UNFPA
HUMANITARIAN RESPONSE IN YEMEN
2020
UNFPA is the lead UN agency for delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.

FEBRUARY 2020
ENSURING RIGHTS AND CHOICES FOR ALL
IMPACT ON WOMEN AND GIRLS

The humanitarian crisis in Yemen remains the worst in the world. Nearly five years of conflict has led to the collapse of the economy and social services. Millions of Yemenis are hungrier, sicker and more vulnerable than a year ago.

An estimated 24 million people – over 80 per cent of the population – are in need of some kind of assistance, including 14.4 million who are in acute need – nearly two million people more than in 2018.

An estimated six million women and girls of childbearing age (15 to 49 years) are in need of support. Rising food shortages have left more than one million pregnant and lactating women malnourished, who risk giving birth to newborns with severe stunted growth. In addition, an estimated 144,000 women are likely to develop childbirth complications.

Nearly half of the health facilities are not functioning or only partially functioning. Only one-third of the functioning health facilities provide reproductive health services due to staff shortages, lack of supplies, inability to meet operational costs or are damaged due to conflict. Equipment and medical supplies are inadequate or obsolete. Health workers have not been paid or been paid only irregularly for more than two years, has now left Yemen with only 10 health workers per 10,000 people – less than half the WHO minimum benchmark.

In a country with one of the highest maternal mortality ratios in the Arab region, the lack of food, poor nutrition and eroding healthcare, worsened by epidemics such as cholera, can mean an increase in premature or low-birth weight babies and post-partum bleeding. As many as 4.3 million people have been displaced in the last three years, while some 3.3 million people remain displaced. About half of the displaced are women, 27 per cent of whom are below age 18. Their coping mechanisms are stretched to the limit and they are paying the heaviest price, as is so often the case in humanitarian crises.

With limited shelter options, displaced women and girls tend to suffer most from lack of privacy, threats to safety and limited access to basic services, making them ever more vulnerable to violence and abuse. Displaced girls are more likely to lose access to schooling as families with limited resources de-prioritize their right to education.
In need of protection: 14.4 M

Internally displaced persons: 3.3 M

Lack access to basic health services: 19.7 M

Women of reproductive age (15-49 years): 6.0 M

Pregnant women at risk of developing complications: 144,000

Malnourished pregnant and lactating women: 1.0 M

Women at risk from different forms of violence: 120,000

Health facilities providing reproductive health services: 37%

Women are illiterate: 48%
WOMEN AND GIRLS SPEAK OUT

FATIMA, 17

“I could not finish school because I was married off to a man 13 years older. For the first five years, I did not get pregnant. When I did get pregnant, our happiness was short lived. The conflict intensified close to our house in the port area of Al Hudaydah. We decided to move to Taizz. When we arrived in Taizz, I began to bleed heavily. My husband could not take me to a hospital in time because he could not find the money to cover the transportation costs or the hospital charges. We lost our baby – I blame the harsh and exhausting displacement.”

“I wish I could go back to school to complete high school but it’s a taboo for married women in my village to go to school. Even if I tell my husband about my desire to continue studying, he does not understand me.”

Fatima, married at age 12, interviewed during Rapid Response Mechanism distribution in Taizz

AMAL, 25

“My husband and I began to fight from the first day of our marriage. I repeatedly tried to leave and end the marriage but failed because my family was too poor to take me back. They always forced me to return and endure the difficulties as my husband was rich. One day, the fighting between us became so intense that my husband took his gun and shot me.”

“I lost consciousness and was immediately hospitalized. I promised myself I would not go back to him when I leave the hospital.”

Amal*, interviewed at a UNFPA-supported safe space in Al Mahawee

OM ASMA, 37

“My most recent pregnancy could have killed me. I became pregnant immediately after the birth of my last child. There was no spacing between the two births. I had severe stress after the last pregnancy, and had problems with my uterus.”

“When it was time to give birth, my husband and I went to the district clinic, but the clinic was not equipped to handle the birth and my situation started to worsen. The doctor there told me that I needed a Caesarean section with special care, and they did not have the facilities for my treatment.”

“We could not afford the transportation costs or the hospital charges in the city. There was no other option but to borrow money and risk the long journey to the city.”

Om Amsa, interviewed at a UNFPA-supported health facility in Sana’a

*Name changed for privacy.
2019 MAIN ACHIEVEMENTS

116,341
SAFE DELIVERIES ASSISTED

126,861
UNINTENDED PREGNANCIES AVERTED

27,709
SURVIVORS OF VIOLENCE ASSISTED
**2019 Overview of Humanitarian Support**

- **People Reached**
  - 890,736 People reached with Reproductive Health Services
  - 306,982 People reached with Family Planning Services
  - 116,341 Safe Deliveries assisted with UNFPA support
  - 80,000 People benefited from all types of RH kits
  - 633,070 Women and girls reached with Dignity Kits
  - 1,240,000 People reached with Rapid Response Mechanism kits
  - 27,709 Survivors of different forms of violence reached
  - 89,522 Women and girls reached with GBV related information and services
  - 6,844 People reached with specialized mental health services

- **Services Delivered**
  - 260 Health facilities supported with reproductive health services
  - 300 Midwife home clinics established
  - 40 Women and girls safe spaces supported by UNFPA
  - 6 Number of specialized mental health centers supported by UNFPA
  - 6 Women’s shelters supported by UNFPA
2019 DONOR CONTRIBUTIONS

UNFPA HUMANITARIAN RESPONSE IN YEMEN 2020
“My husband and I lived a happy and peaceful life until he lost his job due to the conflict. He could not find any work in our village so he went in search of work. It has been more than two years, he has still not returned.”

“I could no longer sit at home; my three children were hungry. I did not have any skills but I was forced to find a job. Nobody was willing to help me but I could not give up.”

“Through a women’s group I heard about this safe space, as I was beginning to lose hope of finding a job. At the safe space I learned to make handicrafts and gained skills in starting a business.”

“This space has been my salvation. I was let down by everyone but this space has given me hope. I now sell handicrafts and feed my children with the profits I make.”

Najla, interviewed at a UNFPA-supported safe space in Al Hudaydah

“I was married off to my cousin when I turned 14. It was a means to ease my family’s economic pressures, which were caused by the conflict. Within the first year of marriage, my husband became extremely violent towards me. When I was three months pregnant, and could no longer withstand the violence, I ran away to [my] parents’ house, seeking protection from [my] husband. My husband soon followed me to our family home, demanding my return at gun point. In a confrontation with my parents, he pulled the gun and fired five shots to [my] mother’s head and chest. I had to watch my mother taking her last breath. She died in front of me. Soon after my mother’s funeral, my father disappeared. I was traumatized and unable to cope with the feeling of guilt after losing my mother.”

“Seeing my mental state, my neighbour decided to take [me] to Sana’a for treatment at a specialized mental health centre. At the centre, I was referred to a psychiatrist and placed on a treatment plan for post-traumatic stress disorder with close monitoring and therapeutic sessions. Five months later, my thoughts of self-harm are no more and, being a month away from welcoming my baby into the world, I am looking forward to a new lease on life.”

Rima, interviewed at a UNFPA-supported specialized mental health centre in Sana’a

“I was nine months pregnant when we fled our home in Al Hudaydah. We witnessed the most horrific days when the war escalated. We thought the war would end soon. There was some silence for a while, but then it erupted suddenly. We had no option but to flee.”

“Early one morning, my husband drove our motorcycle with our two children, taking only our mobile phones with us. The journey was hard. I felt constant pain in my abdomen. I knew I was in labour and I was terrified that I might give birth on the way.”

“We passed Amran and Hajjah and reached Sa’ada Governorate by night to stay in a tent with a relative. I gave birth almost immediately after we arrived with the help of a midwife who had her home clinic close to our camp. I had nothing to cover my baby or myself except the clothes that I was wearing, so when I heard there was a distribution of relief items, I was very excited. The rapid response kit had clothes and many items that we were desperately in need of. I was able to keep myself and my baby clean and safe from harm.”

Nima, interviewed during Rapid Response Mechanism distribution in IDPs camp in Sa’ada
UNFPA is the sole provider of life saving reproductive health supplies, medicines and assisted services in Yemen. This reproductive health supply chain serves as a lifeline to the millions of women and girls in Yemen.

UNFPA leads coordination and provision of lifesaving women’s protection services throughout Yemen, reaching thousands of survivors of different forms of violence.

UNFPA leads the multi-agency Rapid Response Mechanism across the country, providing lifesaving assistance to displaced persons at the frontlines.
2020 STRATEGIC PRIORITIES FOR UNFPA

- Strengthening health systems to provide emergency obstetric and neonatal care and vital life saving reproductive health services to reduce maternal mortality and morbidity.

- Strengthening mechanisms to protect women and girls with emphasis on prevention and response to different forms of violence.

- Reaching all newly displaced persons and most destitute returnees with emergency lifesaving packages through the Rapid Response Mechanism.

$100.5M
2020 TOTAL FUNDING REQUIREMENT

4.1M
TARGETED POPULATION
2020 UNFPA HUMANITARIAN RESPONSE: STRATEGIC PRIORITIES

**REPRODUCTIVE HEALTH**
- Ensure availability of lifesaving reproductive health commodities, medicines, supplies and equipment in health facilities.
- Ensure qualified health personnel are in place to provide reproductive health services in health facilities.
- Provide mobile medical teams and clinics with reproductive health services that include safe deliveries integrated with nutrition services for pregnant women as well as disease prevention information.
- Make family planning and birth spacing methods available and accessible to people in health facilities and mobile clinics.
- Provide skilled healthcare personnel, particularly midwives, at the community level.
- Provide coordination of reproductive health response through the Reproductive Health Inter-Agency Working Group under the Health Cluster.

**PROTECTION OF WOMEN AND GIRLS**
- Provide medical supplies including post-rape treatment kits for survivors of sexual violence.
- Respond to different forms of psychosocial support, legal aid, access to safe houses and referrals to health and other services.
- Engage men and boys to enhance mitigation of different forms of violence at the community level.
- Strengthen women’s protection Information and Management System.
- Strengthen community awareness about issues related to different forms of violence, and available relevant services.
- Establish referral pathways, protocols and capacity building of service providers.
- Provide support services and livelihood opportunities for survivors of various forms of violence.
- Lead coordination of women’s protection response through the women’s protection sub-cluster within the Protection Cluster.

**RAPID RESPONSE MECHANISM**
- Lead response to distribute immediate, most critical, lifesaving emergency supplies to newly displaced families on the move, who may be in hard-to-reach areas or stranded close to the front lines (also most vulnerable returnees).
- Ensure provision of a minimum assistance packages comprising of (1) WFP ready-to-eat food rations (2) UNICEF family basic hygiene kits (3) UNFPA female transit/dignity kit.

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2020 Requirements: $56.5M

2020 Requirements: 27.5M

2020 Requirements: $16.5M

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UNFPA HUMANITARIAN RESPONSE IN YEMEN 2020
2020 FUNDING REQUIREMENTS OVERVIEW

$100.5M REQUIRED
32.1M FUNDED
$68.4M FUNDING GAP

$17 FOR EVERY AFFECTED WOMAN AND GIRL

DISTRIBUTION OF REQUIRED FUNDS BY PROGRAMME AREA

- Reproductive Health: 57%
- Protection of Women and Girls: 27%
- Rapid Response Mechanism: 16%

UNFPA HUMANITARIAN RESPONSE IN YEMEN 2020
## 2020 Requirements by Programme Area**

<table>
<thead>
<tr>
<th>Programme Area</th>
<th>USD</th>
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</thead>
<tbody>
<tr>
<td><strong>Reproductive Health</strong></td>
<td></td>
</tr>
<tr>
<td>Emergency obstetric care</td>
<td>49,000,000</td>
</tr>
<tr>
<td>Reproductive health kits &amp; supplies</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Mobile teams and clinics</td>
<td>1,000,000</td>
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<tr>
<td>Capacity building &amp; awareness raising</td>
<td>500,000</td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td>56,500,000</td>
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<tr>
<td><strong>Protection of Women and Girls</strong></td>
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<tr>
<td>Service provision</td>
<td>22,000,000</td>
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<tr>
<td>Capacity building &amp; awareness raising</td>
<td>2,150,000</td>
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<tr>
<td>Transit/dignity kits</td>
<td>3,000,000</td>
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<tr>
<td>Coordination</td>
<td>350,000</td>
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<tr>
<td><strong>Sub-Total</strong></td>
<td>27,500,000</td>
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<tr>
<td><strong>Rapid Response Mechanism</strong></td>
<td></td>
</tr>
<tr>
<td>Transit/dignity kits</td>
<td>4,320,000</td>
</tr>
<tr>
<td>Coordination</td>
<td>500,000</td>
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<tr>
<td>Enrollment</td>
<td>3,680,000</td>
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<tr>
<td>Distribution</td>
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<tr>
<td><strong>Sub-Total</strong></td>
<td>16,500,000</td>
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<tr>
<td><strong>Total</strong></td>
<td>100,500,000</td>
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## 2020 Targeted Direct Beneficiaries *

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<tr>
<th>Programme Area</th>
<th>No.</th>
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</thead>
<tbody>
<tr>
<td><strong>Reproductive Health</strong></td>
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<tr>
<td>Female</td>
<td>1,920,000</td>
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<tr>
<td>Male</td>
<td>480,000</td>
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<tr>
<td><strong>Protection of Women and Girls</strong></td>
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</tr>
<tr>
<td>Female</td>
<td>700,000</td>
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<tr>
<td><strong>Rapid Response Mechanism</strong></td>
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</tr>
<tr>
<td>Individuals</td>
<td>1,000,000</td>
</tr>
<tr>
<td>Households</td>
<td>324,115</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>4,100,000</td>
</tr>
</tbody>
</table>

*2020 Targeted direct beneficiaries
**Operations and programme support costs are included in overall costs
UNFPA's interventions cover all 22 governorates in Yemen, with a team of 92 personnel (11 international and 81 national). Overall coordination is handled by UNFPA office in Sana’a. In other governorates, joint UN humanitarian hubs coordinate. UNFPA has presence in all six operational UN humanitarian hubs (Aden, Al Hudaydah, Al Mukalla, Ibb, Sa’ada and Sana’a), an arrangement that relies on closely monitoring evolving needs to ensure a flexible and appropriate response to the changing demands of the humanitarian dynamic.
At least 3,500 maternal deaths from among an estimated 144,000 women at risk of developing complications during childbirth.

Total collapse of reproductive health facilities, when only one-third of functioning health facilities provide reproductive health services across the country.

Lives of an estimated 120,000 women and girls at risk from different forms of violence.

Grave threats to the basic rights of millions of Yemenis without support or access to food, water, health services, medication and protection.
UNFPA is grateful for the invaluable support of the following donors for its response to the crisis in Yemen since 2015 (in alphabetical order): Canada, Central Emergency Relief Fund, European Union Civil Protection and Humanitarian Aid, Denmark, Iceland, Italy, Japan, Kuwait, Netherlands, Norway, Saudi Arabia, Sweden, Switzerland, United Arab Emirates, UNICEF, World Health Organization and Yemen Humanitarian Pooled Fund.

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ONE VISION
THREE ZEROS
ZERO unmet need for family planning
ZERO preventable maternal deaths
ZERO gender-based violence and harmful practices
ENSURING RIGHTS AND CHOICES FOR ALL SINCE 1969