



YEMEN - COMPLEX EMERGENCY

FACT SHEET #11, FISCAL YEAR (FY) 2018

SEPTEMBER 7, 2018

NUMBERS AT A GLANCE

29.3 million

Population of Yemen
UN – December 2017

22.2 million

Estimated People in Need of Humanitarian Assistance
UN – December 2017

2 million

Estimated IDPs in Yemen
UN – December 2017

17.8 million

Estimated Food-Insecure People
UN – December 2017

16.4 million

Estimated People Lacking Access to Basic Health Care
UN – December 2017

16 million

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

9.9 million

Estimated People Reached with Humanitarian Assistance in 2017
UN – December 2017

HIGHLIGHTS

- Airstrikes and insecurity result in civilian casualties, population displacement, and humanitarian access constraints in Al Hudaydah
- Relief agencies provide humanitarian assistance to nearly 357,000 Al Hudaydah IDPs
- Health actors respond to a recent increase in suspected cholera cases amid a potential third wave of the cholera outbreak

HUMANITARIAN FUNDING

FOR THE YEMEN RESPONSE IN FY 2018

USAID/OFDA ¹	\$105,769,503
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USAID/FFP ²	\$323,388,007
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State/PRM ³	\$13,900,000
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\$443,057,510

KEY DEVELOPMENTS

- Kingdom of Saudi Arabia (KSA)-led Coalition airstrikes from August 22–23 in Al Hudaydah Governorate's Ad Durayhimi District resulted in more than 30 civilian deaths, according to the UN. Relief actors expect violence to continue in Ad Durayhimi as parties to the conflict attempt to gain control of key areas in the district.
- In response to displacement caused by the conflict in Al Hudaydah, relief actors had provided rapid response assistance—including emergency food rations, hygiene kits, and transit kits—to approximately 92 percent of the more than 357,000 individuals displaced from and within Al Hudaydah as of August 26, the UN reports.
- On August 29, artillery fire in Al Hudaydah's At Tuhayat District injured the driver of a truck contracted by the UN World Food Program (WFP) to transport nearly 30 metric tons (MT) of emergency food assistance, the UN reports. On the same day, artillery fire also hit an International Committee of the Red Cross (ICRC) truck carrying food supplies in At Tuhayat, damaging the commodities, according to the Protection Cluster.⁴
- The number of suspected cholera cases in Yemen has increased since mid-July, indicating that a possible third wave of the ongoing epidemic has commenced, the UN reports. In early August, Yemeni national health authorities reached nearly 400,000 people through an oral cholera vaccination (OCV) campaign in Al Hudaydah's Al Hali and Al Marawi'ah districts and Ibb Governorate's Hazm Al Udayn District.

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 coordinating body for humanitarian protection activities, comprising UN agencies, non-governmental organization (NGOs), and other stakeholders.

POPULATION DISPLACEMENT AND INSECURITY

- Intensified fighting in Ad Durayhimi continues to result in civilian casualties, population displacement, and humanitarian access constraints. KSA-led Coalition airstrikes in Ad Durayhimi resulted in more than 30 civilian deaths from August 22–23, according to the UN. On August 23, an airstrike hit a truck carrying internally displaced persons (IDPs) fleeing fighting in Ad Durayhimi's Al Kawei village, resulting in 27 civilian deaths, including 22 children, the UN reports. Further airstrikes on August 22 and 23 resulted in six civilian deaths and injured five people in areas of Ad Durayhimi. In addition, an August 14 coalition airstrike hit a heavily-populated civilian area in Ad Durayhimi city, resulting in 13 deaths and injuries to 24 people, according to the Sana'a-based Ministry of Public Health and Population. The airstrike also damaged civilian infrastructure, including medical facilities and mosques. Due to conflict, relief actors report that there are no functioning health facilities or medical staff remaining in the district.
- On August 29, artillery fire hit a truck contracted by WFP in At Tuhayat, injuring the driver. The truck, which was marked with a WFP banner when it was struck within Republic of Yemen Government (RoYG)-controlled territory, was transporting nearly 30 MT of emergency food assistance. The food commodities were not damaged, according to WFP. The commodity transport was part of an ongoing effort to supply emergency food assistance sufficient for 38,000 people in At Tuhayat; WFP had lacked access to the district since June. Despite access constraints, the UN agency distributed emergency food assistance to as many as 33,000 people—approximately half of Al Tuhayat's population—in late August. Another incident of artillery fire on August 29 also struck an ICRC truck carrying food supplies in At Tuhayat, resulting in damage to the commodities, the Protection Cluster reports.
- Relief actors have identified more than 357,000 individuals displaced from and within Al Hudaydah as of August 26, the UN reports. More than 2,500 IDPs who are residing in 18 schools across six Al Hudaydah districts will be required to relocate ahead of the mid-September start of the school year. Relief actors are assessing alternative housing arrangements for the IDPs, including distribution of rental subsidies.
- The UN Office for the Coordination of Humanitarian Affairs (OCHA) reports that 94 percent of Yemen's 333 districts are affected by access constraints, including delays in approving humanitarian movement requests or program sub-agreements and interference in humanitarian activities. More than 1.1 million people in need of humanitarian assistance reside in conflict-affected districts of Hajjah, Al Hudaydah, Al Jawf, and Sa'dah governorates with significant access constraints.

FOOD SECURITY AND NUTRITION

- In early September, the Famine Early Warning System Network (FEWS NET) warned that nearly all Yemeni households are experiencing Crisis—IPC 3—or Emergency—IPC 4—levels of food insecurity.⁵ FEWS NET continues to caution that a worst-case scenario of prolonged disruption of commercial and humanitarian imports, as well as disrupted access for commercial traders and relief actors, could result in Famine—IPC 5—conditions in parts of Yemen.
- Commercial food and fuel imports through the critical Red Sea ports of Al Hudaydah and Al Saleef increased by nearly 20 percent and two percent, respectively, in August compared to July, the UN Verification and Inspection Mechanism for Yemen (UNVIM) reports. Despite the increase, import volume remains volatile due to conflict-related access restrictions, economic instability, and bureaucratic impediments. Significant concerns persist regarding future supply levels and food prices at markets, according to FEWS NET.
- Relief actors report that 1.1 million MT of commercial and humanitarian food commodities were available across Yemen as of early August, including sufficient wheat grain and wheat flour to meet the country's food needs for 10 weeks and sufficient rice for eight weeks, the UN reports.
- With support from USAID/FFP, WFP reached more than 7.3 million people with cash, in-kind, and voucher emergency food assistance across 20 governorates in July. This marks a nearly 20 percent increase from the 6.1 million people WFP reached with emergency food assistance in July 2017.

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.

HEALTH AND WASH

- The number of suspected cholera cases in Yemen has increased since mid-July, suggesting that a third wave of the epidemic has commenced. Health actors recorded more than 43,700 suspected cholera cases and 90 associated deaths across Yemen between July 15 and September 4, according to the UN World Health Organization (WHO). Health actors report that the epidemic has affected 305 districts, with conflict-affected and densely populated areas of Al Hudaydah and Sana'a cities facing the highest risk of transmission due to limited access to safe drinking water and poor water, sanitation, and hygiene (WASH) infrastructure, the UN reports.
- During an August 4–9 OCV campaign, Yemeni national health authorities reached nearly 400,000 people in Al Hali, Al Marawi'ah, and Hazm Al Udayn, according to WHO. To enhance monitoring of and response to suspected cholera cases and related deaths, the UN agency suggests that additional targeted activities are required, including scaled-up WASH activities, community messaging of potential transmission risks, timely administration of the second OCV dose, and additional OCV campaigns in priority districts. WASH Cluster partners are focusing on cholera prevention and response—including assessing available sanitation options and determining water contamination causes—in areas at risk of cholera transmission. From January to June, the cluster reached approximately 7.1 million people through basic hygiene, emergency water supply, sanitation, and other activities, the UN reports.
- A USAID/OFDA partner conducted nearly 25,000 medical consultations through mobile health teams and other health facilities in Abyan, Ad Dali', Aden, Amanat al-Asimah, Lahij, and Shabwah governorates and rehabilitated an emergency obstetric and newborn care facility in Amanat al-Asimah in July. The partner also admitted more than 1,000 children ages five years and younger for treatment for moderate acute malnutrition during the month.
- Approximately 12,000 people in Sa'dah Governorate's As Safra District continue to lack access to safe drinking water following late July airstrikes that damaged the district's Nushur water facility. The UN estimates that repair of the facility could require 6–12 months; in the meantime, affected populations are obtaining water from shallow wells.

EMERGENCY RELIEF COMMODITIES AND LOGISTICS

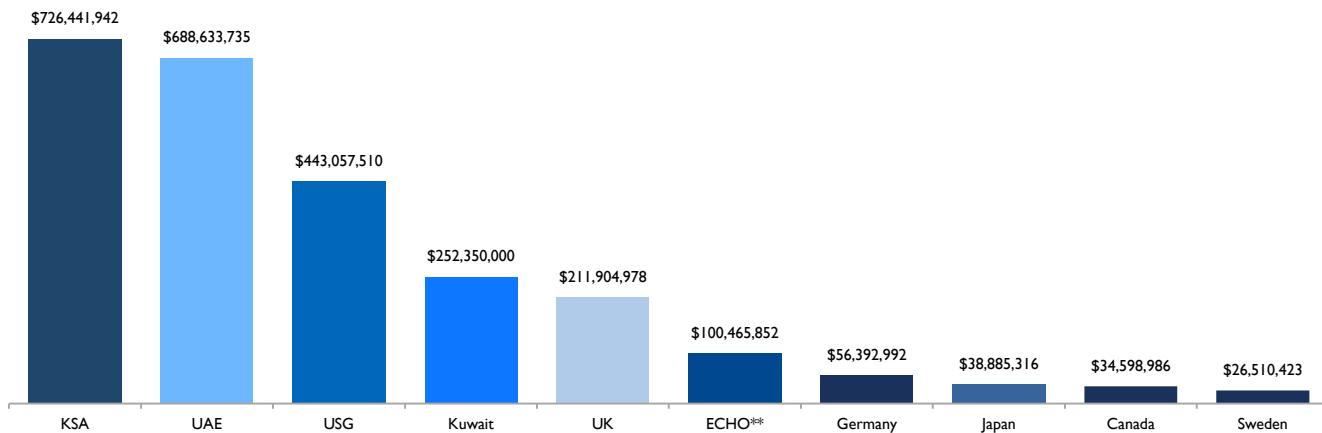
- In August, WHO airlifted more than 500 MT of essential medicines and medical supplies to Sana'a International Airport for distribution to conflict-affected governorates. The supplies contained life-saving cancer treatments to address the needs of nearly 50 percent of Yemen's cancer patients for one year; more than 100 nutrition kits sufficient to meet the needs of more than 5,000 children suffering from severe acute malnutrition with medical complications for three months; and rapid diagnostic tests to diagnose various diseases and laboratory reagents for chemical analyses in central laboratories and blood banks. In addition, health actors procured approximately 50,000 rapid diagnostic tests for cholera and more than 20 trauma kits to treat mass casualties for shipment to Aden from Djibouti port.
- Despite continued access constraints and insecurity, relief actors had provided rapid response assistance—including emergency food rations, hygiene kits, and transit kits—to approximately 92 percent of the more than 357,000 individuals displaced by conflict in Al Hudaydah as of August 26, the UN reports.

PROTECTION

- In July, insecurity resulted in the deaths of 21 children and injuries to 82 children, representing a 70 percent increase compared to the number of child casualties in June; incidents occurred primarily in Hajjah, Al Hudaydah, Sa'dah, and Ta'izz, the UN Children's Fund (UNICEF) reports. Between March 2015 and June 2018, conflict-related violence resulted in the deaths of nearly 2,400 children and injuries to more than 3,600 children. During the same period, armed groups recruited approximately 2,600 children and violence resulted in the damage or destruction of nearly 670 schools across Yemen.

2018 HUMANITARIAN FUNDING

PER DONOR



*Funding figures are as of September 7, 2018. All international figures are according to the 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 most recent U.S. Government (USG) commitments based on the fiscal year, which began on October 1, 2017.

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

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 affected more than 1 million people and repeatedly displaced populations in northern Yemen, resulting in humanitarian need. 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 advancement 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 levels of 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 scale up cholera prevention, preparedness, and response activities.
- 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 2018¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
Implementing Partners	Agriculture and Food Security, Economic Recovery and Market Systems, Health, Humanitarian Coordination and Information Management (HCIM), Logistics Support and Relief Commodities, Nutrition, Protection, Shelter and Settlement, WASH	Abyan, Aden, Ad Dali', Amanat al-Asimah, Amran, Dhamar, Hadramawt, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Al Mahwit, Marib, Raymah, Sa'dah, Sana'a, Shabwah, Ta'izz	\$95,498,850
International Organization for Migration (IOM)	Logistics Support	Countrywide	\$488,216
OCHA	HCIM	Countrywide	\$8,000,000
UNICEF	Protection	Abyan, Aden, Ad Dali', Amanat al-Asimah, Amran, Al Bayda', Dhamar, Hadramawt, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Al Mahwit, Marib, Raymah, Sa'dah, Sana'a, Shabwah, Ta'izz	\$150,000
	Program Support		\$1,632,437
TOTAL USAID/OFDA FUNDING			\$105,769,503
USAID/FFP³			
UN Food and Agriculture Organization (FAO)	Food Security and Livelihoods	Countrywide	\$850,000
WFP	U.S. In-Kind Food	20 governorates	\$276,538,007
	U.S. In-Kind Food, Food Vouchers, Local Purchase and Milling	20 governorates	\$46,000,000
TOTAL USAID/FFP FUNDING			\$323,388,007
STATE/PRM			
Office of the UN High Commissioner for Refugees (UNHCR)	Camp Coordination and Camp Management, Protection, Shelter and Settlements, Logistics Support and Relief Commodities, Refugee Response	Countrywide	\$13,900,000
TOTAL STATE/PRM FUNDING			\$13,900,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2018			\$443,057,510

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect anticipated or actual obligated amounts as of September 7, 2018.

² USAID/OFDA funding represents anticipated or actual obligated amounts as of August 10, 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>