

### HIGHLIGHTS

- 124 humanitarian partners are delivering assistance in all the 22 governorates
- 49 districts have no qualified doctor
- \$75 m is being provided through pooled funds
- Seven food insecure governorates are under emergency, IPC Phase 4

### FIGURES

Total population	27.4 m
Total people in need of humanitarian assistance	18.8 m
Total people in acute need of humanitarian assistance	10.3 m
# of people displaced (IDPs & returnees)	3.0 m
# of deaths (WHO)	8,010
# of injuries (WHO)	44,538

Source: 2017 HNO and WHO (as of 14 April 2017).

### FUNDING

<b>\$2.1 billion</b> requested
<b>\$378.4 million</b> funding against HRP
<b>18.3 per cent</b> funded (09 May 2017)

Source: FTS, April 2017



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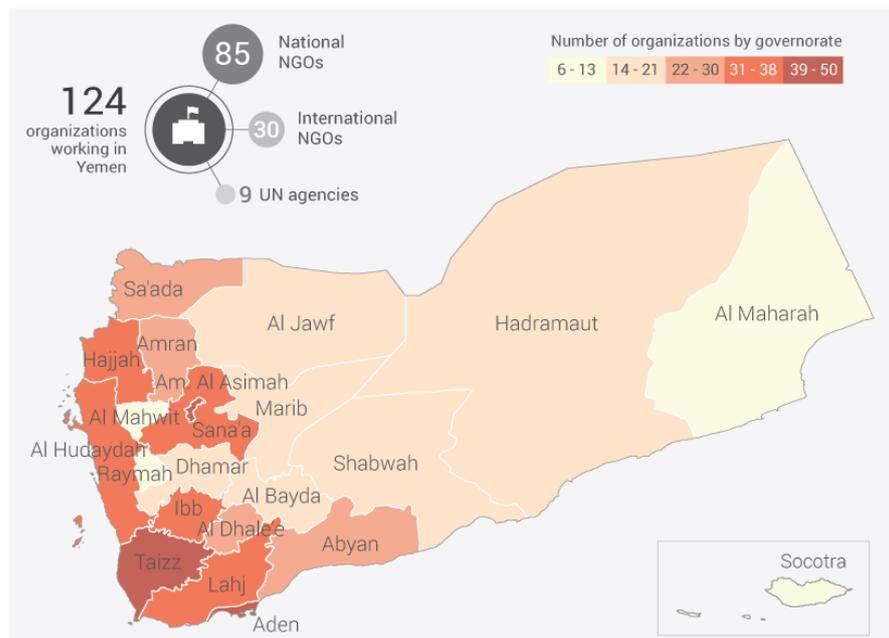
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## Needs-based presence and assistance

### Humanitarian partners are operating in all 22 governorates

Humanitarian action in Yemen is driven by the principles of humanity, neutrality, impartiality and operational independence. This means that action is motivated by the humanitarian needs of people across the country without regard to nationality, race, gender, religious belief, class, political affiliation, or any other such consideration. As a result, the needs and targets identified in the **2017 Yemen Humanitarian Response Plan (YHRP)** are based on rigorous data collection where all governorates were assessed through physical presence and survey exercises and then prioritized according to where the humanitarian needs are most urgent. The determination of humanitarian needs and targets were made taking into consideration the best evidence available to humanitarians and were not influenced by any political or territorial consideration.

#### Number of humanitarian organisations by governorate (as of March 2017)



Source: Clusters (Mar 2017)

In 2017, humanitarian partners in Yemen aim to provide life-saving assistance and protection in an impartial and neutral manner to 12 million people requiring urgent assistance. Over 120 national and international humanitarian organisations are working in a coordinated manner to deliver life-saving assistance and alleviate suffering in all Yemen's 22 governorates. These include 85 national NGOs, 30 international NGOs, including organizations from the Gulf region and beyond, and nine UN organisations.

Operating on the basis of the humanitarian principles, in 2016 humanitarians reached over 5.6 million people with assistance and protection.

*The 124 humanitarian partners currently operating in Yemen have operations in all the 22 governorates*

In 2017:

- More than three million people are receiving emergency food assistance every month,
- More than one million people have been assisted to access safe drinking water,
- 700,000 people benefited from health assistance, and
- Almost 100,000 acutely malnourished children and pregnant or lactating women received life-saving treatment.

Ultimately, it is humanitarian access and monies that determines where humanitarians can deliver. Parties to the conflict have the responsibility to enable principled humanitarian action by allowing the safe and unhindered passage of humanitarian aid to people in need and by protecting the freedom of movement of people in need to the assistance they require. In Yemen, out of 333 districts spread across 22 governorates, 43 are gauged to be the most difficult to access by humanitarians working on the ground. These difficult to access districts have a population of approximately 2.1 million people out of which 1.3 million people are in acute need of humanitarian assistance - in other words they require assistance to sustain life. Marib, Sa'ada, and Taizz governorates have the greatest numbers of districts in the "high access constraints" or "extremely difficult to access" categories. Delivering assistance to these difficult-to-access governorates is extremely challenging. In April, 200 trucks carrying life-saving relief food from Hudaydah to Taizz were delayed until necessary clearances were negotiated. Another convoy of eight trucks, carrying 70 MT of critically needed medical supplies for eight public hospitals in Taizz, including the Taizz enclave, was held up en route by de facto authorities on allegations that the supplies were expired.

*Lives are being lost in Taizz to preventable diseases because hospitals are struggling to cope without sufficient supplies*

The Humanitarian Coordinator, Mr. Jamie McGoldrick, was only able to enter Taizz City in April, following more than eight months of active negotiations with various parties and de facto authorities. "Despite its current status as an active conflict zone, markets appeared busier with more people, more vehicles were on the roads and many more shops and restaurants were open," he said. Local relief committee authorities stressed, however, that lives are being lost to preventable diseases with hospitals and feeding centers struggling to cope due to problems with salary payments, insufficient essential supplies, and lack of medicines. Increasing malnutrition rates, particularly among children, are worsening the already difficult humanitarian situation.

## Funding pledges need to be made effective

### US\$1.1 billion pledged in Geneva for Yemen humanitarian response

A [High level Pledging Conference for Yemen](#) held in Geneva on 25 April raised about \$1.1 billion. While the conference has been hailed as a success in that it placed Yemen at the center of attention for the international community, the monies only represent half of the requirement and include monies already received against the YHRP. Pledges were made by 48 Member States, the European Commission, the [Central Emergency Response Fund \(CERF\)](#) and four NGO/humanitarian organisations. Considering that Yemen is a relatively forgotten crisis, the level of support was unprecedented.



A 90-year old blind woman from Al Nassiri village in Hudaydah governorate and recipient of aid through Yemen's humanitarian pooled fund,. Credit: Giles Clarke/OCHA.

*"We basically now need three things: access, access and access...to reach all people in need" – UN Secretary General Antonio Guterres*

"At a time when Yemen is experiencing a tragedy of almost unprecedented proportions and the need for humanitarian and protection assistance has never been greater, the generosity shown at this pledging conference helps to reaffirm our common humanity," said [UN Secretary-General António Guterres](#), who co-hosted the conference with Didier Burkhalter, head of the Federal Department of Foreign Affairs of Switzerland and Margot Wallström, Minister for Foreign Affairs of Sweden. Humanitarian partners hope that the pledges will materialise quickly so activities can be scaled up on the basis of evidence-based, prioritized, coordinated and principled humanitarian response.

*The pledges need to become effective immediately to avert further disaster, especially given the risk of famine*

The conference stressed the need to avert further disaster in Yemen by making the pledges effective immediately given the risk of famine faced by almost seven million Yemenis. Unanimously, Member States and humanitarian organisations called for the peaceful resolution of the conflict, as the only way to end the suffering. They also called for the de-escalation of any military confrontation in the Port of Al Hudaydah, the main entry for life-saving commercial goods into Yemen, at a time when people need fuel, food, and medical imports more than ever and considering that the humanitarian effort cannot be expected to, nor is it capable, of taking the place of the commercial sector. Furthermore it was stressed that all ports need to remain open for commercial imports due to their proximity to affected people. Al Hudaydah Port's position and vicinity to millions of people in need is a critical factor to consider.

"We basically now need three things: access, access, and access, to make sure that there is an unhindered access for all humanitarian actors to reach all the people in need, everybody in need and everywhere inside Yemen; and that International Humanitarian Law is fully respected by the parties to the conflict; and all the necessary infrastructure to import and distribute goods is available and operational," said Mr. Guterres.

## \$75 m to be availed through Pooled Funds

### Yemen Humanitarian Fund, CERF allocations launched for \$75 million

The Arab Gulf Development programme, Canada, Germany, Ireland, Netherlands, Sri Lanka, Sweden and The United Kingdom have generously contributed \$45 million to the [Yemen Humanitarian Fund](#) (YHF) to date. The YHF has also carried-over \$22 million from 2016. Thanks to these generous contributions a total of US\$50 million will be made available from the YHF under the First Standard Allocation, representing 2.4 per cent of the humanitarian funding requested under the 2017 YHRP.

The allocation strategy is the result of consultations with stakeholders from March 2017 onwards, including Humanitarian Country Team (HCT) members, Clusters, sub-clusters, Area HCT and OCHA hubs at governorate level through a data driven approach based on the food severity level in the country and the vulnerability of the protracted and newly displaced people, returnees as well as host communities. Within the overall framework of the YHRP, the allocation aims to address the immediate causes of food insecurity and malnutrition by ensuring adequate access to food, nutrition, health and water and sanitation to the most vulnerable. The fund will achieve an integrated response for the most vulnerable displaced people, returnee families and host communities, by ensuring access to a minimum package which includes shelter, non-food items, camp coordination and management food security, wash, health, nutrition and protection services.

### CERF to provide \$25 million for famine prevention

Yemen will shortly receive \$25 million from the CERF funding window for famine prevention, focusing on the provision of food, nutrition and health supplies, as well as necessary logistical and security support for all humanitarian partners. The CERF allocation will complement the YHF allocation targeting the same 59 district as the YHF allocation. These districts have the most severe food security and nutrition indicators and were selected after a thorough analysis of needs across the entire country.

## Food insecurity getting worse

### Available food is largely imported and is too expensive for many people

Food in Yemen is typically available through commercial imports, local production, food aid and food stocks or reserves. Imports account for the bulk of the food consumed, more so now when local production has declined. In 2016, total cereal production was estimated at 480,000 MT, which was about 11 per cent below the 2015 harvest and 37 per cent below the five-year average. The 2016 Emergency Food Security and Nutrition Assessment showed that 40 per cent of all farming households experienced a decline in cereal production compared to pre-crisis levels due to ongoing conflict and torrential rains which caused flash floods and landslides in July 2016.

The high dependency on imported food exposes many Yemeni families to the risk of prices fluctuations and other factors that limit access to the marketplace. In March 2017, wheat prices were 32 per cent higher than pre-crisis levels, while locally produced cereals

*The upcoming YPF and CERF funding allocations will go to districts with the most severe food security and nutrition indicators*

*Many Yemeni families are highly dependent on imported food, which exposes them to the risk of price fluctuations and limitations to market access*

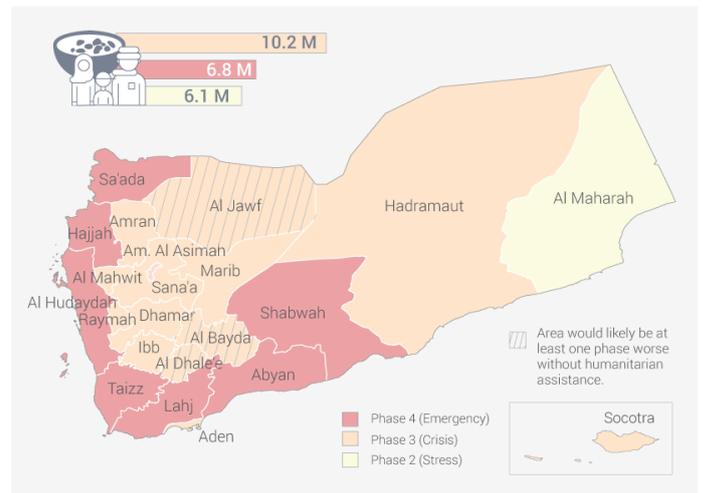
*65 per cent of Yemeni households are now estimated to be food insecure compared to 41 per cent before the crisis, four governorates now exceed the WHO GAM critical threshold*

cost 46 per cent more for sorghum and millet and 61 per cent for maize. The situation is worse in governorates where conflict is active like Taizz, Hudaydah, Marib, Hajjah and Sa'ada. Urgent action is needed to mitigate and respond to the high levels of acute food insecurity. Humanitarian partners can assist those in need if adequate funds along with unhindered access are provided, and import restrictions are lifted.

**Without concrete actions, Yemen faces a real possibility of famine**

Continuing violence in Yemen is fuelling one of the worst hunger crises in the world and humanitarian partners expect the situation to deteriorate further. Already, the number of food insecure people has increased significantly over the last two years. Seven out of 22 governorates are under emergency (Integrated Phase Classification Phase 4) – Taizz, Abyan, Sa'ada, Hajjah, Al Hudaydah, Lahj and Shabwah. With 65 per cent of Yemeni households now estimated to be food insecure compared to 41 per cent before the crisis, and four governorates now exceeding the WHO Global acute malnutrition (GAM) 'critical' threshold and seven more exceeding the 'serious' threshold, the situation is critical. Without concrete action from parties to the conflict and the international community, Yemen faces a very real possibility of famine.

**Food insecurity levels by governorate (IPC Phases)**



Source: Integrated Food Security Phase Classification, IPC Report (Mar–Jul 2017)

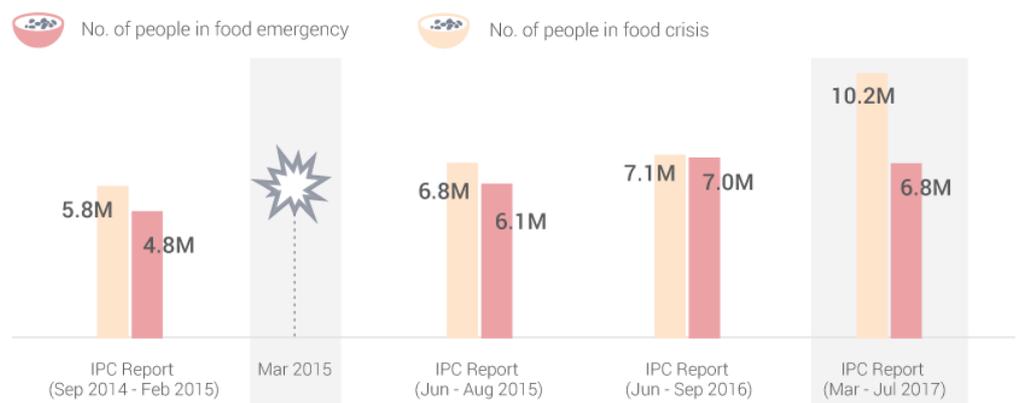
In many markets across Yemen, food is available but a majority of people cannot afford it. Of an estimated 17 million food insecure people, seven million can only feed themselves and their families by making very hard economic choices day-to-day. One in four Yemenis has lost the power to purchase the highly priced food that is available, and most vulnerable households that depend on market purchases for food have been totally constrained by the current economic crisis.

**Al Hudaydah Port is key to Yemen's food security**

*Al Hudaydah Port is the lifeline for Yemen's food imports and any decision that slows its operations will have grave consequences for food security*

More than 80 per cent of Yemen's food imports enter the country through Al Hudaydah Port, therefore any military escalation in that region is a source of concern. The port is the lifeline for commercial and humanitarian imports into a country that is 80 to 90 per cent dependent on imported food, medicines and fuel. Already the port operates at reduced

**Timeline of food insecurity levels (2014 – 2017)**



Source: Integrated Food Security Phase Classification, IPC Reports (2014, 2015, 2016 & 2017)

capacity due to restrictions on vessels coming into port and following airstrikes in August 2015 that damaged and destroyed unloading cranes. Even at its current capacity, there is no viable substitute for Al Hudaydah Port- both in terms of location as it is close to a large

number of people in need and infrastructure. Any decision that slows the operations of this port, would have grave consequences for Yemen because the costs of using other ports like Aden for humanitarian imports would be too high. Also, Hudaydah Port is located in a densely populated urban center and a military campaign in its vicinity would have devastating civilian consequences.

## Health care in crisis

*An analysis shows that in terms of greatest health needs, four million people are living in 44 extremely vulnerable districts and 11.3 million in very vulnerable districts*

### Many health facilities are non-functional, 49 districts lack a qualified doctor

Even before the conflict escalated in March 2015, Yemen faced multiple challenges stemming from years of poverty and underdevelopment. Now, the country's health system is crumbling. Medicines are in chronically short supply, less than 45 per cent of all health facilities are fully functional and at least 274 facilities have been damaged or destroyed during the current conflict. Health workers have been forced to relocate due to the violence, leaving 49 districts without a single qualified doctor. Many of those who remain have not been paid consistently in around eight months.

"People are dying in Yemen, not just as a result of the fighting, but because they are cut off from the treatment they need to survive," said Nevio Zagaria, WHO representative in Yemen. "Non-communicable



Health facilities like this pediatric ward at Al Thawra hospital in Al Hudaydah are struggling to operate. Credit: Giles Clarke/OCHA

diseases – diabetes, high blood pressure, cancer – are killing more people than bullets or bombs. Many of these conditions are easily treatable under ordinary circumstances."

According to Health Cluster analysis, the main causes of avoidable deaths in Yemen are communicable diseases, maternal, newborn and nutritional conditions (together accounting for 50 per cent of mortality), and non-communicable diseases (39 per cent of mortality). Rising hunger has had a direct impact on the health situation. "Every food crisis is also a health crisis," Zagaria said, adding that malnutrition leaves people, particularly children, vulnerable to infection, and infection worsens the effects of malnutrition. Severely wasted children are 11 times more likely to die than children at a healthy weight. Not only that, the cognitive capacities and overall development of children who survive are likely to be impaired. This will affect them for the rest of their lives.

### Some assistance delivered but more resources and access needed

Since March 2015, WHO has delivered 1,200 MT of life-saving medicines and supplies, 3.7 million litres of fuel for hospital generators and ambulances, 40 million litres of safe water to health facilities and IDP camps, deployed 14 mobile primary health care teams, established 15 therapeutic feeding centres and supported the vaccination of five million children against polio. WHO is also leading a reprioritization of the response of more than 66 partners and its recent in-depth needs analysis found four million people living in 44 extremely vulnerable districts. 11.3 million living in 120 very vulnerable districts, and only 1.4 million in districts deemed stable.

In 2017, the Health Cluster requires \$322 million for response activities. More resources will also be needed to contain a recent spike in cholera cases across the country. With insecurity impeding an effective response in parts of Yemen, WHO calls on all parties to the conflict to respect the safety of health workers and facilities, and guarantee humanitarian access to all people in need.

*Non-communicable diseases are killing more people in Yemen than bullets and bombs because the health system has virtually collapsed*

#### For further information, please contact:

**George Khoury**, Head of Office, OCHA Yemen, [khoury@un.org](mailto:khoury@un.org)

**Andrew Alspach**, Deputy Head of Office, Amman Hub, [alspach@un.org](mailto:alspach@un.org)

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