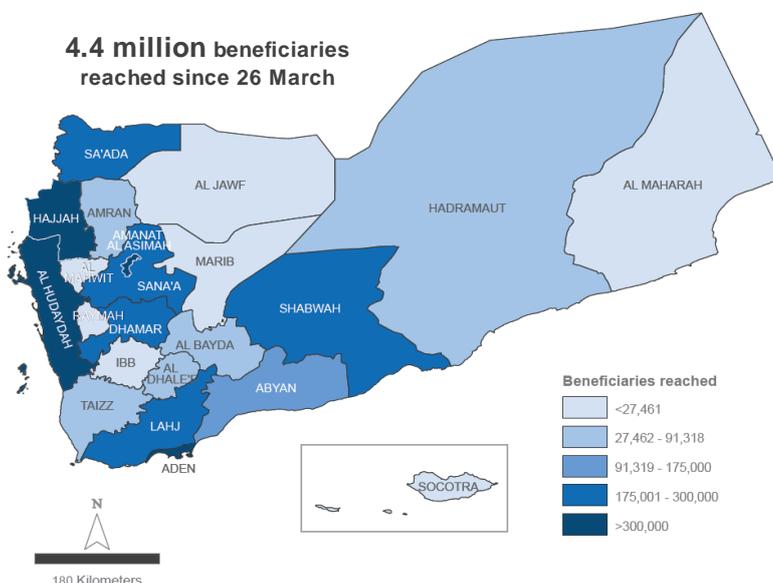




This report is produced by OCHA Yemen in collaboration with humanitarian partners. It was issued by OCHA on 30 June 2015. The humanitarian response section covers the period from 19 to 25 June 2015. The next report will be issued on or around 6 July.

Highlights

- Since 26 March, 4.4 million people have received humanitarian assistance.
- The national health-care system has reached a breaking point. Dengue fever cases are rising, chronic diseases lack treatment, and vital medical supplies and personnel cannot reach targeted people.
- Commercial imports of food, medicine and fuel are at a standstill. Seaports and airports are operating at minimal capacity and road networks are non-functional.
- Violence and insecurity continue to weaken already fading protection and social safety nets.
- Access constraints remain high. Humanitarians are at great risk, but they continue to deliver assistance.



Note: Information represented in this map, is based on preliminary response monitoring.
Creation date: 22 June 2015 Source: Cluster Update Feedback: ochayemen@un.org www.unocha.org/yemen yemen.humanitarianresponse.info
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

21.1m Affected people	11.7m Targeted for assistance in 2015	1,019,762 Internally displaced people	US\$1.6b Funding required to provide critical life-saving assistance	3,083 Registered deaths resulting from conflict	14,324 Registered injuries resulting from conflict
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Situation Overview

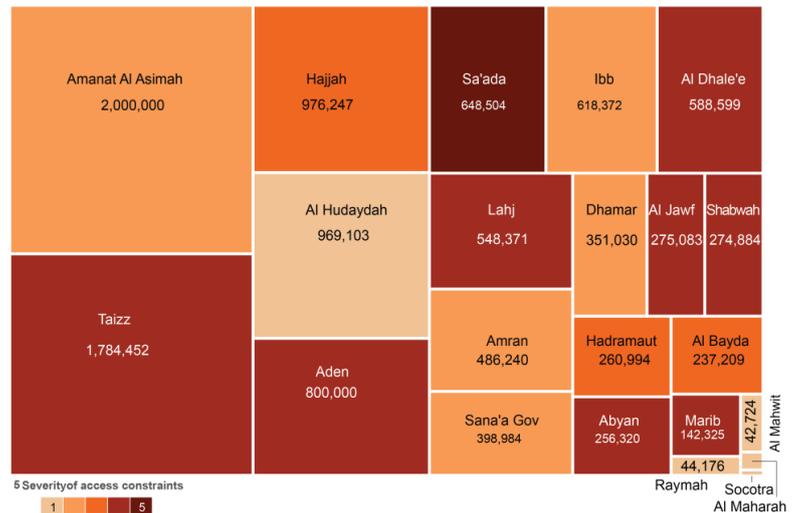
Yemen's health-care system is on the brink of collapse. Cases of fatal dengue fever continue to rise: Aden local authorities reported 8,000 cases (double the number reported two weeks ago) and nearly 590 deaths (five times the number reported two weeks ago). This indicates that in Aden, there is an average of 150 new cases of dengue fever every day, with 11 deaths daily. WHO reports a high risk of a polio outbreak (Yemen has maintained a polio-free status since 2006). Concerns are increasing that fear of diseases such as dengue, measles, rubella and malaria may cause additional displacement. People suffering from chronic life-threatening, non-communicable diseases are also falling prey to the deteriorating health system.

Fuel imports are now at 11 per cent of pre-crisis figures. There is a cereal shortfall of 400,000 MT and Yemeni ports continue to operate at a fraction of pre-crisis capacity. Aden, the largest port, is inaccessible due to insecurity, and there are continued reports that ships carrying humanitarian cargo were not able to berth. The oil refinery in Aden port was attacked on 28 June and the consequences of the fire that ensued are being assessed. Only two out of eight berths in Hudaydah port are operating. The commercial and humanitarian consignment delays at sea are increasing shipping costs, which will lead to increased commodity prices.

The constraints to humanitarian action in Yemen enormous. Lack of diesel means that imported grain cannot be milled and therefore consumed, hospital generators cannot run and the water supply for millions of people is threatened. Roads are too insecure to move goods around the country, and humanitarian partners are at risk and threatened trying to reach people in need. Prior to the escalation of violence, Yemen imported 90 per cent of its food and 80 per cent of its medicine and pharmaceutical supplies.

Over 21 million people require some form of humanitarian assistance. This year humanitarian partners aim to deliver assistance to 11.7 million people. Since 26 March 4.4 million people have received humanitarian assistance. There is an urgent need for unimpeded humanitarian access that protects affected men and women from seeking assistances and humanitarian workers.

People targeted in 2015 and estimated severity of access constraints



Funding

The Yemen Humanitarian Response Plan (YHRP) is now nearly 12 per cent funded, with US\$186.6 million in contributions made against the \$1.6 billion in requirements (as of 29 June). An additional \$69.2 million has been contributed to humanitarian programmes outside the appeal.

In addition, the Emergency Relief Coordinator is releasing \$25 million from the Central Emergency Response Fund to support critical relief projects, including providing fuel, medicine, emergency supplies, clean water, sanitation services and nutrition programmes to people in need.

All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: fts@un.org

Humanitarian Response



Food Security and Agriculture

Needs:

- Of 12.9 million food insecure people, 7.6 million people are targeted for assistance this year.
- Six million Yemenis are experiencing a Phase 4 Emergency and are considered to be severely food insecure.
- Ahead of the planting season, emergency livelihood kits, including emergency agricultural, fisheries and livestock kits, are required to improve self-sufficiency for those who have not been displaced.
- Water shortages remain an obstacle to household food preparation. Diesel for operating grain mills is in extremely short supply, with prices having risen nearly 480 per cent since March. Diesel is unavailable in seven governorates and generally available only in Socotra and Al Maharah, both sparsely populated and geographically removed from the conflict. Cooking gas is readily available in only seven out of 22 governorates.
- Most bakeries have reportedly shut down in Aden due to wheat and fuel shortages.

7.6m
people targeted for
urgent food assistance

Response:

- Since April, 1.9 million people have received nearly 24,800 MT of food in 12 governorates (Abyan, Aden, Al Dhale'e, Al Mahwit, Amran, Dhamar, Hajjah, Hudaydah, Lahj, Sana'a, Sa'ada and Shabwah).
- During this reporting period, nearly 54,900 people received food assistance.

- More than 535 MT of food was distributed to over 31,750 people (45 per cent women and girls) in Al Dhale'e. They received a one-month supply of wheat flour, pulses, vegetable oil, salt, wheat soy blend and sugar. Al Dhale'e had not received a food distribution since the escalation of the conflict.
- Ramadan food baskets containing rice, flour, oil and dates for 7,000 internally displaced people (IDPs) and host-community members were distributed in Jabal lyal Yazid and Amran.
- More than 23,000 people received cash transfers in Abyan, Amran, Hajjah, Hudaydah and Lahj. Amounts varied from \$55 to \$166 and targeted 50 per cent women and girls.
- A total of 1,000 MT of emergency humanitarian food aid was imported through Hudaydah port on 24 June to feed 140,000 people for 30 to 40 days. Three electricity generators also arrived in the consignment. The food will be distributed in Aden and elsewhere when conditions allow.

Gaps & Constraints:

- A total of 218 MT of food aid in Aden cannot be distributed due to access constraints and security concerns by transportation drivers within Aden and neighbouring Al Dhale'e and Lahj.
- More than 23,500 MT of humanitarian food remains in warehouses in Hudaydah governorate (the majority), Aden and Sana'a, and a smaller amount in Kharaz refugee camp. Distribution remains a challenge.



Water, Sanitation and Hygiene

Needs:

- Of 20.4 million people who need WASH assistance, 5.1 million people are targeted to receive urgent support this year.
- Lack of collection of solid waste is a factor contributing to the spread of dengue fever in Aden, Hadramaut and Hudaydah.
- Almost 10 million people in rural and urban areas are expected to experience water-supply cuts or more severe disruption in their supply due to lack of diesel.
- Medical facilities desperately need a safe water supply for life-saving medical treatment.
- Due to diesel shortages, public water networks in eight major cities – serving 3 million people – are at imminent risk of collapse.

5.1m
People urgently
targeted for WASH
assistance

Response:

- Ceramic water filters were provided to nearly 10,100 IDPs for household water treatment in Abyan, Amran and Hajjah. About 700 people benefited from the provision of a water pump in Al Buraiqeh in Aden.
- A total of 2,550,000 people in Sana'a and Hudaydah benefited from solid-waste collection and disposal.
- Basic hygiene kits were distributed to over 18,200 IDPs in Aden, Amran, Hajjah, Lahj, Sana'a and Taizz. Over 20,200 people were targeted with hygiene-promotion activities in Al Jawf and Amran, Hajjah and Taizz.

Gaps & Constraints:

- Security and conflict have severely affected operations in Aden, Sa'ada and Taizz. Nearly a quarter of all WASH-targeted beneficiaries live in these governorates.
- Lack of diesel on the market has doubled the WASH caseload due to the breakdown of basic WASH services.



Health

Needs:

- Of 15.2 million people who need health care, 10.3 million people are targeted to receive urgent care this year.
- Aden authorities reported more than 8,000 cases of dengue and nearly 590 deaths.
- WHO officially announced a dengue fever outbreak in Al Mukalla and Hadramaut.
- Trauma kits to attend increasing numbers of mass casualties are urgently required.
- Training in mass-casualty management is also in critical need. It includes first aid, referral and ambulance services, deployment of surgical teams and capacity-building of health workers.
- Diesel to provide cold chain for vaccines and fuel for mobile teams are needed.
- Life-saving maternal, newborn and child-health interventions are urgently required.

10.3m
People targeted for
urgent health care

- The malaria season is expected to begin in July, and insecurity is preventing vector-control measures. It is therefore likely that the situation will deteriorate.

Response:

- To date, more than 235 MT of medical supplies and more than 500,000 litres of fuel to maintain the functionality of hospitals, vaccine stores, ambulances, national laboratories and health centres have been provided.
- The local health office in Hudaydah received a power generator to operate cold-chain rooms.
- In Hudaydah, Al Thawrah Hospital received 200 oxygen bottles, and 1,000 IV fluids were provided to a renal dialysis centre. In Sana'a, 10 oxygen cylinders were provided to Al-Jumhoori Hospital.
- Water trucks provided water for Haradh Hospital, Hajjah Governorate.
- Health workers in Hadramaut received training on disease surveillance and early warning systems.
- Primary health-care services were provided through fixed and mobile medical teams and community mobilization activities in Aden, Amran, Hajjah, Hudaydah, Lahj, Sa'ada, Sana'a and Taizz.
- Essential medicines were supplied to hospitals in Sana'a.
- Reproductive health services were provided in Al Jawf, Amran, Hajjah and Sa'ada.
- A total of 6,000 litres of fuel was provided to Al Sdaqa and Al Jamhoria hospitals in Aden for ambulances and generators.
- Mobile health teams were deployed in Mudiyah and Al Wade'a districts of Abyan governorate.
- A total of 20,000 long-lasting insecticide-treated mosquito nets are ready to be moved from Sana'a for 70,000 people.
- Vital hospitals, clinics and mobile surgical teams are being run by partners in Aden, Al Dhale'e, Amran, Hajjah, Ibb, Sa'ada, Sana'a and Taizz.
- A mobile clinic was established to fill the gap left by the closure of Aden's Basateen Clinic, which was hit by three projectiles that destroyed its laboratory on 15 June. On 23 June, a seven-person medical team treated over 100 people including refugees and IDPs.

Gaps & Constraints:

- The near-complete breakdown of the health-care system means that identifying and treating basic and serious health issues, including febrile illnesses such as dengue, is likely to result in higher-than-usual numbers of fatalities.
- Lack of trained trauma staff, supplies and a sterile environment will lead to increased fatalities from mass-casualty incidents.
- Health partners have at least 119 MT of medicines and medical supplies in storage in Hudaydah and Sana'a. Insecurities and lack of access are preventing the distribution of these items.
- Laboratory testing for dengue and malaria is impeded by lack of supplies and power, and the lack of diagnosis is preventing appropriate care.
- Of the 76 health facilities in Aden, including hospitals, half of these facilities operate sporadically. Only 21 facilities have a sufficient number of health personnel reporting to work regularly.
- With the onset of the rainy season, vector control should be implemented urgently to prevent further outbreaks.
- The combination of poor sanitation, lack of safe water continued internal displacement and a collapsed health system will cause increased risk of outbreaks of acute watery diarrhoea, cholera and other waterborne and vectorborne diseases.
- Deteriorating food security due to reduced import capacity is causing an increased number of children with severe acute malnutrition (SAM), with complications including infections from communicable diseases.
- Risk of rising numbers of measles and rubella cases, as well as the high risk of a potential polio outbreak, due to non-implementation of planned immunization campaigns and disrupted cold-chain of vaccine storage.



Nutrition

Needs:

- Of the 1.6 million people who need nutrition support, all are targeted for assistance this year.
- Prior to the crisis, 850,000 children under age 5 suffered from acute malnutrition, including 160,000 severely affected. Without urgent action, the number of acutely malnourished children could rise to 1.3 million – including 400,000

1.6m

People targeted for emergency nutrition activities

severe cases – in the coming weeks. Children suffering from SAM are nine times more likely to die than others in their age group.

Response:

- Nearly 1,360 children with SAM received treatment at fixed outpatient therapeutic sites and through mobile teams in Hajjah, Hudaydah, Raymah and Mahwit.
- A total of 980 children under age 5 were screened for malnutrition. Over 40 of these children are suffering from SAM and almost 200 are moderately malnourished.
- Over 1,150 children under age 5 received Vitamin A supplementation.
- Nearly 1,200 pregnant and lactating mothers received iron/folate supplementation in Amran, Al Bayda, Marib and Taizz.

Gaps & Constraints:

- Transportation costs for supplies and mobile clinics have become prohibitively high due to the fuel shortage, preventing action.
- Insecurity on the roads is preventing partners from reaching the most vulnerable mothers and young children, particularly in Sa'ada and Taizz.



Needs:

- Of the 11.4 million people who need protection, 6.9 million people are targeted for urgent protection activities this year.
- Members of the marginalized Muhamasheen group in Amran are living in the open on private land. They are exposed to the elements and face the threat of flooding and hostility from the local community.
- More than 3,500 IDPs are reported to have arrived in Al Maharah Governorate, and more are arriving daily.
- Al Jawf experienced heavy fighting over three days, displacing an estimated 6,300 people. Reports suggest almost all residents of Al Matammah district have left for Al Maton and Al Maslub districts.
- The forced recruitment of at least 318 children, twice as many as the whole of last year, has been reported.

6.9m

People targeted for urgent protection activities

Response:

- Psychosocial support through child-friendly spaces (CFS) was provided for nearly 790 children (nearly 340 girls and 450 boys) in Rada', Wald Rabi' and Al Quraishyah districts in Al Bayda.
- Psychosocial support at CFS was also provided to an additional 3,660 children (over 1,700 girls and 1,960 boys) from Amran City, Huth, Iyal Surayh, Khamir, Kharif and Raydah districts in Amran.
- Services for IDPs continued to be provided in Hayran district, Hajjah, including psychosocial counselling and monitoring and follow-up of general violence cases.
- On 21 June, 175 Ethiopian migrants stranded in Yemen were evacuated by sea from the port of Hudaydah to Obock, Djibouti. More than 675 vulnerable and stranded migrants, including over 650 Ethiopians, have been evacuated by sea during the conflict. Since 18 June, four boats have arrived in Puntland and Somaliland carrying almost 1,100 passengers.
- As of 25 June, over 38,230 people have arrived in Djibouti and Somalia from Yemen. Over 19,750 of these people arrived in Djibouti: 9 per cent are Djiboutians, 46 per cent are Yemenis and 45 per cent are third-country nationals. Over 18,480 of these people have arrived in Somalia, more than 90 per cent of whom are Somalis, 9 per cent Yemenis and 1 per cent third-country nationals.
- Nearly 860 refugees and asylum seekers have approached the UNHCR reception centre in Sana'a for registration or renewal and protection counselling since the centre reopened on 7 June.
- Nearly 460 people arrived in Yemen after a dangerous sea journey. After screening, 21 asylum seekers (18 men, three women) and one unaccompanied minor were identified. Of the nearly 460 new arrivals, 410 were Ethiopians (383 men, 27 women) and 49 Somalis (36 men, 13 women).

Gaps & Constraints:

- The lack of food in Kharaz refugee camp is a major concern. Two trucks arrived at the camp with food, but three more are needed to complete the food distribution. Refugees in the camp have been dependent on food rations since the conflict began due to the precarious security situation in the region, resulting in the inability to access income.
- Aden, Marib and Sa'ada are particularly difficult to access despite the known need for protection activities.
- The fuel crisis is affecting partners' ability to assess and respond to protection concerns.



Shelter, NFIs and Camp Coordination and Camp Management (CCCM)

Needs:

- Emergency shelter and NFI support is needed for 1.2 million IDPs and hosts in 21 out of 22 governorates this year.

1.2m

People targeted for shelter and NFI assistance

Response:

- Emergency shelter and NFIs were distributed to over 800 people in Sana'a City and in Maqbanah, Ash Shamayatayn and Dimnat Khadir districts in Taizz Governorate.
- A further 5,950 people received NFIs in Hayran district in Hajjah, Az Zuhrah district in Hudaydah and Al Mansura district in Aden.
- Cash assistance for rental subsidies was provided for 420 IDPs in Sayun district, Hadramaut.
- Pre-positioned NFIs (including blankets, tents and mosquito nets) are available in Aden, Hajjah, Sa'ada and Sana'a. Distribution is hampered by lack of access.
- In Aden, over 13,700 people have received cluster assistance since 2 April.

Gaps & Constraints:

- Shortage of fuel is preventing humanitarian teams from transporting NFIs and reaching beneficiaries.
- Lack of access to Lahj continues to prevent partners from reaching IDPs in need.



Education

Needs:

- Of the 2.9 million children who need education, 916,000 are being targeted to benefit from assistance this year.
- Temporary learning spaces, mental health support and other activities crucial for child development are critically needed.
- During the school year, over 3,580 schools were closed due to insecurity.
- The conflict has directly affected 441 schools, with 14 schools affected this week. Of these, 133 are damaged due to shelling or airstrikes (an increase of 10 schools in this reporting period), 240 are occupied by IDPs and 68 are occupied by armed groups. IDPs residing in schools are burning school furniture for firewood.
- Schools sustaining the most damage are in Sa'ada (33), Abyan (26) and Taizz (24). These figures are yet to be verified.

916,000

Children targeted through emergency education programmes

Response:

- In support of a Ministry of Education call for the protection of school assets, school principals in nine schools hosting IDPs in Amanat Al Asimah were trained on how to protect school equipment and materials.
- Twenty education officers were trained in Sana'a to expand the cluster to five sub-national hubs including agencies and the Ministry of Education's Education in Emergency Committee.
- A nationwide compensatory learning programme for grades 1-12 is under development with Ministry of Education counterparts.

Gaps & Constraints:

- Provision of non-formal and catch-up classes to the 1.83 million children whose learning was disrupted by the crisis has not been possible due to the continued conflict and airstrikes.
- Affected schools, whether damaged or occupied by IDPs or armed groups, have not been reached with physical-improvement activities.



Emergency Telecommunications

Response:

- Internet access and a back up radio room for humanitarian organizations in Sana'a are being installed.
- Solar power panels to ensure back up power have been installed in the UNDSS radio room.

Constraints:

- Importation of information and communication technology equipment remains a challenge due to restrictions.
- Local mobile phone and Internet networks, as well as electricity infrastructure, remain unreliable throughout the country, especially in Aden.



Logistics

Needs:

- Humanitarian partners require additional storage in Djibouti and Al Hudaydah.

Response:

- The WFP humanitarian vessel *MV Copenhagen*, originally planned to enter Aden port and redirected to Hudaydah, berthed on 23 June. It completed discharging 1.5 million litres of fuel for humanitarian organizations on 26 June.
- Two mobile storage units (MSUs) with 640m² storage capacity were made available at Djibouti airport for cargo transiting Djibouti and destined for Yemen.
- A total of 1,650m² of common space for humanitarian partners has been made available to humanitarian partners.
- Twenty MSUs have been dispatched to Hudaydah port and Sana'a airport. Up to 210,000 litres of fuel can now be stored in Sana'a and 150,000 litres at the Hudaydah warehouse.
- A total of 388m³ of humanitarian cargo has been transported to Yemen on behalf of partners since March.
- A total of 223m³ of humanitarian relief cargo is in storage for six organizations in Djibouti, and 627m³ of humanitarian cargo is expected to arrive in Djibouti this week.

Constraints:

- Port congestion in Djibouti and Hudaydah is significantly affecting the logistics pipeline.
- Lack of fuel and insecurity has meant transportation of supplies to governorate warehouses has been minimal.
- Insecurity at the ports continues to hinder access and the delivery of supplies.

General Coordination

The Humanitarian Country Team (HCT), led by Yemen's Humanitarian Coordinator, provides overall strategic coordination leadership for the humanitarian response on behalf of humanitarian partners. The HCT continues to operate from Sana'a, with a coordination support cell in Amman, logistics coordination support in Djibouti and a liaison team in Riyadh.

The Inter-Cluster Coordination Mechanism brings all clusters together to ensure that joint operational humanitarian action is principled, holistic and timely. Clusters continue to develop, monitor and implement detailed cluster operational plans and to engage in cross-sectoral efforts, such as the prevention of outbreaks of communicable diseases.

Increasing numbers of international and national staff are returning to Yemen, joining those already working in Yemen. National UN and NGO staff continue to face work challenges due to widespread insecurity, access constraints and power outages.

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