

YEMEN - COMPLEX EMERGENCY

FACT SHEET #6, FISCAL YEAR (FY) 2020

APRIL 10, 2020

NUMBERS AT A GLANCE

30.5 million

Population of Yemen
UN – December 2018

24.1 million

People in Need of Humanitarian Assistance
UN – December 2018

3.6 million

IDPs in Yemen
UN – December 2018

17 million

People in Need of Food Assistance
FEWS NET – December 2019

17.8 million

People in Need of WASH Assistance
UN – December 2018

HIGHLIGHTS

- USG partially suspends aid in northern Yemen due to continued Al Houthi-imposed bureaucratic constraints on relief operations
- RoYG MoPHP reports first confirmed COVID-19 case in Yemen
- Impending economic crisis raises food security concerns
- Escalated conflict in northern Yemen displaces more than 61,200 people between January and April

HUMANITARIAN FUNDING

FOR THE YEMEN RESPONSE IN FYS 2019–2020

USAID/OFDA ¹	\$112,707,420
USAID/FFP ²	\$745,798,089
State/PRM ³	\$58,300,000
\$916,805,509	

KEY DEVELOPMENTS

- The U.S. Government (USG) continues to advocate for Al Houthi officials to remove constraints on relief operations in northern Yemen; however, Al Houthi officials had not demonstrated sufficient progress to improve the humanitarian operating environment as of March 27. As a result, USAID partially suspended humanitarian programming in Al Houthi-controlled areas of Yemen beginning on March 27. USAID will continue supporting limited life-saving activities that partners can conduct without Al Houthi interference, focused on prevention of and response to cholera and malnutrition, and the USG will continue supporting robust advocacy efforts for an improved operating environment in close coordination with other donors, international non-governmental organizations (INGOs), and UN agencies.
- The Republic of Yemen Government (RoYG) Ministry of Public Health and Population (MoPHP) announced the first laboratory confirmed case of coronavirus disease (COVID-19) in Yemen on April 10. The individual is receiving treatment and health actors are tracing and isolating any individuals who came into contact with the patient. The UN World Health Organization (WHO) and health partners are distributing emergency medical supplies and engaging in preparedness activities to build awareness and strengthen response capacity throughout the country.
- Depreciation of the Yemeni riyal (YER) and concerns regarding RoYG Central Bank of Yemen (CBY) liquidity—due to the anticipated depletion in the coming weeks of the \$2 billion Kingdom of Saudi Arabia (KSA) foreign currency reserve deposit—could significantly impact Yemen’s economy and, as a result, humanitarian conditions across the country, according to the Famine Early Warning Systems Network (FEWS NET).

¹ USAID’s Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID’s Office of Food for Peace (USAID/FFP)

³ U.S. Department of State’s Bureau of Population, Refugees, and Migration (State/PRM)

COVID-19 IMPACTS AND RESPONSE

- On April 10, the RoYG MoPHP announced the first laboratory confirmed case of COVID-19 in Yemen. The individual is receiving treatment at a local health facility in Hadramawt Governorate and specialized Rapid Response Teams are conducting contact tracing and isolating any individuals who came into contact with the COVID-19-positive patient. Governorate officials closed Hadramawt's Ash Shihr Port, where the individual worked, for one week to clean the facilities and instructed all employees at the port to self-isolate for two weeks. Authorities also imposed a curfew in some Hadramawt districts to halt the spread of the disease, according to international media. WHO is providing medical supplies, testing kits, ventilators, and training to strengthen response capacity throughout Yemen. In addition, WHO is supporting the operationalization of 37 health facilities as isolation units. WHO and health partners are also engaging in COVID-19 awareness-raising activities and urging Yemenis to practice safe hygiene and social distancing.
- Prior to the confirmed case on April 10, concern regarding the potential impact of COVID-19 in Yemen had prompted officials to implement preventive measures across the country, according to international media. In the north, Al Houthi officials closed most businesses, educational institutions, north-south border crossings, and Sana'a International Airport beginning on March 15. In southern Yemen, the RoYG suspended activities at all educational institutions and closed all airports effective March 18. The restrictions affect humanitarian staff flights and could affect movement of humanitarian cargo, relief actors report. Government authorities in Djibouti and Jordan—two transit points for UN Humanitarian Air Service (UNHAS) flights—also suspended all commercial flights as of March 17 and 18, respectively, affecting the UN's evacuation routes, the UN reports. Relief agencies evacuated some international staff from Yemen in mid-March amid the airport and border closures, and the UN shifted programming to only the most critical life-saving activities due to the reduction of non-essential staff and widespread movement restrictions. The USG continues to monitor the impact of COVID-19 restrictions on humanitarian programming and is engaging with relief partners to ensure staff and beneficiary health and safety while maintaining operations where possible.

FLOODING

- Heavy rains and resultant flooding on March 24 and 25 affected more than 4,600 households in 60 internally displaced person (IDP) sites across southern Yemen's Abyan, Aden, Ad Dali', Hadramawt, Lahij, Al Mahrah, and Ta'izz governorates, the UN reports. The rainfall and flooding injured several people; damaged or destroyed bridges, crops, houses, water infrastructure, and roads; and drowned livestock in many areas. On March 25 and 26, a joint rapid humanitarian needs assessment—conducted by the Camp Coordination and Camp Management (CCCM); Shelter and Non-Food Items (SNFI); and Water, Sanitation, and Hygiene (WASH) clusters in coordination with the RoYG Executive Unit for IDPs—identified food, drainage assistance, plastic sheeting, relief items, and tents as priority needs among flood-affected households. State/PRM partner the Office of the UN High Commissioner for Refugees (UNHCR) also reported serious protection concerns among women, children, and older persons at the affected sites.
- In response, the UNHCR-led SNFI and CCCM clusters, as well as the Food Security and Agriculture and WASH clusters, are coordinating with relief partners to provide urgent food, relief items, sanitation assistance, and shelter assistance to affected households. With USAID/OFDA and other donor support, the International Organization for Migration (IOM) is providing relief items and shelter and settlements support to flood-affected households in Aden and Ta'izz. In Lahij, a USAID/OFDA INGO partner is distributing hygiene kits at three displacement sites managed by the INGO. In addition, another INGO partner distributed shelter kits to affected households and conducted cleaning and desludging campaigns in 30 displacement sites affected by the floods in southern Yemen.

DISPLACEMENT AND INSECURITY

- Following weeks of increased negotiation efforts by the UN Special Envoy of the Secretary-General for Yemen (SESGY) Martin Griffiths, as well as UN calls for a global ceasefire in late March to help halt the spread of COVID-19, the KSA announced a two-week ceasefire in Yemen—beginning on April 9—to support COVID-19 preparedness and response efforts and enable broader peace talks, international media report. The ceasefire includes the KSA, its allies,

and the RoYG. Simultaneously, Al Houthi officials announced they had submitted a plan to the UN for the cessation of hostilities, which called for the KSA-led Coalition to lift restrictions on airports and ports in Yemen. SESGY Griffiths and UN Secretary-General António Guterres expressed support for the KSA ceasefire and called on Al Houthi and RoYG officials to engage in peace negotiations and reach a comprehensive settlement to end the conflict.

- The ceasefire announcement comes after several months of escalated violence in northern Yemen, particularly Al Jawf and Marib governorates, that has resulted in additional displacement and increased humanitarian needs. IOM estimates the fighting in the north displaced more than 61,200 people between January 21 and April 8. The UN notes the number of IDPs is likely far higher than reported, as population movement remains fluid amid a volatile environment and many IDPs remain unaccounted for as they seek shelter among host community members. The majority of IDPs—many of whom were facing secondary or tertiary displacement—fled to Marib city, increasing the IDP population in the governorate’s capital city to an estimated 750,000 IDPs as of late March, according to UNHCR. The number of IDPs in Marib now outnumbers the city’s host community population of 500,000 people, overstressing humanitarian response capacity and local capacity to provide essential services, UNHCR reports.
- UNHCR conducted a humanitarian needs assessment in Marib between March 11 and 21, identifying 26 new displacement sites hosting approximately 5,300 households. The UN agency observed minimal levels of site management and coordination of basic services, including provision of food and safe drinking water, at the sites. To address immediate household needs, UNHCR, with State/PRM and other donor support, is distributing 300 tents and relief items to more than 900 households and is coordinating with relief partners to address remaining needs.
- Additionally, IOM provided critical support to more than 39,500 IDPs between January 21 and April 8 with USAID/OFDA and other donor funding. During the period, IOM distributed nearly 5,700 Rapid Response Mechanism kits containing clothing, dignity kits, food, and hygiene items; approximately 3,000 emergency shelter kits (ESKs); more than 3,200 relief item kits; and more than 300 tents. IOM also provided multipurpose cash assistance (MPCA) to nearly 4,700 people and supported more than 3,800 newly displaced persons with emergency health care services in 20 displacement sites through four mobile medical teams and one static health care clinic.
- In addition to escalated fighting in the north, conflict continues to result in civilian casualties and impact humanitarian sites in the south. On March 13, a missile attack by unknown actors damaged Al Thawra General Hospital in Ta’izz, adversely affecting access to health care services for hundreds of thousands of people in the governorate, the UN reports. The incident represents the second reported attack on the hospital in March—a March 5 small arms fire attack injured one medical staff member and damaged a laboratory, according to NGO Médecins Sans Frontières (MSF). Al Thawra General Hospital has faced repeated attacks throughout the conflict, with MSF recording at least 40 violent attacks on the facility since 2018. Across Yemen, WHO has documented 142 attacks on hospitals and other medical facilities since the conflict started in 2015. The attacks significantly impact Yemen’s deteriorated health system, with the remaining functional health facilities often lacking equipment, medicines, and specialist staff, WHO reports.
- UN Resident and Humanitarian Coordinator (RC/HC) Lise Grande issued a statement on March 18 condemning the attacks and underscoring that health care is a basic right for all people. MSF also issued a statement, demanding conflict parties respect medical facilities and protect civilian spaces in accordance with international humanitarian law.
- On April 5, suspected Al Houthi shelling hit the women’s section of the Central Prison in Al Mudhaffar District, Ta’izz, according to international media. The UN reported at least six civilian deaths and injury to at least 11 people, noting that the number of casualties is likely higher. Relief actors are providing medical and surgical supplies, including trauma kits, to Al Thawra and Al Bureihi hospitals where the injured persons are receiving treatment. RC/HC Grande issued a statement on April 6 decrying the attack as a breach of international humanitarian principles and urging conflict parties to reach a political solution to the crisis. UN High Commissioner for Human Rights Michelle Bachelet also condemned the incident as a breach of international humanitarian law, noting the attack could amount to a war crime.

FOOD SECURITY AND NUTRITION

- Experts anticipate the \$2 billion KSA foreign currency reserve deposit—provided to the CBY in 2018 to stabilize economic conditions in Yemen—will likely be depleted within the coming weeks. Relief actors have expressed concern

that depletion of the deposit could deepen the country's economic crisis and further deteriorate humanitarian conditions, particularly acute food insecurity. FEWS NET anticipates steady depreciation of the YER, disruptions to food imports and public salary payments, and increased import costs and food and fuel prices in the coming months. Already, the continued depreciation of the YER since late 2019, as well as divergent exchange rates between northern and southern Yemen, has resulted in food price increases, with the national average price of wheat flour rising by 3.8 percent between January and February 2020, according to FEWS NET. Monthly food import levels through Yemen's Red Sea ports have also declined by an average of nearly 30,000 metric tons (MT) per month since October 2019, according to UN Verification and Inspection Mechanism for Yemen reporting.

- As Yemen is highly dependent on food imports to meet the country's food needs, FEWS NET anticipates the scale and severity of acute food insecurity will increase in the absence of further action to stabilize the economy. In particular, vulnerable households experiencing Stressed—IPC 2—or Crisis—IPC 3—food security conditions could deteriorate to worse levels of acute food insecurity.⁴ Households in conflict-affected areas with relatively low levels of humanitarian assistance, such as Hajjah and Ta'izz governorates, face the greatest risk of deteriorated food security conditions, FEWS NET reports.
- In addition to impending economic concerns, relief actors are monitoring potential desert locust infestations in Yemen during the coming months, which could impact food security conditions and livelihoods, according to the UN Food and Agriculture Organization (FAO). As of early April, FAO reported multiple desert locust swarms emerging around Yemen's southwestern coast near Lahij and Ta'izz, along the Oman–Yemen border in Hadramawt, and north of Aden. FAO also reported smaller bands of locusts along Yemen's southern seaboard near Abyan and Aden governorates and along Al Hudaydah Governorate's Red Sea coast. FAO noted that recent heavy rainfall will likely result in greater swarm formation in Hadramawt during April, while favorable breeding conditions will continue to prompt locust swarm and band formation along the Gulf of Aden and Red Sea coasts in the coming weeks. Desert locust infestations can severely damage crops, threatening the livelihoods of affected populations. FAO estimates more than 3.3 million people residing in districts experiencing Stressed—IPC 2—or worse food security conditions face a risk of desert locust outbreaks in the coming months.
- To address Yemen's urgent food and nutrition needs, USAID continues to support INGO partners and the UN World Food Program (WFP) to implement critical food, MPCA, and nutrition programming. Despite continued access constraints, WFP provided emergency food assistance to 12.4 million people across Yemen during February. The assistance included 124,000 MT of in-kind food assistance to support 9.4 million people, food vouchers for 2.6 million people, and cash-based transfers for food for approximately 429,800 people. WFP also reached nearly 262,700 children ages 6–59 months and more than 178,200 pregnant and lactating women (PLW) and girls across Yemen in February through the UN agency's targeted supplementary feeding program to treat moderate acute malnutrition (MAM). In addition, WFP supported nearly 326,700 children ages 6–23 months and 495,000 PLW through its blanket supplementary feeding program aimed at preventing MAM during the month. However, lack of approvals from Al Houthi officials has stalled many critical nutrition programs in northern Yemen during recent months. In addition, WFP reported continued access challenges at security checkpoints across several governorates during February, resulting in delays to the delivery of life-saving food assistance.
- With USAID support, an INGO continued to provide emergency food assistance in Al Mahwit and Ta'izz governorates in February. The partner distributed food vouchers—redeemable for food items at local shops and vendors—to approximately 1,300 households in Bani Sa'd District, Al Mahwit, and nearly 1,200 households in Ash Shamaytayn District, Ta'izz, during the month.
- USAID also continued to support food and nutrition programming in Al Hudaydah during February. A USAID INGO partner admitted nearly 40 children experiencing severe acute malnutrition (SAM), as well as approximately 40 children and nearly 300 PLW experiencing MAM, for treatment and reached approximately 1,300 caregivers with messages regarding infant and young child feeding (ICYF) practices in the governorate during the month. The organization also distributed nearly 50 food baskets—sufficient to meet the food needs of each household for one month—to families with children experiencing SAM.

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of acute food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

- During the month, a USAID/OFDA partner trained 65 community health volunteers who then conducted nearly 130 mother-to-mother support group sessions, disseminating ICYF messages to nearly 600 women in Al Mahwit. The partner also distributed MPCA to 200 households with children experiencing SAM to help meet their basic needs.
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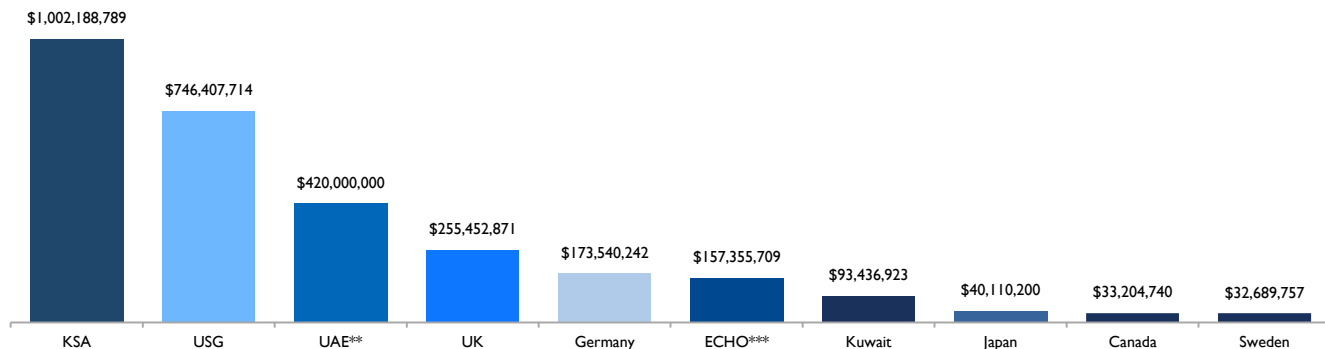
HEALTH AND WASH

- In January, a USAID/OFDA partner conducted more than 22,700 health consultations for communicable and non-communicable diseases through the organization's 19 health facilities in Ad Dali', Sana'a, and Ta'izz governorates. The partner also treated nearly 170 trauma-related injuries, assisted nearly 220 births, and treated approximately 800 children younger than five years of age for health issues through the INGO's integrated community case management program.
 - The USAID/OFDA partner also continued to address Yemen's cholera response needs with WASH support in Sana'a and Ta'izz, including through water trucking to support nearly 32,200 people at seven host community health facilities and 21 displacement sites across the two governorates in January. In addition, the partner reached nearly 12,700 people in Sana'a and Ta'izz with hygiene promotion sessions focused on acute watery diarrhea and cholera prevention.
 - In February, a USAID partner's medical teams conducted approximately 4,000 outpatient medical consultations at three health care centers in Al Hudaydah, including integrated management of childhood illness, resulting in the diagnosis and treatment of nearly 700 children younger than five years of age for communicable diseases. The organization also provided antenatal care services to more than 160 women and postnatal care services to approximately 80 women, as well as assisted with nearly 60 births.
 - Another USAID/OFDA partner distributed hygiene kits—containing detergent, shampoo, soap, and other items—to more than 800 people during February. The partner also completed rehabilitation of WASH facilities at eight health care centers in Al Mahwit and distributed water purification tablets to 800 people experiencing MAM or SAM.
 - With USAID support, a partner disseminated critical hygiene awareness messages to vulnerable populations throughout Yemen during February. The organization conducted door-to-door hygiene promotion visits to reach more than 14,100 people in Aden, more than 5,200 people in Al Mahwit, and more than 4,000 people in Sana'a. Additionally, the partner conducted community sessions for approximately 6,500 people in Aden and nearly 5,700 people in Ta'izz.
 - With USAID/OFDA support, a partner provided WASH assistance to vulnerable households in northwestern Yemen's Amran, Hajjah, and Al Mahwit governorates in March. During the month, the INGO completed rehabilitation of water infrastructure, including three water points in Hajjah to support nearly 5,700 people and 12 water points in Amran to support nearly 21,700 people. The INGO also completed latrine construction for 400 vulnerable households in Amran during the month. In addition, the partner's community hygiene promoters in Amran delivered key messages on proper handwashing practices to nearly 6,800 people through door-to-door visits and nearly 4,700 people through community awareness raising sessions. Also in Amran, the INGO distributed hygiene kits—containing soap and other items—to more than 16,400 people and water containers to more than 7,300 people, particularly for individuals residing in areas with limited market access to relief items.
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SHELTER AND SETTLEMENTS SUPPORT

- Ongoing conflict in Al Hudaydah—particularly near Durayhimi city—continues to displace populations and increase humanitarian needs, UNHCR reports. In response, UNHCR is providing critical shelter and settlements support to populations in need. Through State/PRM and other donor funding, UNHCR facilitated the distribution of more than 300 ESKs to recently displaced families in Bayt Al Faqiah city, located south of Durayhimi, on March 5. The UN agency also provided tents and plastic sheeting to nearly 90 households in other areas of the governorate to reinforce families' emergency shelters.
- UNHCR has provided 6,000 ESKs to individuals in Hajjah and Al Hudaydah to date in 2020. The ESKs support shelters that use woven palm-leaf sheets produced by 800 trained IDPs and host community members, thereby providing an income-generating opportunity for IDPs and the community.

2019 HUMANITARIAN RESPONSE PLAN FUNDING* PER DONOR



*Funding figures are as of April 10, 2020. All international figures are according to the UN Office for the Coordination of Humanitarian Affairs (OCHA)'s Financial Tracking Service; USG figures are according to the USG and reflect publicly announced USG funding for FY 2019, which spans October 1, 2018, to September 30, 2019.

**United Arab Emirates (UAE)

***European Commission's Directorate-General for Humanitarian Aid and Civil Protection (ECHO)

CONTEXT

- Between 2004 and early 2015, conflict between RoYG and Al Houthi opposition forces in the north affected more than 1 million people and repeatedly displaced populations in northern Yemen, resulting in humanitarian needs. The southward advancement of Al Houthi forces in 2014 and 2015 resulted in the renewal and escalation of conflict and displacement, further exacerbating already deteriorated humanitarian conditions.
- In March 2015, the Coalition began airstrikes against Al Houthi and allied forces to halt their southward expansion. The ongoing conflict has damaged or destroyed public infrastructure, interrupted essential services, and reduced commercial imports to a fraction of the levels required to sustain the Yemeni population; the country relies on imports for 90 percent of its grain and other food sources.
- Since March 2015, the escalated conflict—along with protracted instability, the resulting economic crisis, rising fuel and food prices, and high levels of unemployment—has left approximately 24.1 million people in need of humanitarian assistance, including 17 million people in urgent need of emergency food assistance. In addition, the conflict has displaced more than 3.6 million people; approximately 1.3 million people have returned to areas of origin, according to data collected by IOM in November 2018. The volatility of the current situation prevents relief agencies from obtaining accurate, comprehensive demographic information.
- On December 2, 2019, U.S. Ambassador Christopher P. Henzel reissued a disaster declaration for Yemen in FY 2020 due to continued humanitarian needs resulting from the complex emergency and the impact of the country's political and economic crises on vulnerable populations.

USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE PROVIDED IN FY 2019 ¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA			
Implementing Partners (IPs)	Agriculture and Food Security, Economic Recovery and Market Systems, Humanitarian Coordination and Information Management (HCIM), Health, Logistics Support and Relief Commodities, MPCA, Nutrition, Protection, Shelter and Settlements, WASH	Abyan, Aden, Amanat al-Asimah, Amran, Al Bayda', Ad Dali', Dhamar, Hadramawt, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Al Mahrah, Marib, Al Mahwit, Raymah, Sa'dah, Sana'a, Shabwah, Socotra Island, Ta'izz	\$53,272,978
IP	HCIM	Countrywide	\$837,525
IOM	HCIM	Countrywide	\$1,600,000
OCHA	HCIM	Countrywide	\$8,000,000
UNHAS	Logistics Support and Relief Commodities	Countrywide	\$4,047,000
WFP	Logistics Support and Relief Commodities	Countrywide	\$6,070,500
WHO	Health, HCIM, Nutrition	Countrywide	\$27,000,000
	Program Support		\$1,230,921
TOTAL USAID/OFDA FUNDING			\$102,058,924
USAID/FFP^{2,3}			
IPs	Cash Transfers for Food; Food Vouchers; Local, Regional, and International Procurement; Nutrition, Complementary Services	Abyan, Ad Dali', Aden, Al Hudaydah, Al Mahwit, Dhamar, Hajjah, Ibb, Lahij, Sana'a, Shabwah, Ta'izz	\$54,984,842
UN Children's Fund (UNICEF)	U.S. In-Kind Food Aid	Countrywide	\$3,867,800
FAO	Complementary Services	Countrywide	\$1,500,000
WFP	U.S. In-Kind Food Aid	Countrywide	\$442,696,148
	Local, Regional, and International Procurement	Countrywide	\$50,000,000
	Food Vouchers	Countrywide	\$41,500,000
TOTAL USAID/FFP FUNDING			\$594,548,790
STATE/PRM			
IPs	Agriculture and Food Security, Health, Logistics Support and Relief Commodities, Protection, WASH	Countrywide	\$10,100,000
UNHCR	CCCM, Logistics Support and Relief Commodities, Protection, Refugee Response and Returns Support, Shelter and Settlements	Countrywide	\$39,700,000
TOTAL STATE/PRM FUNDING			\$49,800,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2019			\$746,407,714

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 30, 2019.

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ USAID/FFP-supported complementary services—which include sector-specific activities such as agriculture, livelihoods, nutrition, and WASH interventions—enhance food assistance programs by strengthening food availability and access.

USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE PROVIDED IN FY 2020 ¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA			
IP	HCIM	Countrywide	\$520,881
UNHAS	Logistics Support and Relief Commodities	Countrywide	\$4,500,000
WFP	Logistics Support and Relief Commodities	Countrywide	\$5,500,000
	Program Support		\$127,615
TOTAL USAID/OFDA FUNDING			\$10,648,496
USAID/FFP²			
IP	HCIM	Countrywide	\$1,041,763
IP	Food Vouchers	Al Hudaydah	\$211,921
WFP	U.S. In-Kind Food Aid	Countrywide	\$149,995,615
TOTAL USAID/FFP FUNDING			\$151,249,299
STATE/PRM³			
UNHCR	CCCM, Logistics Support and Relief Commodities, Protection, Refugee Response, Shelter and Settlements	Countrywide	\$8,500,000
TOTAL STATE/PRM FUNDING			\$8,500,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2020			\$170,397,795

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of April 10, 2020.

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ This funding does not include \$500,000 in State/PRM funding for UNHCR to support COVID-19 response activities in Yemen.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>