



YEMEN - COMPLEX EMERGENCY

FACT SHEET #5, FISCAL YEAR (FY) 2016

JANUARY 28, 2016

NUMBERS AT A GLANCE

26 million

Estimated Population of Yemen

OCHA - November 2015

21.2 million

People in Need of Urgent Humanitarian Assistance

OCHA - November 2015

19.3 million

People in Need of WASH Services

OCHA - November 2015

14.1 million

People Lacking Access to Basic Health Care

OCHA – November 2015

6 million

People in Need of Emergency Food Assistance

FEWS NET – November 2015

2.5 million

IDPs in Yemen
UNHCR, IOM – December 2015

8.8 million

People Reached with Humanitarian Assistance in 2015

OCHA – January 2016

HIGHLIGHTS

- WFP delivers emergency food assistance to communities in Al Houthi-besieged areas of Ta'izz city
- High-level UN mission travels to Ibb and Ta'izz governorates, conducts assessment in besieged areas of the city of Ta'izz
- UN indefinitely postpones Yemen peace negotiations

HUMANITARIAN FUNDING

FOR THE YEMEN RESPONSE IN FY 2015

\$178,816,101				
\$45,300,000				
\$71,486,457				
\$62,029,644				

KEY DEVELOPMENTS

- USAID/FFP partner the UN World Food Program (WFP) reports that a 12-truck convoy entered the Al Houthi-besieged districts of Al Qahira and Mudhafa in the city of Ta'izz on January 21, delivering 3,000 household food rations, sufficient to support 18,000 people for a one-month period. The emergency food parcels comprised wheat, pulses, sugar and vegetable oil. WFP has delivered emergency food assistance to some areas of the city since December 2015; however, active fighting, blockades, and bureaucratic impediments had prevented the UN agency from reaching besieged areas. According to the USAID-funded Famine Early Warning Systems Network (FEWS NET) most households in Ta'izz are experiencing Emergency—IPC 4—levels of food insecurity.4
- Republic of Yemen Government (RoYG) Vice President Khaled Bahah and members of
 the RoYG cabinet returned to Yemen's southern port city of Aden on January 25. The
 return of the Vice President and other officials is aimed at establishing a permanent
 government presence in Aden, according to international media reports; however,
 officials did not provide further information regarding an expected timeline.
- The UN has indefinitely postponed the next round of peace talks between the RoYG, Al
 Houthi representatives, and other stakeholders due to ongoing disagreements regarding
 the start date and location of the talks. Although the UN had anticipated resuming
 negotiations by late January, the date remains undetermined.

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 I—to Famine—IPC 5.

INSECURITY AND HUMANITARIAN ACCESS

- On January 21, UN Resident and Humanitarian Coordinator (RC/HC) for Yemen Jamie McGoldrick and other high-level UN officials completed a mission to Ibb and Ta'izz governorates, including to an enclave of the city of Ta'izz, comprising three districts within the city where humanitarian access has been difficult for many months. The purpose of the visit was to meet with local authorities and armed groups, discuss access issues, and assess humanitarian conditions. RC/HC McGoldrick reported that few shops in the enclave of Ta'izz city remain open, with food and other basic goods in short supply, although he also observed people bringing food, cooking gas, and other commodities into the city. Basic services are also scarce, inhibiting access to fuel, health care, and water. The UN delegation also visited the city's Al Thawra Hospital, which recently sustained conflict-related damages. The hospital—one of few functional health facilities in the besieged area—is experiencing medical and pharmaceutical supply shortages, according to the UN. Following the mission, RC/HC McGoldrick appealed to all authorities and armed parties to the conflict to allow regular and sustained humanitarian access into the city of Ta'izz. The UN also called for all parties to observe international humanitarian law (IHL) and refrain from targeting civilian infrastructure.
- On January 16, Médecins Sans Frontières (MSF) delivered medical supplies to besieged areas of Ta'izz city, marking the organization's first delivery to the city since August 2015. Limited humanitarian and commercial access has resulted in a shortage of medical supplies and pharmaceuticals, according to MSF and UN reports.
- From late December 2015 to mid-January 2016, USAID/OFDA partner the UN Children's Fund (UNICEF) and its implementing partners conducted livelihood and water, sanitation, and hygiene (WASH) activities in the city of Ta'izz and along the perimeter of the besieged enclave. UNICEF provided health and nutrition services for children and pregnant and lactating women via mobile health teams, delivered safe drinking water to displaced persons and host communities, and provided cash transfers to targeted households living in the enclave of Ta'izz city.
- On January 21, an airstrike killed at least six people, including an MSF ambulance driver, and wounded dozens of others in Sa'dah Governorate, according to an MSF report. MSF medical activities in Yemen have sustained attacks at least four times within the past three months, according to the organization. On January 10, the MSF-supported Shiara Hospital, also in Sa'dah, sustained an attack that killed six people and injured at least seven, primarily medical staff and patients. MSF reports that it plans to request an independent investigation into the Shiara Hospital attack by the International Humanitarian Fact-Finding Commission, urgently emphasizing that functioning hospitals and medical facilities are explicitly protected under IHL.
- According to the UN Office for the Coordination of Humanitarian Affairs (OCHA), continued conflict, import restrictions, a collapsing economy, and rapidly deteriorating basic services are deepening humanitarian needs in Yemen. However, despite bureaucratic impediments and access and security constraints, humanitarian organizations reached at least 8.8 million people across Yemen's 22 governorates with humanitarian assistance between March and December 2015, including an estimated 8 million people with health care services.

FOOD SECURITY AND NUTRITION

- As of late December, 19 of Yemen's 22 governorates were experiencing Crisis—IPC 3—or Emergency—IPC 4—levels of food insecurity, according to FEWS NET and WFP. Although humanitarian organizations are providing emergency food assistance to conflict-affected populations, the scope of needs remains beyond current in-country response capacity. Response actors provided assistance to food-insecure people in 20 governorates between September and December 2015; however, on average, organizations met less than 40 percent of the affected populations' food-related needs, WFP reports. During the same timeframe, humanitarian organizations met only 10 percent of food-related needs in Lahij, Marib, Sana'a, and Ta'izz governorates due to severe insecurity and access constraints.
- OCHA reports that commercial food imports decreased to approximately 470,000 metric tons (MT) in December, a
 nearly 20 percent reduction as compared to November. Despite the decline, imports for December were comparable
 to pre-crisis levels and food availability increased in some markets during the second half of the month. Although some
 markets experienced an increase in food availability, basic commodities remained scarce in many areas, particularly the
 acutely conflict-affected governorates of Al Bayda', Al Jawf, Marib, Sa'dah, and Ta'izz, according to WFP.

- WFP notes that although the national average price of wheat flour decreased by more than 20 percent in December as
 compared to November, prices remained above pre-crisis levels due to access constraints, insecurity, and fuel scarcity
 limiting the transportation of food to local markets. Meanwhile, decreases in employment opportunities and
 disruptions to social welfare systems have eroded household purchasing power, exacerbating food insecurity for many
 households, according to FEWS NET.
- Poor weather-related conditions, in conjunction with the reduced availability of agricultural inputs—including fertilizer, fuel, and seeds—have contributed to a 30-percent decline in forecasted domestic food production, according to USAID/OFDA partner the UN Food and Agriculture Organization (FAO). Furthermore, FAO projects that fisheries in coastal governorates could experience a 50 to 75 percent decline in production due to conflict-related factors. The UN agency cautions that the reduction in agricultural and fish production could significantly reduce the availability of locally produced food.
- Between August and October 2015, UNICEF conducted Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys assessing the prevalence of global acute malnutrition (GAM) and severe acute malnutrition in children under five years of age in Aden, Al Bayda', Al Hudaydah, Hajjah, and Lahij governorates. The SMART surveys indicated that some areas in three of the governorates—Aden, Hajjah, and Al Hudaydah—exceeded the WHO 15 percent emergency GAM threshold in August and September with levels of approximately 19 percent, 21 percent, and 31 percent, respectively. In November 2015, UNICEF estimated that approximately 3 million children and pregnant or lactating women in Yemen required nutrition therapy or preventive nutrition services.
- From December 30–January 12, UNICEF provided health and nutrition interventions to more than 50,000 people
 through nearly 80 mobile teams throughout the country. In Aden, Abyan, Hadramawt, Lahij, and Shabwah
 governorates, UNICEF mobile teams distributed nearly 5,000 packages of Plumpy'Nut to help prevent malnutrition,
 and in the coming weeks, UNICEF plans to provide nutrition therapy to approximately 5,700 children across the five
 governorates.
- A USAID/OFDA partner is supporting the nutrition needs of young children in Abyan, Aden, and Shabwah, providing
 treatment for acute malnutrition—including therapeutic feeding—to nearly 200 children between January 1 and 15.
 Additionally, the partner conducted reproductive health and nutrition awareness sessions for more than 100 women of
 reproductive age and provided antenatal and postnatal care for 320 pregnant and lactating women in Aden and Abyan.
- Despite ongoing access constraints and insecurity, UNICEF is supporting vulnerable households in the cities of Ta'izz and Sana'a with direct cash transfers. Through USAID/OFDA funding, UNICEF had assisted more than 9,000 households with cash assistance to meet basic needs—including food purchases—as of late December.

HEALTH AND WASH

- Due to an escalation of conflict in Yemen, an estimated 14.1 million people lack access to basic health care, according to USAID/OFDA partner the UN World Health Organization (WHO). The UN agency cautions that health care capacity is deteriorating amid an increase in needs, noting that approximately 25 percent of the country's health facilities are non-operational due to conflict-related damages and shortages of essential supplies—including fuel for electricity, pharmaceuticals, and medical equipment. In acutely conflict-affected areas, the situation is particularly dire; in Sa'dah Governorate, less than 40 percent of health facilities remain functional, according to the Health Cluster—the coordinating body for humanitarian health activities, comprising UN agencies, non-governmental organizations (NGOs), and other stakeholders. The Health Cluster notes that facilities that remain open have limited capacity due to supply and staff shortages, and highlights that insecurity precludes humanitarian organizations from delivering regular assistance. Since March 2015, WHO reports that conflict has damaged or destroyed approximately 100 health facilities and resulted in the death of at least 25 health care workers in Yemen.
- The decline in public health capacity—in conjunction with deteriorating WASH conditions—has resulted in an increased prevalence of endemic diseases such as acute diarrheal diseases, dengue fever, and malaria, according to the Health Cluster. Furthermore, there is an increased risk of polio and other disease outbreaks due to disruptions in immunization activities.

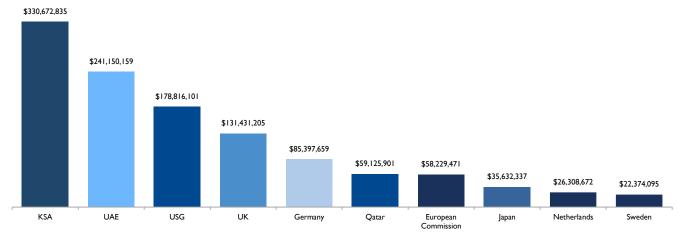
- On January 9, UNICEF successfully initiated another round of the national polio vaccination campaign, targeting more than 5 million children younger than five years of age, including in hard-to-access locations in Ta'izz. As of January 20, WHO-provided health assistance had reached approximately 7 million conflict-affected people in Yemen, including through the provision of medical supplies and treatment. Additionally, WHO had vaccinated approximately 5 million children against measles, rubella, and polio via a series of immunization campaigns. WHO and other USAID/OFDA partners continue to support governorates affected by the recent dengue fever—a mosquito-borne disease—outbreak, including through training health care workers, distributing rapid test kits and medicines, monitoring outbreaks, and implementing mosquito-control activities.
- On January 25, the UN Development Program (UNDP) launched an emergency solid waste management program targeting Al Qahira, Mudhafa, and Salh districts in the city of Ta'izz. The program, which will employ 250 vulnerable youth for a 30-day period, will provide solid waste collection for an estimated 460,000 people. UNDP reports that conflict has significantly disrupted solid waste removal services across Yemen, particularly in the city of Ta'izz where intense ground fighting has constrained access and movements for many months.
- To improve access to safe drinking water, UNICEF is supporting local water corporations in five governorates, reaching nearly 1.4 million people. UNICEF is also providing fuel to operate 28 rural water projects in six districts of Sa'dah, providing water to more than 147,000 people from late December to mid-January. According to UNICEF, an estimated 19.3 million people in Yemen require some form of assistance to meet basic WASH needs.
- Through USAID/OFDA support, an NGO delivered more than 5.5 million liters of safe drinking water to distribution points across Abyan, Aden, and Lahij governorates from January 1 to 15. The NGO also conducted nearly 70 WASH awareness sessions—detailing hand washing techniques and other safe hygiene practices—benefitting more than 2,420 people. In the coming days, the partner plans to commence hygiene kit distributions, targeting 1,200 households in Lahij.
- USAID/OFDA is also supporting another NGO to provide health care services to conflict-affected people in Aden,
 Abyan, and Shabwah, providing care to approximately 4,300 people and vaccinating nearly 200 children in the first half
 of January. Additionally, the NGO provided prenatal health care services to more than 300 pregnant women and
 conducted family planning sessions benefitting approximately 500 women in Aden and Abyan.

OTHER HUMANITARIAN ASSISTANCE

- In December 2015, King Salman Relief delivered nearly 180 MT of food and relief commodities—including tents and blankets—benefitting more than 40,000 people in Al Mahrah, Hadramawt, Shabwah, and Socotra governorates affected by tropical cyclones Chapala and Megh in early November.
- The U.K. Department for International Development (DFID) reports an additional £10 million—nearly \$14.3 million—in humanitarian funding to support essential medical supplies, food assistance, and thermal blankets for conflict-affected populations in Yemen. The additional support brings DFID's total 2015/2016 contribution to the Yemen humanitarian response to £85 million.
- With additional funding from the Qatar Development Fund, the Qatar Red Crescent Society (QRCS) plans to extend support for the emergency surgical center at Al Thawra Hospital in the city of Ta'izz. During the previous three months, the surgical center at Al Thawra received and treated more than 12,700 cases, performing more than 1,900 emergency surgeries. QRCS also reports that it plans to begin providing chronic disease medications, medical supplies, oxygen, and fuel for health facilities in Ta'izz in the coming weeks.

2015 TOTAL HUMANITARIAN FUNDING*

PER DONOR



*Funding figures are as of January 28, 2016. All international figures are according to the UN Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service and based on international commitments during the current calendar year, while USG figures are according to the USG and reflect the USG commitments based on FY 2015, which began on October 1, 2014, and concluded September 30, 2015.

CONTEXT

- Between 2004 and early 2015, conflict between the RoYG and Al Houthi opposition forces in the north and between Al Qaeda-affiliated groups and RoYG forces in the south had affected more than 1 million people and repeatedly displaced populations in northern Yemen, resulting in humanitarian needs. Fighting between RoYG military 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 late March 2015, the KSA-led Coalition began airstrikes on Al Houthi and allied forces to halt their southward expansion. The ongoing conflict has damaged public infrastructure, interrupted essential services, displaced many people, and reduced the level of 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.
- The escalated conflict, coupled with protracted political instability, the resulting economic crisis, rising fuel and food prices, and high unemployment, has left nearly half of Yemen's 26 million people food-insecure and 6 million people in need of emergency food assistance.
- In early 2015, Yemen hosted approximately 248,000 refugees and a substantial population of third-country nationals (TCNs). The escalation in hostilities has internally displaced an estimated 2.5 million people in Yemen and prompted the International Organization for Migration (IOM) to organize large-scale TCN evacuations from Yemen. The volatility of the current situation prevents relief agencies from obtaining accurate, comprehensive demographic information.
- On October 12, 2015, U.S. Ambassador Matthew H. Tueller reissued a disaster declaration for Yemen for FY 2016 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 2015¹

IMPLEMENTING PARTNER	ACTIVITY		AMOUN
	USAID/OFDA ²		
Implementing Partners	Agriculture and Food Security, Economic Recovery and Market Systems (ERMS), Health, Nutrition, Risk Management Policy and Practice, WASH	Abyan, Aden, Amran, Al Hudaydah, Al Jawf, Hajjah, Ibb, Raymah, Sana'a, Sa'dah, Tai'izz governorates	\$27,895,62
FAO	Agriculture and Food Security	Countrywide	\$500,00
International Organization for Migration (IOM)	Health, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Protection, Shelter and Settlements, WASH	Abyan, Ad Dali', Aden, Lahij, Sana'a, Shabwah governorates	\$5,000,00
ОСНА	Humanitarian Coordination and Information Management	Countrywide	\$2,750,00
UNICEF	Health, Logistics Support and Relief Commodities, Nutrition, Protection, Shelter and Settlements, WASH	Countrywide	\$15,006,60
WFP	Logistics Support and Relief Commodities	Countrywide	\$2,000,00
WHO	Health	Countrywide	\$8,000,00
	Program Support		\$877,41
TOTAL USAID/OFDA FUNDING			\$62,029,64
	USAID/FFP ³		
Implementing Partners	Food Vouchers, Health, Nutrition	Dhamar, Ibb, Lahij, Raymah, Sana'a, Ta'izz governorates	\$14,814,52
Office of the UN High Commissioner for Refugees (UNHCR)	Ready-to-Use Therapeutic Foods	10 governorates	\$1,661,57
WFP	59,940 MT of Title II In-Kind Emergency Food Assistance	19 governorates	\$55,010,35
TOTAL USAID/FFP FUNDING			\$71,486,45
TOTAL USAID HUMANITARIAN FL	JNDING FOR THE YEMEN RESPONS	E IN FY 2015	\$133,516,10

	STATE/PRM		
Implementing Partners	Food Assistance , Health, Logistics Support and Relief Commodities, WASH	Countrywide	\$10,800,000
IOM	Health, Logistics Support and Relief Commodities	Djibouti, Somalia	\$6,000,000
UNHCR	Health, Protection, Shelter, WASH	Countrywide	\$22,400,000
		Djibouti, Somalia	\$6,100,000
TOTAL STATE/PRM FUNDIN	G		\$45,300,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2015			\$178,816,101

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. ² USG funding totals represent committed amounts as of September 30, 2015. ³ Estimated value of food assistance.

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 +1.202.821.1999.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.