at Yemen's Aden and Al Hudaydah ports in April.
- Following the identification of seven positive cholera cases in Al Hudaydah in mid-April, relief actors activated a rapid response team to decommission a contaminated water source and chlorinate water sources across the governorate, the UN reports.
- Newly arrived asylum seekers, migrants, and refugees to Yemen are facing dire conditions, including abuse, extortion, deportation, and human trafficking, according to the Office of the UN High Commissioner for Refugees (UNHCR). UNHCR is supporting registration activities for newly arrived populations and calls on all state and non-state actors to comply with international humanitarian law.

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)

HUMANITARIAN ACCESS, POPULATION DISPLACEMENT, AND INSECURITY

- Several Coalition airstrikes in Hajjah, Al Hudaydah, Sa'dah, and Ta'izz governorates from March 29–April 24 resulted in the deaths of at least 109 people and injured more than 100 others. The incidents include an aerial attack during a wedding ceremony in Hajjah, which caused the deaths of at least 20 civilians and injured approximately 50 others, half of whom were children. Additionally, mid-April insecurity in Sa'dah's Sehar District destroyed the Al Hamazat water system, leaving 7,500 people without access to safe drinking water, the UN Children's Fund (UNICEF) reports.
- On April 21, unknown armed actors attacked an ICRC vehicle near Ta'izz city, Ta'izz, resulting in the death of one ICRC staff member. Following the attack, UN Secretary-General Antonio Guterres, UN Resident and Humanitarian Coordinator for Yemen Lise Grande, and 15 international non-governmental organizations (NGOs) released statements condemning the incident and urging parties to the conflict to respect international humanitarian law and the safety of humanitarian staff. UN Secretary-General Guterres issued a subsequent statement in late April, reiterating the importance of protecting civilians and civilian infrastructure and calling for investigations into recent airstrikes.
- UN Special Envoy to Yemen Martin Griffiths expressed concern to the UN Security Council in mid-April regarding intensified military operations in Sa'dah, as well as airstrikes and military confrontations in Al Bayda', Al Hudaydah, Al Jawf, Lahij, Marib, Sana'a, and Ta'izz governorates.
- As of April 30, fighting in Al Hudaydah and Ta'izz had displaced more than 130,000 people since December 2017, the UN reports. The displacement is increasing the size of several scattered internally displaced person (IDP) sites in Al Hudaydah. Approximately 147,000 IDPs live in more than 850 IDP sites across Yemen, according to the Camp Coordination and Camp Management and Shelter Cluster.⁴
- Relief actors are concerned for the safety of more than 4,000 civilians near the frontlines in Al Hudaydah, including populations in the governorate's Hays District. In response to escalating insecurity near Hays District, humanitarian actors have pre-positioned emergency relief items—including high-energy biscuits, hygiene kits, safe drinking water, and transitional shelter supplies—for distribution to IDP service delivery points within Hays and neighboring Al Khawkah District, the UN reports.
- In late April, State/PRM partner UNHCR reached nearly 2,200 displaced households, or 13,200 people, with emergency relief assistance in Al Hudaydah, the UN reports. From January–March, relief actors delivered food assistance, distributed rental subsidies, provided emergency shelter and transitional shelter assistance, rehabilitated homes, and supplied winterization support benefitting nearly 41,000 Yemeni households—or 246,000 people.

FOOD SECURITY AND NUTRITION

- Low commercial food imports continue to limit access to basic food items for the 17.8 million food-insecure people in Yemen, according to WFP. UN Verification and Inspection Mechanism (UNVIM) reports that 11 vessels carrying approximately 117,000 MT of food were awaiting Coalition permission to enter Red Sea port anchorage areas as of April 24.
- Due to insufficient commercial and humanitarian imports, currency depreciation, and collapsed market systems, food commodity prices continued to increase in March, according to WFP. The average cost of the monthly minimum food basket increased by 3 percent across Yemen from February to March, hindering vulnerable populations from purchasing basic food items.

⁴ The coordinating body for humanitarian camp coordination, camp management, and shelter activities, comprising UN agencies, NGOs, and other stakeholders.

- A significant proportion of Yemeni people will continue to face Crisis—IPC 3—or Emergency—IPC 4—levels of acute food insecurity through May, according to the Famine Early Warning Systems Network (FEWS NET).⁵ As vulnerable households exhaust coping capacity, populations may experience Catastrophe—IPC 5—levels of acute food insecurity in 2018.
- In response to significant food needs throughout Yemen, WFP continues to provide emergency food assistance to vulnerable households. During March, WFP reached more than 6.2 million beneficiaries in Yemen with food assistance, including in-kind food rations and food vouchers. WFP’s emergency operation in Yemen supports the country’s most severely food-insecure populations through monthly food distributions.
- More recently, two WFP-chartered ships delivered approximately 57,000 MT of USAID/FFP-funded in-kind wheat grain to Yemen’s Aden and Al Hudaydah ports in April for onward distribution in the coming months. Collectively, the food commodities are sufficient to feed more than 5 million people for one month under the UN agency’s emergency operation plan.
- More than 1.8 million children in Yemen are experiencing acute malnutrition, including 500,000 children suffering from severe acute malnutrition (SAM). USAID/OFDA partner the UN World Health Organization (WHO) is providing life-saving treatment for SAM patients with medical complications. With support from USAID/OFDA and other donors, WHO is scaling up emergency nutrition assistance by establishing additional nutrition stabilization centers, delivering nutrition kits, and training health workers.
- USAID/OFDA partners admitted nearly 1,700 children ages five years and younger and pregnant and lactating women experiencing moderate acute malnutrition and more than 300 children experiencing SAM for treatment at fixed and mobile health units in Abyan, Ad Dali’, Amanat al-Asimah, Ibb, Lahij, and Shabwah governorates during March.
- USAID/OFDA partners also trained more than 1,000 health personnel in Ibb and Al Mahwit governorates on community management of acute malnutrition and infant and young child feeding (IYCF) practices in March and early April. Partner-supported community nutrition volunteers in Abyan, Ad Dali’, and Lahij reached more than 900 people with nutrition education sessions from April 1–15, while mobile outreach teams conducted ICYF consultations for nearly 160 pregnant and lactating women.

HEALTH AND WASH

- Relief actors continue to respond to Yemen’s massive cholera outbreak—the largest in the world with nearly 1.1 million suspected cases and 2,277 related deaths—and are preparing for a potential increase in new cholera cases due to the ongoing rainy season. Following seven laboratory-confirmed cholera cases in Al Hudaydah, WASH Cluster partners activated a rapid response team to decommission a contaminated water source and ensure all water sources are chlorinated across the governorate.
- In late April, the Health Cluster released the 2018 Yemen Integrated Cholera Prevention and Control Strategic Plan to guide preparedness and response activities in 2018. The plan includes preparation for an oral cholera vaccination campaign and draws upon lessons learned from the cholera outbreak response in 2016/2017 to improve relief efforts, such as enhancing coordination between humanitarian organizations, clusters, and local authorities.
- Health Cluster partners are supporting nearly 150 diarrhea treatment centers and 250 oral rehydration centers across 17 governorates with an ability to expand should cases increase, and USAID/OFDA partners are implementing prevention activities, maintaining contingency funds for health worker incentives, and pre-positioning supplies.

⁵ 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.

- Yemen’s incapacitated health system and lack of routine vaccinations are also contributing to the resurgence of other previously contained diseases, such as diphtheria and measles. Between mid-August 2017 and late April 2018, health authorities recorded more than 1,600 suspected diphtheria cases, including 88 related deaths, the UN reports.
- In mid-March, national health authorities and USAID/OFDA partners UNICEF and WHO completed a large-scale vaccination campaign in 39 high-risk districts in Yemen to control the spread of diphtheria and other communicable diseases. The campaign reached nearly 2 million children with pentavalent and tetanus–diphtheria vaccines, representing approximately 73 percent of the targeted population, UNICEF reports.
- As of March 31, health actors had reported nearly 2,500 suspected measles cases and 56 associated deaths in 2018, according to the Health Cluster. The measles outbreak has affected nearly all Yemeni governorates, with Aden and Al Bayda’ governorates accounting for nearly 40 percent of the total caseload. Nearly 80 percent of people with suspected measles are unvaccinated. As of late March, health actors had vaccinated more than 559,000 children against measles and rubella in 26 high-risk districts.
- In coordination with health authorities, a USAID/OFDA partner reached nearly 35,000 children in Lahij with measles, mumps, and rubella (MMR) vaccines, amounting to more than 80 percent of the targeted population. The campaign’s coverage represents an improvement compared to the partner’s 2017 MMR vaccination campaign, which achieved only 35 percent coverage in the governorate.
- From March to mid-April, USAID/OFDA partners conducted hygiene promotion and disease prevention sessions for approximately 27,500 people, distributed 2,000 hygiene kits, provided safe drinking water to 22,000 people, and trained nearly 130 community volunteers and health workers on acute watery diarrhea and cholera prevention and response in Ad Dali’, Hadramawt, Ibb, Lahij, and Ta’izz governorates. USAID/OFDA partners also provided water trucking services for nearly 50 health facilities, more than 30 water points, and two IDP host sites in Lahij, Sana’a, and Ta’izz.

LOGISTICS AND RELIEF COMMODITIES

- WFP is expanding transport capacity to respond to increasing humanitarian needs, with USAID/OFDA support. WFP commissioned the VOS Theia in March to transport relief commodities and staff from Djibouti to Al Hudaydah Port. The vessel can transport up to 600 MT of cargo and 27 passengers per trip and completed its first voyage on March 17, carrying more than 110 MT of humanitarian cargo.
- WFP launched a partnership with Air Djibouti in March to transport 400 MT of humanitarian supplies from Djibouti to Sana’a International Airport from March–May, enabling faster facilitation of humanitarian airlifts. In mid- and late March, WFP transported more than 100 MT of humanitarian supplies—including for several USAID/OFDA partners—from Djibouti to Sana’a International Airport via two airlifts.
- As high fuel prices persist in Yemen, WFP continues to provide fuel for relief actors and is exploring options to increase fuel storage capacity in Sana’a for Logistics Cluster partners. Approximately 101,000 MT of commercial fuel arrived at Red Sea ports from April 1–24, representing approximately 19 percent of the country’s monthly fuel needs, UNVIM reports. The low amount of imported fuel has resulted in persistently poor fuel supply at local markets, according to the UN.

PROTECTION AND SHELTER

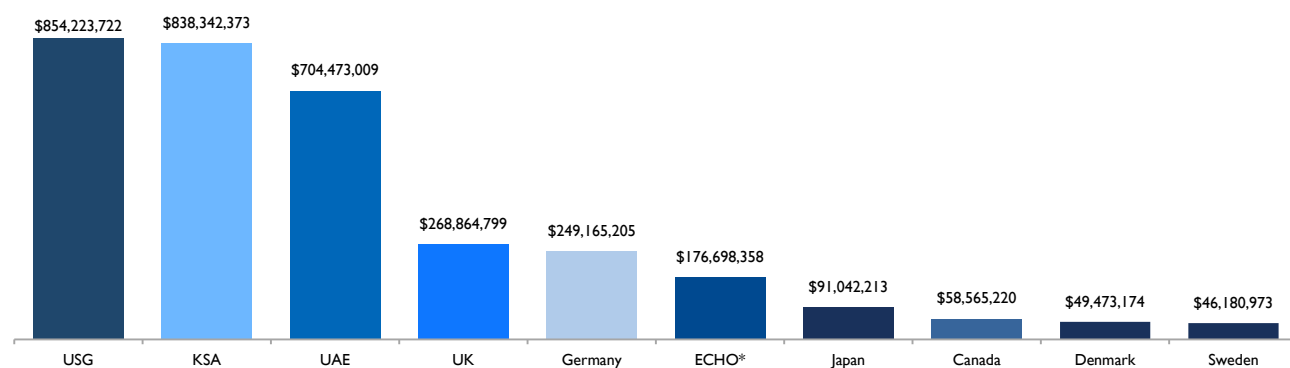
- Displaced persons, including those living in public buildings, collective centers, or spontaneous settlements face increasing protection and health risks, according to the Protection Cluster. IDPs are vulnerable to recruitment by armed groups and negative coping mechanisms, such as child labor and early marriage. In addition, deteriorating shelter conditions, such as overcrowding and unsanitary IDP settlements, have led to heightened susceptibility to communicable diseases.

- UNHCR recently established an IDP community center in Ibb—the sixth center in Yemen—in response to increased protection needs among displaced populations in Ibb and Ta’izz. UNHCR reports that large numbers of IDPs in Ibb are using the center on a daily basis to access financial, legal, and psychosocial support services.
- In mid-April, UNHCR expressed concern regarding the dire situation of newly arrived asylum seekers, migrants, and refugees in Yemen. UNHCR reported increasing accounts of extortion, deportation, and human trafficking for these newly arrived populations, with reports of smugglers often abusing and detaining the people who they have agreed to transport overseas.
- Additionally, UNHCR reports many new arrivals are experiencing physical and sexual harassment and violence, including rape and forced nudity, inside detention facilities.
- Since February, UNHCR has supported authorities in Yemen to receive, register, and document asylum seekers and refugees and is working with approximately 100 new arrivals currently detained in Yemen. UNHCR is appealing to all state and non-state actors that manage detention facilities holding new arrivals to ensure the populations are treated humanely and with dignity in accordance with refugee and international human rights law. UNHCR is also requesting unfettered access to detainees to assist those seeking international protection. In 2017, more than 87,000 people arrived in Yemen from the Horn of Africa, according to UNHCR.

OTHER HUMANITARIAN ASSISTANCE

- The 2018 Yemen Humanitarian Response Plan had received approximately \$1.35 billion, including more than \$942 million in contributions from the KSA and United Arab Emirates (UAE), as of May 4—representing nearly 46 percent of the \$2.96 billion requested.

2017–2018 HUMANITARIAN FUNDING* PER DONOR



Funding figures are as of April 3, 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 U.S. Government (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 2017–2018 ¹

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 Settlement, 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
UNICEF	Health, Nutrition, Protection, WASH	Abyan, Aden, Al Bayda', Amran, 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	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, Al Jawf, Hajjah, Lahij, Marib, Sa'dah, Ta'izz	\$36,000,000
	Health, WASH	Abyan, Aden, Amran, Al Bayda', Ad Dali', Al Hudaydah, Dhamar, Hadramawt, Hajjah, Ibb, Lahij, Sa'dah, Sana'a, Ta'izz	\$2,282,413
	Program Support		\$4,312,700
TOTAL USAID/OFDA FUNDING			\$231,180,626

USAID/FFP³			
Implementing Partners	Food Vouchers	Abyan, Ad Dali', Al Hudaydah, Al Mahwit, Hajjah, Lahij, Sana'a, Ta'izz	\$28,153,721
UNICEF	Transport of 830 MT Ready-to-Use Therapeutic Food (RUTF)	Abyan, Aden, Ad Dali', Hadramawt, Lahij	\$3,381,730
UN Food and Agriculture Organization (FAO)	Food Security and Livelihoods	Countrywide	\$1,650,000
WFP	U.S. In-Kind Food	20 governorates	\$435,832,645
	U.S. In-Kind Food, Food Vouchers, Local Purchase and Milling	20 governorates	\$102,000,000
TOTAL USAID/FFP FUNDING			\$571,018,096

STATE/PRM			
IP	Health, Logistics Support and Relief Commodities, Shelter and Settlements, Protection, 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, Protection, Shelter and Settlements, Logistics Support and Relief Commodities, Refugee Response	Countrywide	\$29,800,000
TOTAL STATE/PRM FUNDING			\$52,025,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2017			\$854,223,722

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of April 3, 2018.

² USAID/OFDA funding represents anticipated or actual obligated amounts as of April 3, 2018.

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>