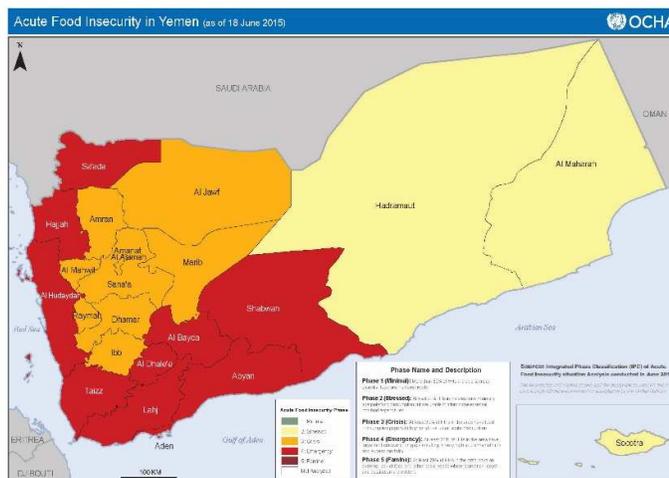




This report is produced by OCHA Yemen in collaboration with humanitarian partners. It is issued by OCHA on 22 June 2015. It covers the period from 11 to 18 June 2015. The next report will be issued on or around 29 June.

Highlights

- The revised Yemen Humanitarian Response Plan (YHRP) was launched in Geneva on Friday 19 June calling for US\$1.6 billion and within that prioritizing \$758 million to meet the most critical needs.
- The collapse of the food and health sectors continues while the number of deaths and injuries is increasing.
- Ten out of the 22 governorates are now rated at emergency level (Level 4) - one level short of “famine.”
- Despite access limitations and increasing funding constraints, humanitarian partners continue to scale up in country and preposition stocks throughout the region.



Source: OCHA
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

1,019,762

Internally displaced people (IDPs)

US\$1.6bn

Funding required to provide critical life-saving assistance

Level 4

Food insecurity - Emergency level 4 in ten of 22 governorates

Situation Overview

The revised YHRP outlines overall humanitarian requirements of US\$1.6 billion dollars and within this identifies nearly \$758 million as urgently needed to address the most critical needs. The plan targets 11.7 million people for humanitarian assistance.

Violence is intensifying across the country with growing casualties since escalation of the conflict end-March. Over 2,800 deaths and close to 13,000 injuries linked to the violence have been reported in hospitals. The United Nations Office of the High Commissioner for Human Rights identified over 1,400 civilians killed and over 3,400 civilians injured. Both sets of numbers are thought to be much higher. UNICEF reports almost four times as many children have died in the past ten weeks as a result of the conflict in Yemen than were killed in the whole of 2014.

Food insecurity continues to deteriorate with close to 13 million people facing a food crisis. Both import reductions and limited port capacity are reported as obstacles adding to the precarious food situation faced by the Yemeni people. With the spiraling costs of cooking gas, and the near-absence of diesel for milling, fuel for transportation, and water for cooking, commercial grain stocks in the country are of little use. Acute malnutrition, already above the ten per cent emergency threshold, continues to rise, and without urgent action, the number of acutely malnourished children is forecast to rise to 1.3 million – including 400,000 severe cases. The Integrated Food Security Phase Classification rates ten out of 22 governorates at the emergency level - one level short of “famine.” This will have lasting consequences on the Yemeni society while negative coping mechanisms are beginning to be observed across the country.

On 11 June, the main power station in Aden, which generates electricity for four districts (Craiter, Al Mualla, Attawahi and Khur Maksar) was attacked and is no longer operational. The risk of cholera and other water-borne

diseases, polio and mosquito-borne diseases across the country continues to escalate while dengue, rubella, and measles continue to spread. Poor sanitation conditions, lack of safe water, continued internal displacement, and the dysfunctional health system are creating the conditions for such outbreaks.

Funding

The revised 2015 YHRP was launched on 19 June 2015, appealing for US\$1.6 billion in humanitarian assistance. Within the appeal, the YHRP prioritizes nearly \$758 million to address the most critical life-saving activities. During 2015, donor governments and private organizations have contributed nearly \$167 million to date, just 10 per cent of the total funding requirements. This funding has been provided directly to UN agencies, IOM, international and national NGOs, and the Yemen Humanitarian Pooled Fund.

During May and June 2015, the Pooled Fund allocated nearly \$11 million to 22 projects through two funding allocations. The Humanitarian Coordinator has approved an additional 16 projects amounting to nearly \$8 million, and agreements are expected to be signed shortly. During 2015 however, only \$10.5 million has been received to date for the pooled fund. Lack of funds against the YHRP, access and security constraints are the main impediments to scaling up the response.

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:

- Emergency food assistance (food distribution and unconditional cash/voucher assistance) is required for 12.9 million people, 6 million of whom are facing extreme food consumption gaps resulting in high acute malnutrition or excess mortality. About 7.6 million people are being targeted for priority assistance, an increase of 46 per cent since March.
- Emergency livelihood kits including emergency agricultural, fisheries and livestock kits are needed.
- Need is most acute in southern governorates where access remains a challenge. The number of IDPs in Aden is growing, giving rise to increased requirements.

1.9m

People reached since escalation of conflict

Response:

- Nearly 14,900 people received emergency assistance, including over 13,250 people receiving emergency food assistance and over 1,600 people (over 850 men and 760 women) receiving livestock fodder in Hajjah.
- Since 15 April partners have provided emergency food to 1,748,000 food insecure and conflict-affected Yemenis, through distributions of over 22,400 MT of food in eleven governorates (Abyan, Aden, Al Mahwit, Amran, Dhamar, Hajjah, Hudaydah, Lahj, Sana'a, Sa'ada, and Shabwah). About 1.9 million people have been reached since escalation of the conflict end-March.

Gaps & Constraints:

- Local procurement of food items has been constrained by shortage of food commodities and qualified vendors. Attempts have been made to seek local commodities from one vendor in Aden.
- Shortage of electricity and communication as well as high transportation costs due to fuel shortages are limiting response.



Water, Sanitation and Hygiene

Needs:

- A staggering 20.4 million people are in need of life-saving WASH assistance. The most critical and prioritized needs are for water trucking, water treatment, hygiene kits, solid waste management, provision of latrines for IDPs and short-term fuel for water supply and sewage treatment.
- Collapsing water and sanitation systems and lack of solid waste collection are causing a major and immediate public health crisis.

154k

People received WASH assistance this week

- IDPs who are not being hosted by relatives are most vulnerable and require comprehensive WASH assistance.
- Medical facilities are in dire need of safe water supply required for life-saving medical treatment.

Response:

- Nearly 153,800 people received WASH assistance including 68,420 people who benefited from new activities.
- Nearly 115,770 IDPs received water from water trucking in Abyan, Aden, Al Dhale'e, Amanat Al Asimah, Amran, Hajjah, Hudaydah, Lahj, Sana'a and Taizz. Over 3,560 IDPs received basic hygiene kits in Hudaydah, and over 2,900 IDPs received hygiene material in Hajjah. Hygiene promotion reached 11,000 people in Hajjah, Hudaydah, Lahj and Sana'a, and nearly 1,780 IDPs and host communities were provided with flush toilets and emergency pit latrines in Hajjah and Hudaydah.
- 500 jerry cans for water storage and 36,000 water purification tablets were provided to 3,360 IDPs in Aslem District, Hajjah Governorate. Latrines for 1,075 IDPs (430 male, 645 female) were constructed in Khamir, Amran.

Gaps & Constraints:

- Insecurity and conflict have severely hampered operations in Aden and Taizz cities.
- The collapse of the national WASH infrastructure due to lack of diesel is the key reason why needs in WASH have doubled since escalation of the conflict.

**Health****Needs:**

- 15.2 million people are in need of basic health care, an 80 percent increase since March. Partners estimate two thirds of those will be reached if access is enabled.
- The outbreak of dengue fever and other febrile illnesses in some governorates requires strengthened surveillance, prevention measures, reporting, access and delivery of vital medicines, water, electricity and fuel, as well as the ability of affected people to safely seek assistance.
- There is an urgent need of access to provide vaccinations, nutrition support and intravenous fluid for Aden Hospital and for the implementation of control measures for dengue fever, specifically spraying houses and mosquito breeding sites.
- There is an increased risk of polio, measles, rubella, and other vaccine-preventable communicable diseases due to the collapse of vaccine programmes throughout the country. About 6 million vaccinations for polio, measles, and rubella are urgently needed.
- Access to the most critical districts in Aden (Attawahi, Al Mualla, Craiter and Khur Maksar), Lahj (Al Hawtah and Tuban) and Taizz (Al Mudhaffar, Al Qahirah and Salh) is required to reach more than a million people including 186,000 children under 5 facing urgent health needs.
- Due to the high numbers of casualties, medical supplies and stocks are urgently needed including trauma kits, drugs, medical and surgical supplies. First aid, referral and ambulance services, surgical teams and training of health workers on mass casualty incidents are critically needed. Over 95 per cent of the foreign medical work force has left the country since the start of the conflict.
- Urgent maternal and child health interventions are required via mobile clinics.
- Due to high displacement from Sa'ada, increased assistance is required in neighboring governorates.

Over 483k

people will receive treatment thanks to the delivery of essential items this week

Response:

- Health kits, IV fluids and other essential medicines have been delivered to health facilities in four governorates for the treatment 438,300 people, including treatment of patients with dengue fever.
- More than 159,000 liters of fuel were delivered to five hospitals and specialist centres including those providing dialysis (4) and oncology treatment.
- A total of 100 oxygen cylinders were provided to Al-Thawra Hospital in Hudaydah governorate.
- About 350 new injured patients were received by partners last week in Aden, with an average of 50 new patients admitted per day. At least 20 surgeries took place every day.

Gaps & Constraints:

- There continues to be a severe shortage of fuel affecting the operation of health facilities, ambulance and referral services, and medicine/vaccine cold storage.
- Health facilities are collapsing throughout the country due to critical shortage of electricity, water and emergency supplies. Life-saving medicines for chronic illnesses such as hypertension, diabetes and cancer are also in extremely short supply.

- Poor sanitation and lack of access to safe water are increasing the risk of major communicable outbreaks such as cholera.
- Security of health care workers continues to be compromised by injury, death and kidnapping. Three health workers including two ambulance drivers were injured and two ambulances were destroyed in Sahar and Al Malaheet districts, Sa'ada governorate.



Nutrition

Needs:

- Of the 1.6 million people in need of nutrition services, more than 850,000 are children.

Response:

- Screenings took place for nearly 7,670 children under 5 in Al Jawf, Hajjah, Hudaydah and Sa'ada. Over 3,080 severely malnourished children were admitted to fixed and mobile outpatient therapeutic programmes (OTPs) in Aden, Al Bayda, Al Jawf, Amran, Hajjah, Hudaydah, Ibb, Taizz, and Shabwah.
- 490 pregnant and lactating women received iron/folate supplementation and over 550 caregivers of young children received counseling for appropriate feeding. Nearly 1,420 children under 5 received vitamin A supplementation in Amran, Hajjah, Hudaydah, Mahwit, Raymah, Sa'ada and Shabwah.
- Nutrition supplies were distributed to nearly 800 pregnant and lactating women and over 600 moderately malnourished children in Lahj and Sana'a City.
- 22 mobile clinics operated in Aden, Al Bayda, Amran, Hajjah, Hudaydah, Mahwit, Marib, Raymah and Shabwah, providing integrated health and nutrition services.
- In Al Jafariyah District, Raymah and Bani Qa'is, Hajjah, training for 55 community volunteers took place, covering exclusive breastfeeding, nutrition, vaccinations, preventing child recruitment, hygiene promotion and disease prevention (malaria, dengue fever and diarrhea).

22

Mobile clinics operated in nine governorates

Gaps & Constraints:

- Greater access, and increased supplies of fuel and other imports would enable 1.6 million people targeted under the YHRP to be reached with nutrition assistance. Access to southern parts of the country in particular is needed to provide nutrition support.



Shelter, NFIs and Camp Coordination and Camp Management

Needs:

- All 1 million IDPs, and a host population of 200,000 people, require some form of emergency shelter and NFI assistance, including tents and shelter kits.
- 15,680 IDPs in Sa'ada, Al Jawf, and Marib were identified to be in need of emergency shelter and NFI assistance.

1,550

IDPs received NFI this week

Response:

- NFIs were distributed to over 1,550 IDPs in Sana'a, Amran City and Taizz.

Gaps & Constraints:

- Shortage of fuel and insecurity remain basic challenges for delivering supplies to people in need.
- Limited NFIs and shelter stocks in local markets in affected areas have led to a massive increase of prices.



Education

Needs:

- 2.9 million children are in need of education.
- Almost 430 schools have been directly affected by the conflict, including 123 that have been damaged, 237 occupied by IDPs and 67 occupied by armed groups.
- Over 20 schools were damaged in Al Dhale'e, Sa'ada, Sana'a City and Taizz. A school in Taizz was occupied by IDPs.
- IDPs are burning school furniture as fuel for cooking, and hundreds of occupied schools will require refurbishment when they are again able to be used as learning spaces.

427

Schools directly affected by conflict

Response:

- A national task force to protect school buildings and assets during the ongoing conflict was established.

Gaps & Constraints:

- Continued insecurity impeded provision of non-formal and catch-up classes during the school summer break for the 1.83 million children whose learning has been affected by the escalation of violence.

**Protection****Needs:**

- A total of 11.4 million people are in need of protection. Partners will respond to 6.9 million people with prioritized activities addressing the most critical and urgent needs.
- IDPs from Sa'ada report fear of being targeted by airstrikes and of being discriminated against by host communities.
- Since the start of the conflict, nearly 42,270 people have fled Yemen, arriving in Djibouti, Ethiopia, Oman, Saudi Arabia, Somalia and Sudan, mainly by sea or overland.
- Refugees, asylum seekers and migrants continue to arrive in Yemen despite the crisis situation, with nearly 190 people, mostly Ethiopians, arriving during the past week. Since January 2015, approximately 35,630 new arrivals have landed along the coast.
- Child-friendly spaces (CFS) and psychosocial support for children are needed.
- An estimated 2,900 households or 90 per cent of residents, in Al Hazm and Al Ghayl districts in Al Jawf Governorate have fled, due to ongoing violence. They have moved to other districts in the same Governorate, to Amran or to Sana'a. Their needs for essential services have yet to be met.

500

Children reached in two new CFS this week

Response:

- Two CFS were inaugurated in Hudaydah to respond to the needs of conflict-affected children with the participation of 500 children in both districts. These CFS have been established after extensive training targeting 32 facilitators, supervisors and volunteers on psychological support, psychological first aid and CFS management.
- Training in monitoring and reporting of grave child rights abuses was conducted for 25 new community-based child protection committees in five governorates (Aden, Taizz, Amanat Al Asimah, Sana'a and Al-Dhale'e).
- Psycho-Social Prevention (PSP) activity was conducted for parents and children in Sana'a. Parents also received training in first aid, child protection, and safety. Over 370 IDP households living in schools in Amanat Al Asimah received male and female dignity kits.
- UNHCR reception centre Sana'a received 675 people since 7 June to register, process, renew documents, seek protection counselling and/or obtain marriage verification.
- In Kharaz refugee camp, 14,000 litres of fuel from Al Jawf were transported to the camp from Lahj Governorate, which will run the water pump in the camp and provide electricity to the camp and host community for two months.

Gaps & Constraints:

- Food rations have run out in Kharaz refugee camp (near Aden). Limited access, due to constant insecurity, remains an obstacle to the effective delivery of food commodities to the southern governorates, via road and via sea. WFP-chartered vessels continue to be redirected to Hudaydah despite frequent attempts to deliver to Aden. Food offloaded in Hudaydah is planned to be transported quickly to the camp. Reported by partners, the monthly distribution scheduled to start on 15 June did not take place.
- A three-month supply of medicines and therapeutic foods (Plumpy Nut) was moved by boat from Aden to Kharaz refugee camp on 14 June.
- Access remains a major constraint, particularly to Sa'ada, Marib and Aden.
- The fuel crisis is affecting access and the ability of protection personnel to reach affected people.

**Logistics****Needs:**

- Aden is a natural port and the biggest in Yemen. It is made up of five parts with the oil harbor and the Port of Aden considered the most significant parts. Their combined import capacity prior to the escalation of the conflict was over 1.6million MT per month. Today, that capacity is close to zero due to insecurity.

- Hudaydah is Yemen's second port and its import capacity was 750,000 MT per month prior to the escalation of violence but is now at 50 per cent. Traditionally, Hudaydah workers were bussed in to work in the evenings; however, given fuel restrictions, the lack of electricity and the ongoing fighting this is no longer taking place on a regular basis.
- Al Saleef is a private port used mainly for private grain importation. It has a capacity of over 200,000 MT per month. Currently it is 50 per cent operational.
- Mokka, a small port, is functional at about 20 per cent of its import capacity, with a capacity of about 125,000 MT per month.
- Al Mukalla, another small port, is not in use due to security.

Response:

- Fuel that arrived on board the MV Drive Mahone was discharged and delivered to Sana'a for humanitarian partners.
- Storage capacity in Hudaydah port for partners is being expanded due to the increasing numbers of vessels arriving.

Constraints:

- Insecurity is decreasing the capacity of ports, as are the lack of fuel and people's inability to work.
- Hudaydah port is reported to be congested with several vessels at anchorage awaiting berthing. The congestion is said to be due to the lack of fuel, with manual offloading delaying the process. The closure or slower operations at other ports has added to the stresses on this port. The average offload delay in Hudaydah seaport is eleven days.
- Congestion at functioning sea ports is being further analysed.

General Coordination

The Humanitarian Country Team (HCT), led by Yemen's Humanitarian Coordinator, provides overall coordination and 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 continues to develop, monitor and implement detailed cluster plans and to engage in cross-sectoral efforts such as the prevention of outbreaks of communicable diseases. Clusters continue to monitor and support national partners and other agencies remotely from Amman as they transition back to Yemen.

More international staff are returning to Yemen, joining those already working from Sana'a. National UN and NGO staff continue to face work challenges due to widespread insecurity restricting movement and due to telecommunications outages.

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