

Yemen – Complex Emergency

AUGUST 30, 2024

SITUATION AT A GLANCE



- FEWS NET projects that Crisis or worse levels of acute food insecurity will persist countrywide through January 2025, with approximately 18 million people requiring humanitarian food assistance between August and September.
- All 117 districts analyzed in RoYG-controlled areas are projected to experience Serious or more severe levels of acute malnutrition between July and October, IPC reports.
- Heavy rains, strong winds, and associated flooding during Yemen’s two annual rainy seasons have affected nearly 268,000 people since March, according to the UN.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING For the Yemen Response in FY 2024	USAID/BHA ¹	\$199,893,358
	State/PRM ²	\$19,846,000
Total		\$219,739,358

For complete funding breakdown with partners, see detailed chart on page 6

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

² U.S. Department of State’s Bureau of Population, Refugees, and Migration (State/PRM)

KEY DEVELOPMENTS

FEWS NET Projects Crisis Levels of Acute Food Insecurity Across Yemen

The Famine Early Warning Systems Network (FEWS NET) projects that Crisis—IPC 3—or worse levels of acute food insecurity will persist countrywide through January 2025, with an estimated peak of approximately 18 to 19 million people requiring humanitarian food assistance between August and September, according to an August analysis.³ FEWS NET further projects severely affected households in Al Jawf are likely to face Catastrophe—IPC 5—levels of acute food insecurity during the period. Although the September-to-November cereal harvest will temporarily increase access to food and income from October 2024 to January 2025, FEWS NET projects that it is likely insufficient to satisfy food consumption gaps in Al Houthi-controlled northern Yemen. Limited income-earning opportunities and household purchasing capacity amid paused humanitarian food assistance in some areas, including the UN World Food Program’s (WFP) general food assistance (GFA) pause in Al Houthi-controlled areas since December 2023, have compounded food insecurity, FEWS NET reports. Northern Yemen’s Amran, Hajjah, Al Hudaydah, Al Jawf, Al Mahwit, Sa’dah, and Ta’izz governorates—where WFP previously provided GFA—are expected to continue facing Emergency—IPC 4—levels of acute food insecurity through January 2025. In Republic of Yemen Government (RoYG)-controlled areas, local currency depreciation has increased basic food commodity prices hindering millions from affording basic needs. FEWS NET further projects Crisis—IPC 3—or worse levels of food insecurity to persist at the governorate level in RoYG-controlled areas through September.

Humanitarian assistance remains essential to address food insecurity in Yemen as vulnerable populations rely solely on assistance as their primary livelihood and food source, according to a joint August report conducted by the UN Food and Agriculture Organization (FAO) and the RoYG. Notably, the continued WFP pause in Al Houthi-controlled areas has increased food consumption gaps among households, according to FAO. Amid Al Houthi-imposed barriers impeding humanitarian access and the WFP GFA pause, the USG and its partners continue to deliver life-saving assistance to affected populations across Yemen.

Acute Malnutrition Rates Deteriorate Across RoYG-Controlled Areas

The August IPC AMN analysis projects increasing acute malnutrition rates across the majority of RoYG-controlled areas during the July-to-September lean season.⁴ The report projects approximately 610,000 children ages 6–59 months will experience acute malnutrition by October 2024, including nearly 119,000 children predicted to experience severe acute malnutrition (SAM), which represents a more than 30 percent increase compared to 2023 SAM levels. In addition, nearly 223,000 pregnant and lactating women (PLW) will likely require treatment for acute malnutrition by October. IPC attributes the worsening of acute malnutrition to a combination of acute issues, including continued disease outbreaks, such as cholera and measles; the deteriorating economic situation resulting in high food prices and inflation; high levels of acute food insecurity; increased insecurity along the west coast of Yemen; insufficient provision of humanitarian assistance; and reduced access to safe drinking water.

Notably, all 117 districts analyzed in the report are projected to experience Serious—IPC AMN 3—or

³ 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 security. The IPC scale, which is comparable across countries and time, ranges from Minimal—IPC 1—to Famine—IPC 5—for acute food insecurity. FEWS NET analysis is IPC compatible but does not necessarily reflect the consensus of national food security partners.

⁴ The IPC is a multi-partner initiative that developed a standardized scale to classify the severity of acute malnutrition. The IPC Acute Malnutrition (IPC AMN) scale, which is comparable across select countries and time, ranges from Acceptable—IPC AMN 1—to Extremely Critical—IPC AMN 5—for acute malnutrition. IPC AMN Phases are malnutrition focused and distinct from IPC Phases for food insecurity

more severe levels of acute malnutrition between July and October, including four districts—in Al Hudaydah Governorate’s Hays and Al Khukhah and Ta’izz Governorate’s Al Makha and Mawza’—which are projected to face Extremely Critical—IPC AMN 5—levels of acute malnutrition. These levels of acute malnutrition indicate a global acute malnutrition (GAM) prevalence greater than 30 percent—which combines moderate and acute malnutrition prevalence—and are likely to contribute to increased morbidity and potential mortality among children younger than five years of age. Seventeen of the assessed districts, nearly 15 percent of the assessed districts, projected to face Critical—IPC AMN 4—acute malnutrition conditions, indicated by a GAM prevalence of 15 to 30 percent, will experience conditions that will border Extremely Critical conditions. USAID/BHA continues to support 16 of partners to provide nutrition assistance across the country. For instance, USAID/BHA partner WFP treated more than 629,000 PLW and children for moderate acute malnutrition countrywide in July.

Localized Flooding Affects Nearly 268,000 People; Relief Actors Respond

Heavy rains, strong winds, and associated flooding during Yemen’s two annual rainy seasons—spanning April to May and July to September—have affected nearly 268,000 people since March, according to the UN. Hajjah, Al Hudaydah, Sa’dah, and Ta’izz governorates remain the worse affected, as flood-affected communities require food, multi-purpose cash assistance (MPCA), and water, sanitation, and hygiene (WASH) assistance, as well as emergency relief items, such as clothing and medical supplies, according to the UN Population Fund (UNFPA). The RoYG National Center of Meteorology and Early Warning issued a weather bulletin on August 18, warning of additional severe rains and winds, as well as the potential for rockslides, all of which can trigger the collapse of traditional Yemeni mud houses common in several areas of Yemen. Notably, recent flooding in August caused mudslides and flash-flooding across Al Houthi-controlled Mahwit Governorate’s Melhan District, resulting in the deaths of 33 people, damaging at least 200 houses, and collapsing three dams, according to international media. The RoYG National Center of Meteorology and Early Warning projects continued above average rainfall through September, with more severe rainfall predicted in the Western Highlands, including areas of Ibb, Lahij, and Ta’izz governorates, likely exacerbating already poor conditions. Relief actors, including USAID/BHA partners, continue to experience challenges accessing flood-affected communities due to damaged roads and safety concerns due to the flood-induced unearthing and movement of unexploded ordinances and landmines; however, preliminary reports and available needs assessments indicate widespread damage and assistance requirements in multiple governorates throughout Yemen. USAID/BHA continues to work with partners to conduct localized assessments to verify the number of individuals in need of humanitarian assistance to inform responses.

USAID/BHA partners continue to respond to flood-affected households across Yemen. With USAID/BHA and other donor support, the Yemen Rapid Response Mechanism—which provides populations with immediate assistance within 72 hours of their displacement—distributed emergency assistance to nearly 80,200 individuals as of August 14. Relief actors also continue to scale up acute watery diarrhea and cholera interventions to prevent the spread of waterborne disease—the prevalence of which increases amid flood conditions and a lack of WASH systems—across Hajjah, Al Hudaydah, Al Mahwit, Marib, Raymah, and Ta’izz governorates. In addition, the Shelter Cluster distributed emergency relief item kits, emergency shelter kits, shelter repair kits, and plastic sheeting to more than 77,000 individuals since July.⁵ With State/PRM and other donor support, the UN High Commissioner for Refugees (UNHCR) and its partners distributed more than 2,000 non-food items sufficient to support 72,800 flood-affected individuals across Hajjah, Al Hudaydah, and Al Mahwit.

⁵ The coordinating body for humanitarian shelter activities comprising UN agencies, NGOs, and other stakeholders.

Funding for Yemen Decreases Amid Elevated Humanitarian Needs

Donors had reportedly contributed only 30 percent—or \$754.7 million—of the \$2.71 billion requested by the Yemen Humanitarian Response Plan for 2024 as of August 27, according to the UN Financial Tracking Service. Funding for Yemen has continued to decrease in recent years despite deteriorating public services and infrastructure, localized violence and security incidents, outbreaks of communicable diseases, and poor economic and living conditions exacerbating levels of food insecurity and malnutrition. The UN estimates approximately 18.2 million people, including more than 4.5 million internally displaced persons (IDPs), require humanitarian assistance in Yemen during 2024. In Al Houthi-controlled northern Yemen, interference in aid operations, including the imposition of arduous administrative and bureaucratic impediments, have hindered humanitarian organizations' ability to assist the most at-risk populations and impeded critical data collection efforts required to assess needs, according to the UN. In southern Yemen, RoYG authorities also continue to implement bureaucratic requirements impeding humanitarian activities, according to USAID/BHA partners. Between January and May, more than 160 humanitarian organizations—including USG partners—reached 2.7 million people with monthly assistance, including food assistance for 1.8 million people, health care for 518,000 people, WASH services for 617,000 people, and nutrition support for nearly 331,000 people, according to the UN. The U.S. Government (USG) remains the largest donor to the Yemen response, providing more than \$219.7 million during FY 2024 as of June 7, followed by the European Union, Kingdom of Saudi Arabia (KSA), the UK, and Germany.

KEY FIGURES



1.8 Million

People supported on average per month through USG emergency food assistance in 2024



14

USG partners supporting health interventions

U.S. GOVERNMENT RESPONSE

FOOD SECURITY

To address acute food insecurity in Yemen, USAID/BHA supports WFP and six nongovernmental organizations (NGOs) to implement food assistance activities. USAID/BHA partners are providing emergency food assistance through in-kind food aid, including U.S.-sourced commodities, cash, and vouchers for individuals to buy food in local markets. A USAID/BHA NGO partner provided cash distributions for food assistance to nearly 5,000 households in RoYG-controlled areas of Abyan, Ad Dali, and Lahij and 123 households in Al Houthi-controlled areas of Al Jawf and Marib in July.

HEALTH

The USG supports the International Organization for Migration (IOM), UNHCR, UNFPA, the UN World Health Organization (WHO), and 11 NGOs to conduct life-saving health interventions in Yemen. USG partners provide primary health care services—in conjunction with nutrition and WASH programming—through static health facilities and mobile medical teams serving hard-to-reach areas throughout Yemen. USG partners also support local health volunteers to provide health services at the community level, thereby promoting better health outcomes. In addition, USAID/BHA partners equip health facilities with medical supplies and pharmaceuticals to expand access to quality medical services. In July, a USAID/BHA NGO partner supported more than 16,000 individuals at static health facilities in northern Yemen, treating patients experiencing acute respiratory infections, gastrointestinal diseases, and malaria.



5

USG Partners supporting MPCA programming

MPCA

With USG support, IOM, UNHCR, and three NGOs provide MPCA to conflict-affected households in Yemen to meet their basic needs and reduce the use of negative coping strategies, while also supporting local markets. By providing MPCA, USG partners enable households to procure cooking gas, food, hygiene items, and other essential commodities. USAID/BHA partners distribute MPCA to vulnerable households, including conflict-affected, newly displaced, and other at-risk households, to help meet basic needs and develop linkages with longer-term programming.



13

USG partners supporting nutrition programming

NUTRITION

USAID/BHA-supported nutrition assistance aims to identify, prevent, and treat wasting—the deadliest form of malnutrition—across Yemen. Through support for the UN Children’s Fund (UNICEF), WFP, WHO, and 10 NGOs, USAID/BHA supports partners in preventing and responding to malnutrition, including by addressing the drivers of malnutrition. USAID/BHA partners also help reduce morbidity and mortality resulting from malnutrition, particularly among children and PLW through community- and facility-level malnutrition screenings conducted by community health and nutrition volunteers, community health workers, and community midwives. USAID/BHA partners provide nutrition support through static facilities and mobile teams by integrating food assistance, health, and WASH interventions to comprehensively assist vulnerable populations. For example, USAID/BHA partners conduct hygiene promotion campaigns and ensure adequate sanitation and water supply in nutrition treatment facilities in Yemen. In addition, USAID/BHA supports the nutrition stock pipeline for treatment of moderate and severe acute malnutrition cases. A USAID/BHA NGO partner screened approximately 5,200 children ages five years and younger and 2,300 PLW for malnutrition in July, referring nearly 1,000 children and PLW for onward treatment.



10

USG partners supporting protection interventions

PROTECTION

The USG is responding to critical protection needs across Yemen through support to IOM, UNFPA, UNHCR, and eight NGOs. Through community mobilization activities, risk mitigation efforts, and specialized case management services, USG partners address child protection and psychosocial support needs, prevent and respond to gender-based violence (GBV), and respond to other protection risks and violations. A USAID/BHA partner reached nearly 200 women in RoYG-controlled areas with GBV response services, including counseling, awareness sessions, and cash support in July and continues to provide case management services including referrals to specialized services, including secondary health care, legal support, and psychiatric services, as needed.



3 Million

People supported with
USG-funded WASH
activities

WASH

USAID/BHA and State/PRM support WASH programming throughout Yemen to prevent communicable disease outbreaks, including cholera, and acute malnutrition in children and mothers. State/PRM supports WASH activities that assist IDPs in Yemen and refugees from the Horn of Africa. In addition, through partnership with IOM, UNICEF, and 12 NGO partners, USAID/BHA supports partners to provide critical WASH activities, including conducting hygiene awareness sessions, rehabilitating water systems destroyed by conflict, and providing safe drinking water to 3 million people in need. With USAID/BHA support, an INGO partner rehabilitated six water access points across southern Yemen in July, providing nearly 1.6 million gallons of safe drinking water to more than 7,500 individuals. The NGO also rehabilitated six other water points in Al Houthi-controlled northern Yemen, reaching more than 10,600 individuals with nearly 7,300 gallons of safe drinking water during the month.

CONTEXT IN BRIEF

- Between mid-2014 and early 2015, conflict between the RoYG and Al Houthi opposition forces in northern Yemen generated widespread and repeated displacement and exacerbated 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 KSA-led coalition began conducting airstrikes against Al Houthi and allied forces to halt Al Houthi southward expansion, damaging and destroying public infrastructure, interrupting essential services, and reducing commercial imports to a fraction of the levels required to sustain the Yemeni population.
- A UN-brokered truce between Al Houthi authorities and the KSA-led coalition from April through October 2022 resulted in a significant reduction in conflict that has persisted; however, the situation on the ground remains fragile and humanitarian needs remain high due to the economic crisis, high levels of unemployment, protracted instability, and rising food and fuel prices. Approximately 21.6 million people require humanitarian assistance, according to the 2024 Humanitarian Needs Overview. Moreover, approximately 4.5 million people remain internally displaced in the country since 2015, while an additional 1.9 million IDPs have returned to their areas of origin. The volatility of the current situation has impeded relief agencies' ability to obtain accurate, comprehensive demographic data on conflict-affected populations.
- On October 9, 2023, U.S. Ambassador Steven H. Fagin reissued a declaration of humanitarian need for Yemen for FY 2024 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 2024¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/BHA			
IOM	Health, Humanitarian Coordination, Information Management, and Assessments (HCIMA), MPCA, Protection, Shelter and Settlements, WASH	Countrywide	\$18,224,300
FAO	HCIMA	Countrywide	\$1,392,000
UNFPA	HCIMA; Health; Protection	Countrywide	\$20,789,000
UNICEF	Nutrition—U.S. In-Kind Specialized Nutrition Products	Countrywide	\$30,328,308
	Nutrition, WASH	Countrywide	\$15,700,000
UN Office for the Coordination of Humanitarian Affairs (OCHA)	HCIMA	Countrywide	\$2,100,000
WFP	Logistics, Nutrition	Countrywide	\$40,979,450
	Nutrition—U.S. In-Kind Specialized Nutrition Products	Countrywide	\$11,546,800
	Food Assistance—U.S. In-Kind Food Aid	Countrywide	\$5,600,000
WHO	Health, Nutrition	Countrywide	\$5,050,000
Implementing Partners	Food Assistance—Cash Transfers for Food, Food Vouchers; HCIMA; Health; Nutrition; Protection; WASH	Countrywide, Aden, Al Bayda', Ad Dali', Dhamar, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Marib, Sa'dah, Sana'a, Ta'izz	\$48,183,500
TOTAL USAID/BHA FUNDING			\$199,893,358
STATE/PRM			
IOM	Protection	Countrywide	\$3,000,000
UNHCR	Health, MPCA, Protection, Shelter	Countrywide	\$11,646,000
Implementing Partner	Protection	Countrywide	\$5,200,000
TOTAL STATE/PRM FUNDING			\$19,846,000
TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2024			\$219,739,358

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of June 7, 2024.

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](https://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: cidi.usaid.gov
 - Information on relief activities of the humanitarian community can be found at reliefweb.int

