

YEMEN - COMPLEX EMERGENCY

FACT SHEET #9, FISCAL YEAR (FY) 2020

JULY 10, 2020

NUMBERS AT A GLANCE

30.5 million

 Population of Yemen
 UN – June 2020

24.3 million

 People in Need of Humanitarian Assistance
 UN – June 2020

3.6 million

 IDPs in Yemen
 UN – December 2018

17 million

 People in Urgent Need of Food Assistance
 Famine Early Warning Systems Network – June 2020

20.5 million

 People in Need of WASH Assistance
 UN – June 2020

HIGHLIGHTS

- Food prices in southern Yemen reach highest levels since October 2018, exacerbating food insecurity
- COVID-19 impacts displace an estimated 3,900 people in June amid rising disease case numbers
- Continued conflict results in more than 800 civilian casualties from January to mid-June

HUMANITARIAN FUNDING

FOR THE YEMEN RESPONSE IN FYs 2019–2020

| | |
|------------------------------------|-----------------|
| USAID/BHA ^{1,2} | \$1,074,017,091 |
| State/PRM ³ | \$60,810,000 |
| \$1,134,827,091⁴ | |

KEY DEVELOPMENTS

- Macroeconomic factors, including the depreciation of the Yemeni riyal (YER) and economic shocks related to the coronavirus disease (COVID-19) pandemic, have contributed to a 15 percent increase in food prices in Yemen since January, the UN World Food Program (WFP) reports. In southern Yemen in particular, food prices were 5 percent higher in late June than prices recorded during the October 2018 economic crisis. In response, USAID/BHA continues to support WFP and international non-governmental organization (INGO) partners to bolster food security in Yemen.
- Confirmed COVID-19 cases continue to increase in Yemen, straining limited health care system capacity amid continued conflict and deteriorating macroeconomic conditions, according to the UN World Health Organization (WHO). Relief actors report that a variety of factors—including misinformation and lack of transparency—continue to result in underreporting of cases. In addition, COVID-19-related health and socioeconomic effects displaced an estimated 3,900 people in Aden and Lahij governorates in June, the International Organization for Migration (IOM) reports.
- On June 15, two airstrikes hit a vehicle traveling along a major road in Sa'dah Governorate, which the UN reports resulted in at least 12 civilian deaths, underscoring the continued protection risks civilians face due to the conflict. In response, UN Resident and Humanitarian Coordinator (RC/HC) Lise Grande issued a statement urging parties to the conflict to halt hostilities, noting that violence in Yemen had resulted in more than 800 civilian casualties from January to mid-June.

¹ USAID's Bureau for Humanitarian Assistance (USAID/BHA)

² Total USAID/BHA funding includes non-food humanitarian assistance from the former Office of U.S. Foreign Disaster Assistance (USAID/OFDA) and emergency food assistance from the former Office of Food for Peace (USAID/FFP).

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

⁴ This total includes approximately \$2.5 million in funding through State/PRM for COVID-19 preparedness and response activities under the Supplemental Funding to Prevent, Prepare for, and Respond to COVID-19 Abroad.

COVID-19 IMPACTS AND RESPONSE

- Relief agencies continue to express concern regarding the growing number of COVID-19 cases in Yemen and questions surrounding the accuracy and transparency of health reporting. As of July 10, health officials had recorded more than 1,320 confirmed COVID-19 cases and 352 associated deaths, according to WHO; however, the UN noted the actual number of COVID-19 cases is likely higher due to underreporting and limited health-seeking behavior, among other factors. Anecdotal evidence from health actors, gravediggers, and local social media activity indicates a significant increase in burials in Sana'a city, with the largest cemetery in the city recently closed due to lack of space for additional burials, international media report. In addition, the increasing number of COVID-19 cases, as well as the socioeconomic effects of the pandemic, displaced an estimated 3,900 people in Aden and Lahij governorates during June, according to IOM. Households relocated from Aden and Lahij to alternative locations within Abyan and Lahij governorates due to fear of rising COVID-19 transmission, as well as overcrowding and strained public services—including limited water availability. U.S. Government (USG) partner IOM continues to provide water, sanitation, and hygiene (WASH) support to bolster hygiene conditions and reduce the risk of disease transmission for internally displaced persons (IDPs) in Yemen.
- Relief actors report that a multitude of factors are limiting health-seeking behavior in Yemen, including misinformation and lack of transparency about the outbreak that have caused widespread fear in Yemen. Some individuals reportedly fear that visiting a health facility could expose them to COVID-19 infection or result in detention or forced quarantine; thus, most people wait to visit a health facility until symptoms have worsened or become critical, making effective treatment more challenging. In response, the USG is supporting relief partners to disseminate awareness messages focused on COVID-19 prevention and treatment to combat misinformation and fears about the disease and promote effective mitigation measures.
- Sharp price increases, international supply chain challenges, and movement and transportation restrictions on relief cargo are hindering the procurement and delivery of personal protective equipment (PPE) and other medical supplies to treat and combat the spread of COVID-19 in Yemen, according to Save the Children (SCF). SCF reported that the price of disposable facemasks in Yemen increased by approximately 3,200 percent in recent months, while oxygen supply prices have also significantly increased. The INGO underscored serious concerns about the inability of Yemenis and relief agencies to stop the spread of COVID-19 without access to basic protective equipment, noting that many health workers have stopped reporting to work due to lack of PPE. As a result, SCF and other humanitarian actors are advocating for authorities to accelerate customs clearances for PPE and other medical supplies.
- To bolster COVID-19 response efforts, the International Committee of the Red Cross (ICRC) recently distributed PPE items to more than 500 health care workers in Al Bayda', Al Mahwit, Marib, and Sana's governorates. ICRC also conducted COVID-19 awareness sessions in more than 50 detention centers and provided hygiene items to approximately 4,000 people in quarantine facilities across Yemen to decrease the risk of disease transmission.
- Additionally, with USG and other donor funding, health actors continue to support COVID-19 mitigation and response efforts in Yemen. USG partner IOM is providing multi-sector assistance, including COVID-19 prevention and response activities, to IDPs and migrants across Yemen. Moreover, a USAID/BHA partner distributed PPE and COVID-19 screening supplies to health facilities in Al Mahwit during May, which are supported through an approved carve-out for cholera and malnutrition treatment during the partial suspension of USAID INGO programming in northern Yemen. The partner also reached nearly 230 people through outpatient health consultations for communicable and non-communicable diseases, as well as trauma injuries, in Shabwah Governorate during the month. In addition, a second USAID/BHA INGO partner provided humanitarian coordination and information management (HCIM) support to relief actors in early May to bolster countrywide COVID-19 response efforts. In coordination with the Health and WASH clusters, the partner produced several data and information products—including a report mapping operational isolation units, points of entry, and quarantine centers—to enhance humanitarian actors' operational decision-making capabilities.⁵

⁵ The coordinating bodies for health and WASH activities, comprising UN agencies, non-governmental organizations, and other stakeholders

DISPLACEMENT, INSECURITY, AND PROTECTION

- Conflict incidents continue to result in civilian casualties and displacement in Yemen, exacerbating the humanitarian crisis. On June 15, two airstrikes hit a car traveling along a major road in Sa'dah's Shada'a District, resulting in the deaths of at least 12 civilians, according to the UN. Following the incident, RC/HC Grande issued a statement urging parties to the conflict to halt clashes, highlighting that fighting had resulted in more than 800 civilian casualties from January to mid-June. Eight INGOs working in Yemen also condemned the attack, calling for an investigation and noting that the responsible parties must be held accountable if the strike violated international humanitarian law. The INGOs reported that numerous airstrikes also occurred in Sana'a city on June 15, the same day the Kingdom of Saudi Arabia (KSA) unilateral ceasefire—announced in April and extended in May—ended; the INGOs noted that violence by all parties to the conflict continued even during the ceasefire, with reports of airstrikes and shelling in April and May.
- Countrywide, the use of explosive weapons in populated areas continues to result in civilian casualties, as well as damage and destroy vital civilian infrastructure, according to a May report by INGO Humanity and Inclusion. Civilians represented more than 90 percent of the casualties resulting from reported explosive weapons incidents—including utilization of aircraft bombs and missiles, artillery, improvised explosive devices, and mortars, as well as cluster munitions and landmines prohibited by international law—in populated areas between 2015 and 2018, the INGO reports. In addition, damage by explosive weapons to civilian infrastructure, such as hospitals and roads, has decreased civilian access to essential services and hampered relief activities. Since 2015, WHO has reported more than 140 attacks on health facilities in Yemen. In addition, road damage resulting from explosive weapons incidents has hindered the transport of essential medical supplies and other relief commodities throughout the country, more than doubling transportation time on some major supply routes. In response, protection actors are urging all humanitarian organizations to advocate that parties to the conflict cease the use of explosive weapons in Yemen and increase analysis and reporting of the immediate and long-term effects of explosive weapons incidents. Additionally, protection actors are calling for increased access for specialized monitoring mechanisms to areas affected by explosive weapons incidents.
- During 2019, conflict resulted in more than 1,400 child casualties—including 395 deaths—in Yemen, a decrease of approximately 14 percent compared with the nearly 1,700 child casualties recorded in 2018, according to a recently released UN report. The report also highlights child protection risks engendered by the conflict, including forced recruitment of children by armed groups and attacks on civilian infrastructure supporting services for children. During 2019, nearly 690 children were forcibly recruited into armed services. In addition, the report notes 20 attacks on schools and 15 attacks on hospitals in 2019, the majority in Ad Dali' and Ta'izz governorates, heightening protection risks and disrupting access to essential services for children.
- Migrants also continue to face increased protection risks—including arbitrary arrest, detention, and relocation—and decreased access to basic services amid increased anti-migrant sentiment in Yemen due to concerns related to the COVID-19 pandemic, according to IOM. Since April, Al Houthi officials have reportedly arrested and relocated at least 1,500 migrants from northern to southern governorates. In Aden city, approximately 4,000 migrants remained stranded as of late June, with minimal access to basic services and livelihood opportunities due to COVID-19-related movement restrictions and forced relocations, exacerbating vulnerabilities for a population already facing significant abuse and exploitation, IOM reports. These incidents follow other reports of Al Houthi and RoYG migrant detentions and forced relocations—as well as migrant quarantine requirements in sites lacking adequate health protocols—in recent months. With State/PRM and other donor funding, IOM is meeting migrants' basic needs and responding to COVID-19, including through the provision of disease information, essential health services, and specialized service referrals to vulnerable populations.
- To date in 2020, the Protection Cluster—led by State/PRM partner the Office of the UN Higher Commissioner for Refugees (UNHCR)—has assessed more than 70,000 households to determine appropriate response modalities to meet heightened protection needs as a result of COVID-19. The Cluster recorded an increase in psychosocial and socioeconomic needs resulting from the pandemic, including significant mental health concerns among vulnerable populations. In response, UNHCR and cluster partners continue to conduct protection activities—including mental health and psychosocial support, as well as the provision of civil documentation and legal counseling and representation—adapted for COVID-19 protocols. Furthermore, Protection Cluster partners provided more than 30,000 households with cash assistance to meet urgent needs from January to June.

- Amid COVID-19 adjustments and restrictions, USAID/BHA partners continue to provide critical protection services to respond to heightened needs in Yemen. During May, one USAID/BHA partner provided protection assistance to vulnerable populations through its women's community center in Al Hudaydah Governorate. The partner supported nearly 30 women with psychosocial support services during the month after reducing the center's capacity and shifting to an appointment-based system to mitigate the spread of COVID-19. The INGO also provides case management and legal services to women at the center, including on topics such as marital rights and access to public services. In addition, the partner is conducting COVID-19 awareness training for staff, distributing COVID-19 informational materials, and providing hand washing facilities at its center to curb the spread of the disease.

FOOD SECURITY AND LIVELIHOODS

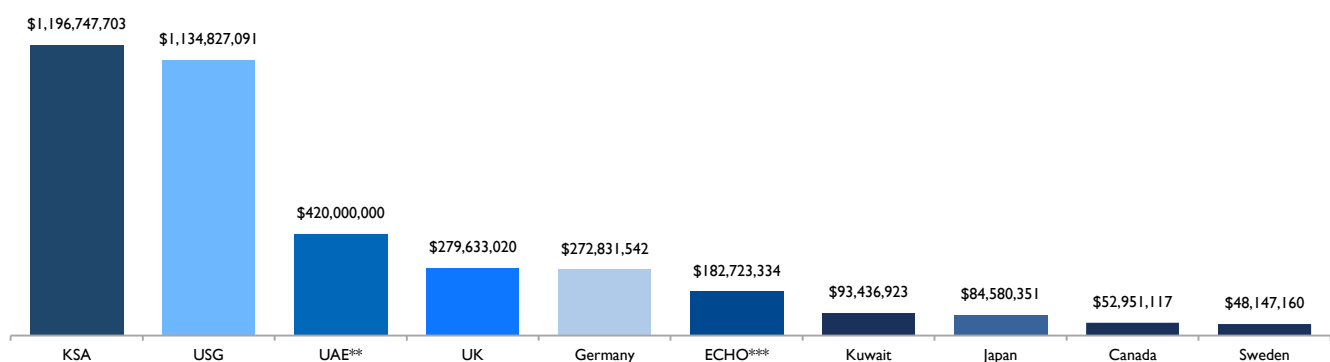
- As of mid-June, food prices in southern Yemen had reached their highest levels since October 2018 when the country faced a major currency crisis, threatening to further exacerbate food insecurity, WFP reports. Driven by price increases primarily in the south, the average countrywide price for the minimum food basket (MFB)—the minimum amount of food necessary to meet the monthly needs of one person—increased by approximately 15 percent to 5,600 YER from January to June, due in part to the YER's continued depreciation as of a result of depleted foreign currency reserves in the Central Bank of Yemen (CBY). In southern Yemen, the average MFB price rose to more than 5,800 YER in mid-June, a figure 5 percent higher than the peak average MFB price recorded countrywide during the October 2018 economic crisis. Moreover, a nearly 7 percent increase in the price of wheat flour—the most important food commodity in Yemen for food security given high dependence among the population—accounted for half the increase in MFB price from mid-May to mid-June, according to WFP. Increasing food prices have negatively impacted households' purchasing power and capacity to meet their basic food needs, exacerbating food insecurity, particularly throughout southern Yemen. In response, USAID/BHA continues to support WFP and INGO partner emergency food assistance operations to mitigate worsening food insecurity.
- In early June, the Assessment Capacities Project (ACAPS) released a report highlighting the anticipated negative impacts of the impending depletion of the \$2 billion Saudi foreign currency reserve deposit on Yemen's economy, which the KSA provided to the RoYG CBY in March 2018 to stabilize economic conditions in the country. Since then, the KSA has provided additional ad hoc support, including a fuel subsidy of \$180 million to support three fuel shipments between October 2018 and January 2019, as well as \$200 million in November 2018 to support ad hoc interventions by the RoYG to help restore the value of the YER after the October 2018 economic collapse. ACAPS notes that without further support, the lack of foreign currency will likely result in further YER depreciation and increases in the price of food, fuel, and other basic commodities, adversely impacting the Yemeni economy and increasing reliance on humanitarian assistance among the population. Moreover, the report notes that quarantine restrictions have resulted in import and transportation delays, resulting in further price increases for key commodities.
- USAID/BHA partners are providing emergency food and livelihood assistance to respond to worsening food security and socioeconomic conditions in Yemen. During May, one INGO partner distributed food baskets—sufficient to meet the monthly food needs of one household—to approximately 790 households in Aden and 770 households in Ad Dali' to bolster food security. In addition, the INGO supported cash-for-work programs in Lahij, providing \$240 per month to nearly 140 people to work on irrigation system improvement projects across five villages.

HEALTH, NUTRITION, AND WASH

- Heavy seasonal rains and subsequent flooding in early June resulted in at least 16 deaths, displaced at least 130 people, damaged houses, and prompted concerns regarding heightened risks of waterborne diseases—including cholera—in southern Yemen's Hadramawt and Shabwah governorates, international media report. The recent flooding comes after several months of heavy rains and related damages across Yemen, with floods affecting nearly 150,000 people in April, the UN reports. Since the rainy season began in April, health actors have recorded nearly 44,500 suspected cholera cases and 15 related deaths across Yemen, according to WHO.

- During mid-June, Yemeni vendors reported a 150 percent increase in the price of water trucking services—which provide safe drinking water to vulnerable populations—across 14 Yemeni governorates as a result of price inflation, increased transportation prices, and other economic trends, according to the Yemen Joint Market Monitoring Initiative. In addition, vendors reported volatile fuel price fluctuations and increased challenges obtaining goods—particularly fuel supplies such as cooking gas, diesel, and petrol—during the period. Relief actors continue to monitor the availability and price of fuel, as past fuel price spikes and supply shortages have disrupted critical health care services, interrupted delivery of relief commodities, and limited access to safe drinking water, exacerbating humanitarian conditions.
- USAID/BHA partners are providing life-saving health, nutrition, and WASH support for vulnerable communities in Yemen. With USAID/BHA support, one INGO partner conducted nearly 12,400 health consultations through 24 static health facilities across Ad Dali', Sana'a, and Ta'izz in May, including support for more than 140 trauma-related injuries, nearly 3,300 communicable diseases, and nearly 1,000 non-communicable diseases. In addition, the organization continued to provide nutrition assistance across the governorates, screening more than 5,200 children ages 6–59 months and more than 2,000 pregnant and lactating women (PLW) for acute malnutrition. Of those screened, the INGO identified and admitted for treatment nearly 50 children ages 6–59 months experiencing severe acute malnutrition, as well as nearly 200 children and nearly 400 PLW experiencing moderate acute malnutrition. To address vulnerable populations' WASH needs, the partner also distributed 229,000 liters of safe drinking water through water trucking services to 13 health facilities in Sana'a and Ta'izz during the month, supporting more than 9,800 people. The INGO also reached nearly 1,100 people in Ad Dali' through hygiene promotion activities focused on prevention of acute watery diarrhea, cholera, and COVID-19.
- In addition, a second INGO partner commenced primary health care and nutrition services and continued to adapt existing programming to mitigate the spread of COVID-19 in May. During the month, the INGO launched a mobile health team in Al Hudaydah to provide primary health care services to vulnerable populations. The partner also continued rehabilitation of a health facility in Ta'izz, including installation of hand washing facilities, latrine repair, and water storage system cleaning. Additionally, the INGO began conducting nutrition screenings through its community health volunteers in Ta'izz during May, proceeding without the traditional mid-upper arm circumference approach to mitigate the spread of COVID-19 through physical touch.

2019-2020 HUMANITARIAN RESPONSE PLAN FUNDING* PER DONOR



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

**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 24.3 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 IN FY 2020 ^{1,2}

| IMPLEMENTING PARTNER | ACTIVITY | LOCATION | AMOUNT |
|--|---|-------------|----------------------|
| FUNDING IN YEMEN FOR COMPLEX EMERGENCY | | | |
| USAID/BHA | | | |
| Non-Food Assistance | | | |
| IP | HCIM | Countrywide | \$520,881 |
| UN Humanitarian Air Service (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 NON-FOOD ASSISTANCE FUNDING | | | \$10,648,496 |
| Food Assistance | | | |
| IP | HCIM | Countrywide | \$1,041,763 |
| IP | Food Vouchers | Al Hudaydah | \$211,921 |
| WFP | U.S. In-Kind Food Aid | Countrywide | \$374,990,394 |
| TOTAL FOOD ASSISTANCE FUNDING | | | \$376,244,078 |
| TOTAL USAID/BHA FUNDING | | | \$386,892,574 |
| STATE/PRM | | | |
| UNHCR | Camp Coordination and Camp Management (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 FUNDING FOR COMPLEX EMERGENCY IN YEMEN IN FY 2020 | | | \$395,392,574 |

FUNDING IN YEMEN FOR COVID-19 OUTBREAK PREPAREDNESS & RESPONSE³

| STATE/PRM | | | |
|--|---|-------------|--------------------|
| IP | Emergency Relief, Health, WASH | Countrywide | \$1,230,000 |
| IOM | Emergency Relief, Health, Migrant Response | Countrywide | \$780,000 |
| UNHCR | Logistics Support and Relief Commodities, Multipurpose Cash Assistance, Protection, Refugee Response, Shelter and Settlements | Countrywide | \$500,000 |
| TOTAL STATE/PRM FUNDING | | | \$2,510,000 |
| TOTAL USG FUNDING FOR COVID-19 OUTBREAK PREPAREDNESS & RESPONSE IN YEMEN IN FY 2020 | | | \$2,510,000 |

| | |
|---|----------------------|
| TOTAL USAID/BHA FUNDING FOR THE YEMEN RESPONSE IN FY 2020 | \$386,892,574 |
| TOTAL State/PRM FUNDING FOR THE YEMEN RESPONSE IN FY 2020 | \$11,010,000 |
| TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2020 | \$397,902,574 |

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of May 8, 2020.

² On March 27, 2020, USAID partially suspended approximately \$50 million in humanitarian NGO programming in Al Houthi-controlled areas due to continued Al Houthi-imposed bureaucratic impediments. USAID continues to fund more than \$13 million in humanitarian NGO activities in northern Yemen for programs that can be conducted without Al Houthi interference and that most directly mitigate the risk of famine and deliver imminently life-saving services, including treatment of acute malnutrition and cholera.

³ Figures represent Migration and Refugee Assistance (MRA) funding committed for the COVID-19 response under the Supplemental Funding to Prevent, Prepare for, and Respond to COVID-19 Abroad as of May 8, 2020.

USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2019^{1,2}

| IMPLEMENTING PARTNER | ACTIVITY | LOCATION | AMOUNT |
|--|--|--|----------------------|
| USAID/BHA | | | |
| Non-Food Assistance | | | |
| Implementing Partners (IPs) | Agriculture and Food Security, Economic Recovery and Market Systems, HCIM, Health, Nutrition, Protection, 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, 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 NON-FOOD ASSISTANCE FUNDING | | | \$102,058,924 |
| Food Assistance^{3,4} | | | |
| UN Food and Agriculture Organization (FAO) | Complementary Services | Countrywide | \$1,500,000 |

| | | | |
|---|---|--|----------------------|
| Implementing Partners | Food Vouchers, Cash Transfers for Food, Nutrition, Local, Regional, and International Procurement, 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 |
| WFP | U.S. In-Kind Food Aid | Countrywide | \$433,212,951 |
| | Local, Regional, and International Food Procurement | Countrywide | \$50,000,000 |
| | Food Vouchers | Countrywide | \$41,500,000 |
| TOTAL FOOD ASSISTANCE FUNDING | | | \$585,065,593 |
| TOTAL USAID/BHA FUNDING | | | \$687,124,517 |
| STATE/PRM | | | |
| Implementing Partners | Humanitarian Assistance | Countrywide | \$10,100,000 |
| UNHCR | CCCM, Logistics Support and Relief Commodities, Protection, Refugee Response, 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 | | | \$736,924,517 |

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 On March 27, 2020, USAID partially suspended approximately \$50 million in humanitarian NGO programming in Al Houthi-controlled areas due to continued Al Houthi-imposed bureaucratic impediments. USAID continues to fund more than \$13 million in humanitarian NGO activities in northern Yemen for programs that can be conducted without Al Houthi interference and that most directly mitigate the risk of famine and deliver imminently life-saving services, including treatment of acute malnutrition and cholera.

³ Estimated value of food assistance and transportation costs at time of procurement; subject to change.

⁴ USAID/BHA-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.

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>