



Yemen – Complex Emergency

FEBRUARY 18, 2022

SITUATION AT A GLANCE

30.5

Population of Yemen

UN - February 2021

20.7 MILLION

People in Need of Humanitarian Assistance

UN – December 2021

4.0

IDPs in Yemen Since March 2015

IOM – January 2021

16.2

People Projected to Experience Acute Food Insecurity

IPC^I – December 2020

2.3

Children Expected to Experience Wasting

IPC - February 202 I

- Airstrikes result in 420 civilian casualties across Yemen in January.
- Fighting in Marib and Shabwah governorates displaces 10,500 people in December and January.
- Funding shortfalls threaten to hamper response in Yemen.
- USAID/BHA partner provides health, nutrition, and protection assistance to conflict-affected populations in six governorates.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING	USAID/BHA ²	\$710,705,8 4 8
For the Yemen Response in FY 2021	State/PRM ³	\$95,200,000
For complete funding breakdown with partners, see detailed chart on page 6	Total	\$805,905,848

¹ The Integrated Food Security Phase Classification (IPC) is a multi-partner initiative that developed a standardized scale to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries and time, ranges from Minimal—IPC 1—to Famine—IPC 5—for acute food insecurity.

² USAID's Bureau for Humanitarian Assistance (USAID/BHA)

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

KEY DEVELOPMENTS

Airstrikes Result in 420 Civilian Casualties Across Yemen in January

Airstrikes resulted in 420 civilian casualties in Yemen from January I to 26, the highest monthly total recorded since the Protection Cluster-led Civilian Impact Monitoring Project (CIMP) began monitoring airstrike-related casualties in 2018. Most of these casualties occurred during a January 21 attack on a detention center in Sa'dah Governorate's Sa'dah city, which resulted in at least 91 civilian deaths and nearly 240 civilian injuries, the highest civilian casualty count from a single incident recorded by CIMP. Relief actors have reported a significant increase in the number of airstrikes across Yemen in 2022. As of late January, the UN had recorded more than 1,400 airstrikes countrywide, more than double the 2021 monthly average of approximately 600 airstrikes. Although the number of airstrike-related casualties declined significantly in early February, international observers remain concerned that airstrikes could intensify in the coming months. Relief actors continue to advocate for all parties to the conflict to protect civilians residing in conflict-affected areas, as stipulated under international humanitarian law.

Fighting in Marib and Shabwah Displaces Nearly 10,500 Individuals

Between December and January, armed clashes between Al Houthi and Republic of Yemen Government (RoYG)-aligned forces displaced nearly 10,500 people in Marib and Shabwah governorates, according to USAID/BHA partner the International Organization for Migration (IOM). In Marib, unknown armed actors launched four ballistic missiles on December 9 and 10 that landed near 12 internally displaced persons (IDP) sites, generating significant displacement; the IDP sites are located in the vicinity of contested frontline areas. Many of the newly displaced persons fled to remote areas of the governorate, where access to humanitarian services is limited. Hostilities displaced more than 8,210 people in Marib between early December and late January. Relief actors have expressed concern that an escalation in fighting in Marib could result in the displacement of approximately 4,600 households residing in 11 IDP sites in the coming weeks. Meanwhile, armed clashes in Shabwah displaced more than 2,280 people in late December and caused extensive damage to local bridges, hospitals, roads, and schools, impeding civilians from fleeing conflict-affected areas.

Residents of Marib and Shabwah have limited access to many basic necessities—including electricity, food, health care services, and safe drinking water—and ongoing insecurity has exacerbated civilian protection risks, particularly to women and children, persons with disabilities, and other members of traditionally marginalized groups. In response, the UN has allocated \$20 million from the Central Emergency Response Fund (CERF) to support displaced populations in Marib and neighboring governorates with multi-sector assistance. In addition, UN Regional Coordination Teams continue to mobilize relief commodity stocks and further funding through the Yemen Humanitarian Fund to meet the needs of conflict-affected populations in Marib and Shabwah.

Funding Shortfalls Threaten to Undermine Yemen Humanitarian Response

The UN continues to express concern that funding levels are not sufficient to meet the requirements of the humanitarian response in Yemen. As of February 18, the UN Children's Fund (UNICEF), UN Humanitarian Air Service (UNHAS), and UN World Food Program (WFP) required urgent support to maintain their current level of assistance to beneficiaries. Without additional funding, WFP warned that it may need to reduce full general food assistance rations from 5 million to 3 million beneficiaries during its February distribution cycle; another 8 million beneficiaries are at risk of losing access to emergency food assistance entirely. These shortfalls come in spite of U.S. Government (USG) support to the Office

of the UN High Commissioner for Refugees (UNHCR), WFP, and other UN agencies, and are driven by declining donor budgets and competing response priorities. In response, USAID/BHA is advocating for other donors to mobilize additional humanitarian funding to respond to the ongoing crisis in Yemen.

USG Partners Provide Multi-Sector Assistance to Vulnerable Households

Throughout December, USG partners continued to meet the needs of vulnerable populations adversely affected by the ongoing conflict in Yemen. A USAID/BHA partner supported 45 health facilities and eight mobile health teams in Abyan, Aden, Ad Dali', and Shabwah governorates in December, providing nearly 46,400 primary health care consultations. Additionally, the international non-governmental organization (INGO) partner screened nearly 7,500 children younger than five years of age for wasting—the deadliest form of malnutrition—at health facilities and mobile clinics in Abyan, Aden, Ad Dali', Amanat Al Asimah, Al Hudaydah, and Shabwah governorates during the month, referring more than 1,400 children for treatment for moderate wasting and nearly 470 children for treatment of severe wasting. The USAID/BHA partner also conducted awareness-raising sessions for more than 4,200 participants at community centers for women and girls in Abyan, Aden, and Ad Dali', covering topics such as gender-based violence (GBV) prevention and human rights.

Meanwhile, between January and mid-February, State/PRM partner UNHCR provided relief commodities to more than 16,500 people across Yemen, including approximately 6,300 refugees and asylum seekers who had received multipurpose cash assistance (MPCA) from the UN agency as of mid-February. In addition, in early February, UNHCR provided legal support and rental subsidies to more than 60 low-income refugee households that were at risk of being evicted from their homes. The UN agency and its implementing partners also distributed more than 110 fire kits—each containing a fire blanket, fire extinguisher, helmet, and jacket—to IDPs between late January and early February to reduce the risk of fire incidents in IDP settlements.

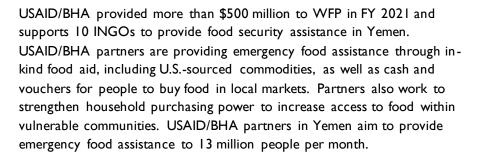
U.S. GOVERNMENT RESPONSE

KEY FIGURES

FOOD SECURITY



People supported monthly through USG emergency food assistance



\$26 Million

In dedicated USG support for life-saving health care programming

HEALTH

The USG supports IOM, UNHCR, UNICEF, the UN Population Fund (UNFPA), and I I INGOs to conduct life-saving health care interventions amid Yemen's ongoing conflict and the coronavirus disease (COVID-19) pandemic. USG partners are providing primary health care services, often in coordination with nutrition and water, sanitation, and hygiene (WASH) programming, through static health facilities and mobile medical teams serving hard-to-reach areas. USG partners also support the work of

community health volunteers, who encourage people to seek health care services when needed, thereby promoting better health outcomes. In addition, USAID/BHA partners are providing incentive payments to health care workers, as well as medical supplies and pharmaceuticals to health facilities to expand local access to quality medical services. Meanwhile, State/PRM is supporting IOM and UNHCR to address the specific health care needs of IDPs, migrants, refugees, and other vulnerable populations in Yemen.



USG partners supporting MPCA programming

MPCA

With USG support, partners are providing MPCA to help conflict-affected households in Yemen meet their basic needs while also supporting local markets. Meanwhile, State/PRM partner UNHCR is distributing MPCA to IDPs and refugees across Yemen to increase household purchasing power amid COVID-19-related economic shocks and restrictions. As of November, UNHCR had distributed approximately \$60 million in MPCA across Yemen in 2021, benefiting more than I million IDPs and 8,000 refugees in need. USAID/BHA partners are also providing MPCA to enable vulnerable households to procure cooking gas, food, hygiene items, and other essential commodities.



USG partners supporting nutrition programming

NUTRITION

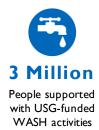
USAID/BHA supports partners to prevent and treat wasting across Yemen. Working with UNICEF, WFP, and I2 INGOs, USAID/BHA is assisting community- and evidence-based programs to decrease morbidity and mortality resulting from malnutrition. USAID/BHA programs help identify, prevent, and treat wasting, particularly among children and pregnant and lactating women. Additionally, USAID/BHA provides nutrition support for health clinics and mobile health teams, integrating health, nutrition, and WASH interventions to comprehensively assist affected populations.



USG partners supporting critical protection interventions

PROTECTION

Through support to IOM, UNFPA, UNHCR, and seven INGOs, the USG is furthering critical protection interventions across Yemen. USAID/BHA partners work to address child protection and psychosocial support (PSS) needs, prevent and respond to GBV, and respond to protection concerns and violations through specialized case management services, community mobilization activities, and protection risk mitigation efforts. With State/PRM funding, UNHCR leads the Protection Cluster and provides protection services to meet the needs of IDPs, refugees, and other vulnerable populations countrywide, including through PSS activities and legal assistance to facilitate access to identity documentation and public assistance. Moreover, the USG requires all partners to incorporate protection principles into USG-supported interventions in Yemen and promote meaningful access, dignity, and safety for beneficiaries.



WASH

The USG supports IOM, UNHCR, UNICEF, and I5 INGOs to expand local access to safe drinking water and prevent and respond to communicable disease outbreaks. USAID/BHA partners conduct critical WASH interventions—including distributing hygiene kits, promoting hygiene activities, providing water trucking services, and rehabilitating water systems damaged by conflict—for IDPs and other vulnerable populations. In addition, State/PRM partners provide WASH interventions to meet the needs of conflict-affected populations, as well as migrants and refugees in Yemen originating from the Horn of Africa.

CONTEXT IN BRIEF

- Between mid-2004 and early 2015, conflict between the RoYG and Al Houthi opposition forces in northern Yemen affected more than I million people, generating widespread and repeated displacement and exacerbating humanitarian needs. The southward advance of Al Houthi forces in 2014 and 2015 expanded the scope of the armed conflict, further aggravating the humanitarian crisis.
- In March 2015, a Kingdom of Saudi Arabia-led coalition began conducting airstrikes against Al Houthi and allied forces to halt Al Houthi southward expansion. Ongoing conflict since 2015 has damaged and destroyed public infrastructure, interrupted essential services, and reduced commercial imports to a fraction of the levels required to sustain the Yemeni population, as Yemen typically imports much of its food supply.
- Since March 2015, the conflict—along with an economic crisis, high levels of unemployment, protracted instability, and rising food and fuel prices—has left approximately 20.7 million people in need of humanitarian assistance, including approximately 12.1 million people in acute need. In addition, the conflict has displaced more than 4 million people, an estimated 1.3 million of whom have since returned to their areas of origin, according to a November 2018 IOM assessment. The volatility of the current situation has impeded relief agencies from obtaining accurate, comprehensive demographic data on conflict-affected populations.
- On November 3, 2021, U.S. Chargé d'Affaires Catherine Westley redeclared a disaster for Yemen for FY 2022 due to continued humanitarian needs resulting from the complex emergency and the impact of the country's economic and political crises on vulnerable populations.

USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2021 1,2

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT	
USAID/BHA				
Implementing Partners	Agriculture; Economic Recovery and Market Systems (ERMS); Food Assistance; Health; Humanitarian Coordination, Information Management, and Assessments (HCIMA); Logistics Support; MPCA; Nutrition; Protection; Shelter and Settlements; WASH	Countrywide	\$119,603,433	
IOM	HCIMA, Health, MPCA, Protection, Shelter and Settlements, WASH	Aden, Ibb, Lahij, Marib, Shabwah, Ta'izz	\$18,000,000	
UN Food and Agriculture Organization (FAO)	HCIMA	Countrywide	\$1,000,000	
UNFPA	Health, Protection	Aden, Amanat Al Asimah, Al Hudaydah, Marib, Shabwah, Ta'izz	\$5,000,000	
UNICEF	1,390 metric tons (MT) of U.S. In-Kind Nutrition Aid	Abyan, Aden, Ad Dali', Hadramawt, Al Hudaydah, Lahij, Al Mahrah, Marib, Shabwah, Socotra, Ta'izz	\$4,890,730	
UN Office for the Coordination of Humanitarian Affairs (OCHA)	HCIMA	Countrywide	\$8,801,104	
NA/FD	Food Assistance–586,780 MT of U.S. In-Kind Food Aid	Countrywide	\$484,395,840	
WFP	Food Assistance—Nutrition and Logistics Support; Vouchers	Countrywide	\$68,543,045	
	Program Support		\$471,696	
TOTAL USAID/BHA FUNDII	NG		\$710,705,848	
	STATE/PRM			
Implementing Partner	Health, Protection	Countrywide	\$39,600,000	
UNHCR	ERMS, HCIMA, Health, Logistics Support, MPCA, Protection, Shelter and Settlements, WASH	Countrywide	\$55,600,000	
TOTAL STATE/PRM FUNDI	NG		\$95,200,000	
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2021 \$805,905,8				

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publidy announced funding as of September 22, 2021. ² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

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 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:

- o USAID Center for International Disaster Information: cidi.org
- o Information on relief activities of the humanitarian community can be found at reliefweb.int.

 $USAID/BHA\ bulletins\ appear\ on\ the\ USAID\ website\ at\ \textbf{usaid.gov/humanitarian-assistance/where-we-work}$