



Yemen – Complex Emergency

SEPTEMBER 30, 2024

SITUATION AT A GLANCE

35.2

Population of Yemen

UN - January 2024

18.2

Number of People in Need of Humanitarian Assistance

UN - January 2024

4.5

Number of IDPs in Yemen

IOM – February 2024

17.6
MILLION

People Likely to Experience Severe Food Insecurity in 2024

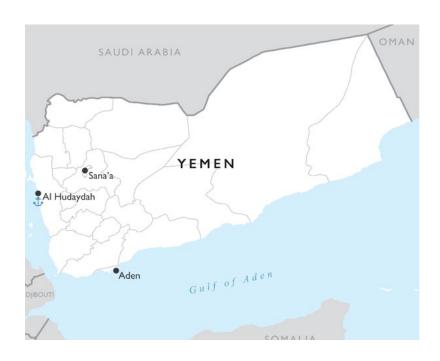
UN - January 2024

60,372

Number of Refugees and Asylum-Seekers in Yemen

UNHCR - June 2024

- Approximately 60 percent of households in Yemen reported inadequate food consumption in July, the highest level on record for Yemen, WFP reports.
- The Shelter Cluster estimates approximately 655,000 individuals, including host community members, IDPs, and returnees, in Yemen will require shelter assistance and relief commodities during the 2024/2025 winter season.
- Heavy rainfall and subsequent flooding during Yemen's two annual rainy seasons had affected nearly 938,000 people as of August 31, contributing to the spread of waterborne diseases and disrupting the agriculture sector, according to the UN.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING	USAID/BHA ¹	\$691,184,941
For the Yemen Response in FY 2024	State/PRM ²	\$42,325,022
For complete funding breakdown with partners, see detailed chart on page 6	Total	\$733,509,963

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

More Than 60 Percent of Households Report Inadequate Food Consumption

Access constraints, irregular levels of humanitarian assistance, poor economic conditions, and protracted conflict continued to exacerbate ongoing food insecurity across Yemen in July, according to the Famine Early Warning Systems Network (FEWS NET) and an August UN World Food Program (WFP) report. An estimated 60 percent of households in Yemen reported experiencing inadequate food consumption in July, the highest level on record for Yemen, WFP reports. In addition, WFP noted that severe food deprivation—based on dietary diversity, meal frequency, and nutrient intake—peaked at nearly 40 percent in both Republic of Yemen Government (RoYG)- and Al Houthi-controlled areas, with northern Yemen experiencing an approximately 80 percent year-on-year increase in severe food deprivation and southern Yemen experiencing a 50 percent rise as of July. Notably, the prevalence of severe food deprivation doubled in Hadramawt, Hajjah, Al Hudaydah, Al Jawf, Al Mahwit, and Ta'izz governorates between July 2023 and July 2024.

Severe flooding since March further limited access to food among vulnerable populations, particularly in Hajjah, Al Hudaydah, Marib, Sa'dah, and Ta'izz governorates. To respond to persistent food insecurity exacerbated by the adverse effects of flooding, WFP provided food and nutrition support to an estimated 1.2 million people across Yemen, including reaching approximately 239,100 people with food assistance through its Rapid Emergency Response—an emergency food assistance operation in northern Yemen designed to respond to rising food insecurity during the ongoing general food assistance (GFA) pause—during August. The UN agency also provided GFA to 19,400 people in RoYG-controlled areas of southern Yemen during the month. In response to rising levels of acute malnutrition, particularly in flood-affected areas of Al Hudaydah and Ta'izz, WFP initiated an emergency response; the response included a two-month extension of emergency food assistance to internally displaced persons (IDPs) and an acute malnutrition prevention program, reaching approximately 105,000 people during the month.

Shelter Cluster Highlights Winterization Needs in Yemen

Approximately 655,000 individuals across 30 districts in Yemen will require shelter assistance and emergency relief supplies during the October 2024-to-February 2025 winter season, according to a September Shelter Cluster report. Following the unusually heavy seasonal rains and subsequent floods, the upcoming winter is expected to bring harsh, freezing conditions to Yemen. Due to the high elevation, Yemen's highlands are particularly at risk, with the coldest temperatures reaching below freezing in areas already damaged by the previous floods. In response, Shelter Cluster partners are mobilizing to provide lifesaving winterization assistance to 232,000 of the most vulnerable individuals requiring winterization assistance, including through cash distributions for cold weather items; delivering high-thermal blankets and assorted winter clothing; distributing shelter kits to those living in open-air settings; providing immediate shelter assistance by replacing damaged shelters; and providing households and individuals with materials and tools to repair existing shelters.

Overall, an estimated 6.7 million people require shelter assistance across Yemen, according to the UN. Of these individuals, 40 percent are IDPs, while the remaining 60 percent are IDP returnees and host community members. An estimated 1.5 million people are residing in approximately 2,400 hosting sites across the country, making the individuals particularly vulnerable to climate-related shocks due to the temporary nature of the shelters. IDPs, host community members, and returnees also face financial constraints that limit their purchasing power, particularly for winterization items such as blankets,

³ The coordinating body for humanitarian shelter activities, comprising UN agencies, nongovernmental organizations (NGOs), and other stakeholders

clothing, and shelter materials, according to the Shelter Cluster.

Floods Exacerbate Risk of Cholera, Food Insecurity Across Yemen, Relief Actors Report

Heavy rainfall and associated flooding and landslides during Yemen's two annual rainy seasons—spanning April to May and July to September—had affected nearly 938,000 people since March as of August 31, exacerbating food and health concerns among vulnerable populations, according to the UN. Floodwaters have damaged health care and water, sanitation, and hygiene (WASH) infrastructure, increasing the risk of further cholera outbreaks across affected areas, according to the International Rescue Committee (IRC). As of September 7, the Ministry of Public Health and Population had identified more than 186,000 suspected cases of cholera countrywide. In response to the increase in suspected cases, IRC launched an emergency response in the most affected districts of Hajjah, Al Hudaydah, Al Mahwit, and Ta'izz, providing cash assistance to approximately 2,000 affected households.

Flooding during July and August also significantly disrupted the country's agricultural sector, adversely affecting approximately 279,400 livestock and damaging an estimated 380 square miles of farmland as of September 13, the UN Food and Agriculture Organization (FAO) reports. Notably, the floods have exacerbated already dire food security and malnutrition conditions across Yemen, including among households in southern Yemen projected to experience Emergency—IPC 4—levels or worse of acute food insecurity through January 2025. The extreme weather has also hampered harvesting and planting activities—critical for local food security—expected to commence following the conclusion of the July-to-September rainy season, particularly in Dhamar, Al Jawf, and Marib governorates. In Dhamar, floods have damaged approximately 85 percent of agricultural land, while agricultural land—which provides the main livelihood source for affected communities—in Al Jawf and Marib remained submerged in floodwaters as of September 13, resulting in crop damage, livelihood destruction, and livestock loss. Although rainfall in Yemen will continue to decrease following the end of the rainy season, the risk of prolonged flooding remains high in areas near wadis due to the high soil moisture content from previous rains and residual floodwater runoff, according to FAO.

In response, relief organizations—including USAID/BHA partners the International Organization for Migration (IOM) and the UN Population Fund (UNFPA)—delivered emergency relief during the rainy seasons. UNFPA activated its multi-sectoral rapid response mechanism (RRM) in July, assisting nearly 355,500 individuals as of September 11. The agency distributed dignity kits containing women's hygiene supplies and provided mental health and psychosocial support services to individuals affected by flooding in Hajjah, Al Hudaydah, Al Mahwit, and Marib. RRM teams also provided health care assistance, including distributing emergency health, measles, and reproductive health kits and providing lifesaving medicines and services at supported health care facilities and through mobile clinics. Additionally, IOM is targeting 350,000 people with multi-sectoral interventions, including distributing water tanks, providing desludging services, and repairing latrines in multiple sites as of September 5. The UN agency also expanded health services, treating more than 100 individuals through mobile teams as of the same date.

3

⁴ 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 I—to Famine—IPC 5—for acute food insecurity.

KEY FIGURES

1.8 Million

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



USG partners supporting health interventions

3

USG Partners supporting MPCA programming



USG partners supporting nutrition programming

U.S. GOVERNMENT RESPONSE

FOOD SECURITY

To address acute food insecurity in Yemen, USAID/BHA supports WFP and six 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. In August, a USAID/BHA NGO partner distributed cash for food assistance to more than 16,600 individuals in Ta'izz.

HEALTH

The U.S. Government (USG) supports IOM, the Office of the UN High Commissioner for Refugees (UNHCR), UNFPA, the UN World Health Organization (WHO), and ten NGOs to conduct lifesaving 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 the country. 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. A USAID/BHA NGO partner provided outpatient consultations to more than 9,300 individuals through its nine health facilities and reached 3,300 individuals with outpatient consultations through its four mobile health clinics during August.

MPCA

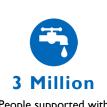
With USG support, IOM, UNHCR, and one NGO provide multipurpose cash assistance (MPCA) to conflict-affected households in Yemen to meet their basic needs and reduce the use of negative coping strategies while also supporting local markets. By providing MPCA, USG partners enable households to procure cooking 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.

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 nine 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 pregnant and lactating

women (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 I 1,800 children ages five years and younger and PLW for malnutrition in August, referring nearly 1,100 children and PLW for onward treatment.





3 Million
People supported with
USG-funded WASH
activities

PROTECTION

The USG is responding to critical protection needs across Yemen through support to IOM, UNFPA, UNHCR, and six 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 more than 7,200 individuals across Abyan, Aden, and Ad Dali' governorates with GBV support services during August.

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 partnerships with IOM, UNICEF, and 13 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 NGO partner rehabilitated six water access points across northern Yemen in August, providing more than 72,400 gallons of safe drinking water to more than 10,600 individuals.

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 Kingdom of Saudi Arabia (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 2024

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT		
USAID/BHA ²					
IOM	Health, Humanitarian Coordination, Information Management, and Assessments (HCIMA), MPCA, Protection, Shelter and Settlements, WASH	Countrywide	\$32,074,300		
FAO	HCIMA	Countrywide	\$1,392,000		
UNFPA	HCIMA, Health, Protection	Countrywide	\$29,789,000		
UNICEF	Nutrition—U.S. In-Kind Specialized Nutrition Products	Countrywide	\$30,328,308		
	Health, Nutrition, WASH	Countrywide	\$38,780,150		
UN Office for the Coordination of Humanitarian Affairs (OCHA)	HCIMA	Countrywide	\$2,100,000		
WFP	Food Assistance, Logistics, Nutrition	Countrywide	\$130,979,450		
	Nutrition—U.S. In-Kind Specialized Nutrition Products	Countrywide	\$11,546,800		
	Food Assistance–U.S. In-Kind Food Aid	Countrywide	\$264,836,087		
WHO	Health, Nutrition	Countrywide	\$8,050,000		

Implementing Partners	Food Assistance—Cash Transfers for Food, Food Vouchers; HCIMA; Health; Logistics; MPCA; Nutrition; Protection; Shelter and Settlements; WASH	Countrywide, Aden, Al Bayda', Ad Dali', Dhamar, Hajjah, Al Hudaydah, Ibb, Al Jawf, Lahij, Marib, Sa'dah, Sana'a, Ta'izz	\$140,835,100
	Program Support		\$473,746
TOTAL USAID/BHA FU	INDING		\$691,184,941
	STATE/PRM		
IOM	Protection	Countrywide	\$3,000,000
UNHCR	Health, MPCA, Protection, Shelter and Settlements	Countrywide	\$14,825,022
Implementing Partner	Protection	Countrywide	\$24,500,000
TOTAL STATE/PRM FU	INDING		\$42,325,022
TOTAL USG HUMANIT	TARIAN FUNDING FOR THE YEMEN RESPONSE	IN FY 2024	\$733,509,963

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, 2024.

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.usaid.gov
 - o Information on relief activities of the humanitarian community can be found at reliefweb.int

USAID/BHA bulletins appear on the USAID website at usaid.gov/humanitarian-assistance/where-we-work

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