A tragedy unfolds as funding falls short

A tragedy is unfolding in Yemen as humanitarian needs continue to grow while aid agencies are running out of money to fund life-saving assistance. Millions of people who depend on aid for survival are now hanging by a thread in the world’s worst humanitarian crisis. Nearly 80 per cent of the population still needs some form of humanitarian aid and protection.

More than $3.2 billion is required for humanitarian response in 2020. At the High-Level Pledging Event in Riyadh held on 2 June, donors pledged only US$1.35 billion of the $2.41 billion needed to cover essential humanitarian activities between June and December, leaving a gap of more than $1 billion.

With only $558 million provided so far, the aid operation is on the brink of collapse unless donors fulfil their pledges immediately, and without additional funding. The situation compares unfavourably with this stage in 2019, when $2.6 billion had been received for the aid operation.

Aid agencies, working closely with donors, have been engaging with authorities in Yemen, resulting in concrete steps to improve the operating environment. These steps are helping to restore confidence in the operation following a sharp deterioration in the operating environment in northern Yemen in the last six months of 2019, placing the humanitarian partnership...
back on firm ground. The increasingly restrictive operating environment in the second half of 2019 made it difficult to assure donors that aid was being delivered in accordance with humanitarian principles leading some donors to withhold funding.

Since mid-April, 31 of 41 of critical UN programmes have reduced or closed for lack of funding, most of them critical in the fight against COVID-19. On average, aid agencies reached only 9.5 million people with life-saving aid in April, down from 13.7 million in March and 15.6 million in December 2019. Critical water and sanitation services needed to suppress the spread of the virus and other deadly diseases will come to a halt for 8.4 million people, including 3 million children, by the end of June.

Without funding, the aid operation is expected to shrink further in August when 19 million people will lose access to healthcare, including pregnant and nursing women, and children. Five million children will miss out on vaccinations against killer diseases and public health services will collapse further. Already, at this critical time, financial incentives for 10,000 health care workers who run Yemen’s health facilities have stopped and more than 2.2 million people stand to lose access to urgent surgical assistance. Life-saving nutrition services for 2.5 million malnourished children will cease by the end of August, leaving beneficiaries acutely malnourished and 23,500 children with severe acute malnutrition at immediate risk of death.

Despite limited funding, partners continue to deliver assistance to people in need while adequate funding is sought to prevent a humanitarian catastrophe. Systems and structures for a massive scale up of the response are already in place. Aid agencies in Yemen have experience of ramping up operations – in 2018, they managed one of the largest scale-ups in history reaching an unprecedented 14 million people every month, preventing large-scale famine, rolling back the worst cholera epidemic in a generation, and supporting millions of displaced people. They are ready to do this again.

COVID-19 rapidly spreading

COVID-19 continued to spread rapidly and with deadlier consequences in Yemen. Between 10 April, when the first COVID-19 case was reported, and 28 June, the authorities announced 1,122 cases, 303 deaths, and 432 recoveries.

About 25 per cent of Yemenis confirmed to have the disease have died, 5 times the global average. More than 75 per cent of confirmed cases are men and people aged between 45 and 59 have the highest case fatality rate. The highest number of confirmed cases are in Hadramaut, where 317 cases have been reported, including 126 deaths and 62 recoveries were reported, followed by Aden, where 264 cases, including 32 deaths and 185 recoveries, were reported. There is evidence of COVID-related displaced in some areas. According to the IOM’s Displacement Tracking Matrix, close to 1,000 families have moved out of fear of COVID-19 in southern governorates since mid-May, mainly from Aden. Most families have moved to rural areas including in Lahj and Abyan and are staying in second homes or with host families. Marginalized and migrant groups are particularly vulnerable. There are reports of migrants being blamed for spreading COVID-19, with some pushed out of certain areas. These anti-migrant sentiments are also contributing to people not seeking medical care.
Reports continue to indicate that individuals with mild and moderate symptoms are often not seeking treatment until they are critically ill. Fear of stigma, concerns about safety, inability to access testing, and the perceived risks of seeking care may explain why people are not seeking treatment earlier. Those with severe symptoms are being turned away from health facilities that are full or unable to provide safe treatment.

Although resources are limited, aid agencies have scaled up the COVID-19 response through the 4S Response Strategy, which prioritizes suppression of virus transmission; procuring and distributing medical supplies; saving lives by supporting clinical readiness; and safeguarding the public health care system. Aid agencies require $180 million (with US$49.1 already received) for the COVID-19 response.

To scale up suppression of the transmission of the virus, the number of community volunteers increased from 14,000 in May to more than 19,000 in June. Volunteers continue to raise awareness about COVID-19 across the country. An additional 6,000 mother-to-mother community volunteers were also activated. Under the supplies line of effort, more than 12,000 metric tons (MT) of medical equipment, testing kits and medicine were procured with 8,616 metric tons of these already arrived in the country. An additional, 43 MTs of medical supplies arrived in Yemen in June facilitated by Hayel Saeed Anam Foundation on behalf of the International Initiative on COVID-19 in Yemen (IICY), a collaborative private-public sector partnership of multinational companies and the Data Source: Humanitarian Country Team.
United Nations. WHO has equipped and added 21 ICUs to the existing 38 ICUs in COVID-19 designated hospitals since the beginning of May. Partners are deploying two high capacity mobile field hospitals with nearly 100 beds, and providing salaries to 9,000 frontline health care workers.

Safeguarding the public health system at more than 4,300 non-COVID health care facilities to ensure services are not overwhelmed by COVID-19 cases is another priority. The focus is on providing the “Minimum Service Package” at these facilities and essential medicines to those in most need; responding to other deadly diseases including cholera, diphtheria, dengue and malaria; and providing nutrition treatment to pregnant women and malnourished children.

COVID-19 exacerbates Yemen’s economic problems

Yemen’s economy has been hard hit as two of the country’s primary sources of foreign exchange – remittances and fuel exports – dried up as a result of the global downturn caused by the COVID-19 pandemic. It is estimated that 80 per cent of remittances sent by Yemenis working abroad is lost, especially as Saudi Arabia, which hosts most of Yemen’s expatriate workers, continues to navigate a way out of a COVID-19 induced slump. Meanwhile, COVID-19 has also diminished Yemen’s income from fuel exports, as both demand and prices dropped sharply.

As a result, the Yemeni rial (YER) has continued to depreciate against foreign currencies. By the end of May, the unofficial rate had fallen by more than 20 per cent compared to a year ago, crossing the YER 700/US$ mark for the first time since November 2018 in southern governorates, which forced the Central Bank of Yemen to suspend currency trading temporarily. The parallel market exchange rate now stands at around YER750/US$. In the north, the exchange rate saw less volatility due to monetary measures implemented in December 2019. The rial is trading at around YER 620/US$. The gap between south and north now stands at YER130 (or 20 per cent).

Given Yemen’s high dependence on imports, the depreciation of the rial has predictably further eroded local purchasing power. Data gathered

Exchange rate trend (YER/USD)

by FAO shows that in early June the cost of the minimum food basket (MFB) has increased by 8 per cent compared to the pre-COVID-19 period (February 2020). Aden and Lahj governorates saw the highest MFB price increases, 35 and 27 per cent respectively. As the UN Emergency Relief Coordinator, Mr. Mark Lowcock, noted in his briefing to the UN Security Council on 24 June, this has meant that “more Yemenis are being squeezed out of markets, unable to buy food or other life-saving requirements.”

These problems are further exacerbated by intermittent salary payments to public civil servants. In April and May, half of January 2018 salaries were disbursed to civil servants in the north, while salary payments remained irregular in southern governorates. Meanwhile, a severe fuel shortage in northern governorates is adding to economic woes and affecting humanitarian operations.

Experts caution that the Yemeni rial could continue to depreciate as a US$2 billion deposit from Saudi Arabia in the Central Bank of Yemen in 2018 is nearing exhaustion. They warn that the exchange rate could reach YER1,000/US$ by the end of the year, again pushing Yemen to the edge of large-scale famine.

In his briefing to the UN Security Council, Mr. Lowcock urged donors to provide Yemen with predictable foreign exchange injections and to increase their contributions and urgently disburse funding to the humanitarian operation to prevent a dramatic deterioration in humanitarian conditions. The alternative, he said, is to “watch Yemen fall off the cliff.”

Heavy rains and flooding hit southern and eastern governorates

Following the devastating rains that hit Yemen in April that affected the lives of tens of thousands of people, destroying shelters, damaging infrastructure and disrupting services, heavy rains again struck southern and eastern governorates in early June. In the Aden hub area, torrential rains were preceded by a sandstorm in coastal areas of Hadramaut, that damaged sites for internally displaced persons (IDPs) in Al Raída (Korsham IDP site) and Qusayr districts (Muhenim IDP site) and the Buaih IDP site in Al Mukalla City. Areas of the Ibb and Al Hudaydah hubs were also affected. Heavy rain was recorded in Al Maharah Governorate on 2 June and in Marib, flooding cut off the main road linking Al Bayda and Marib governorates for several hours on 4 June, and again on 5 June. In the Aden hub area, 1,076 families were affected by the rains (376 families in Aden, 103 in Hadramaut, 63 in Al Maharah, 222 in Al Dhale’e, 208 in Southern Taizz 25 in Shabwah, and 79 in Abyan). In the Ibb hub areas...
501 families were affected (232 families in Ibb, 242 in Taizz, and 27 in Al Dhale’e) and in the Al Hudaydah hub 456 families were affected (36 in Al Mahweet and 420 in Al Hudaydah).

Once again, displaced families were badly affected by the rains and partners have coordinated assessments and response to humanitarian needs arising from the floods. Key response efforts in Hadramaut included volunteering forums providing medicines to 12 health facilities in Hajer District and a local NGO that conducted a one-week fog spray campaign as a preventative measure against malaria. The water network in Al Jawl, Hadramaut, that supplies water to 15,000 people, damaged by the April rains, was rehabilitated, and water trucking in Mayfa’ District provided 800,000 litres of water to families affected by the earlier rains. In Hajr and Mayfa’ districts, basic medicines were provided to the main hospital and 12 health facilities. In Al Dhale’e, where 12 IDP sites were damaged, the response included replacing damaged shelters and providing non-food items to more than 260 families and in Taizz, partners provided a similar response to more than 250 families in 5 IDP sites. In Hajjah in the Al Hudaydah hub, an international NGO completed the distribution of Emergency Shelter Kits to 1,340 families in Abs District. Partners are working on flood preparedness plans, drawing on the experience this year to strengthen future response efforts.

Migrant arrivals plummet while anti-migrant abuse spikes leaving thousands stranded

In 2019, more than 138,000 migrants are estimated to have arrived in Yemen, according to IOM’s Displacement Tracking Matrix, an average of almost 12,000 a month. The vast majority of arrivals are Ethiopian nationals, and most are heading to Gulf States in search of work. However, COVID-19 and tighter border controls at points of departure in Djibouti and Somalia, and at arrival points in Yemen, have led to a drastic fall in the number of migrant arrivals in Yemen this year. In May 2020, the number of arrivals was down 94 per cent on May 2019, and by mid-month only 271 migrant arrivals had been recorded in June 2020.

While the number of migrant arrivals has fallen, anti-migrant sentiments and anti-immigrant policies have increased as part of a COVID-19 backlash. This is not an issue exclusive to Yemen, the UN Secretary-General, António Guterres, has highlighted how globally, COVID-19 has been particularly devastating for the displaced and migrants in precarious situations, who face a health and a socio-economic crisis, and fear of COVID-19 has led to skyrocketing xenophobia and racism. In Yemen, IOM has indicated that migrants are being stigmatized as “transmitters of disease”, and that xenophobia and scapegoating campaigns are leading to attacks on migrants, increased detention, denial of access to health services, movement restrictions, and forced movements to frontline and desert areas, leaving migrants stranded without food, water and essential services. In response, humanitarian partners have been scaling up activities to meet

Migrant arrivals 2019 and 2020

Source: IOM
the needs of mobile populations – displaced persons, migrants and refugees – since March. The forced movement of migrants has resulted in challenging humanitarian needs. In the two months to 13 June, the authorities are reported to have forcibly transferred around 1,500 migrants to southern governorates. Those forced to move included women, boys and girls, some of them in need of medical care from illnesses contracted in detention or from gunshot wounds. In Aden City, there has been an increase in the number of migrants stranded as a result of movement restrictions and forced relocations. Over 4,000 migrants have been living in extremely difficult conditions, most of them on the street, struggling to access minimum food, water and basic services. IOM is working with local authorities and partners to support access to basic services like health care. In Sa’ada governorate, there are also reports of 7,000 migrants stuck near the border, while there are reports of thousands of migrants stranded in other governorates across Yemen like Marib and Lahj.

**Civilian casualties in June marked by multiple casualty incidents**

In the first three weeks of June, civilian casualties continued at a similar rate to May. The Protection Cluster’s Civilian Impact Monitoring Project (CIMP) reported a total of 155 civilian casualties in May, including 46 fatalities (10 children and 7 women) and 109 injured (40 children and 8 women). In the three weeks to 21 June, CIMP reported 108 civilian casualties, including 38 fatalities (9 children and 5 women) and 70 injured (21 children and 10 women). The highest number of civilian casualties reported were in Taizz (28), Sa’ada (21), Al Hudaydah (15), and Shabwah (12).

As many as 65 civilian casualties were reported in 7 multiple casualty incidents between 31 May and 20 June in which 5 or more civilians were killed or injured; 2 of the incidents resulted in more than 10 civilian casualties. The Emergency Relief Coordinator, Mr. Mark Lowcock, highlighted this in his briefing to the UN Security Council on 24 June, “We also continue to see...
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appalling multiple-casualty incidents”, and the Humanitarian Coordinator for Yemen, Ms. Lise Grande, issued a statement following strikes on a vehicle that killed at least a dozen people, including four children, in Shadaa District in Sa’ada Governorate in the north of Yemen on 15 June. Ms. Grande extended her condolences to the bereaved and urged the parties to the conflict to lay down their arms, “Humanitarian agencies are running out of money and COVID is spreading. Millions of people who depend on food aid and the health services we provide to fight cholera and malaria are now hanging by a thread. There’s only one answer—the war needs to stop.” In an earlier incident in Al Hudaydah on 31 May, 22 civilian casualties were reported – 4 fatalities including 3 children and 18 people injured including 15 children – when artillery shells hit a gathering in Az Zuhur neighbourhood. The other five incidents involving five or more civilian casualties reported in June were in Taizz (where three incidents were reported), Shabwah and Sana’a governorates and involved artillery shelling (two incidents), air strikes, a landmine explosion, and crossfire.

Number of civilian casualties reported between 1 and 21 June 2020

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<th>Civilian Casualities</th>
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Source: CIMP