KEY DEVELOPMENTS
• Widespread fuel shortages, which began in mid-September due to delayed fuel shipments into Al Hudaydah Port following the implementation of Republic of Yemen Government (RoYG) regulations on commercial fuel imports, have led to increased fuel prices and long wait times at fuel stations, according to the UN. As a result, relief actors reported adverse impacts on public infrastructure reliant on fuel—particularly water, sanitation, and hygiene (WASH) infrastructure—limiting access to safe drinking water and impeding vulnerable households’ ability to meet basic needs. While an increase in fuel shipments to Al Hudaydah Port in late October has temporarily alleviated constrained operations at fuel stations, humanitarian organizations remain concerned that shortages could continue in late November without a long-term solution.
• U.S. Government (USG) partners the Office of the UN High Commissioner for Refugees (UNHCR), the UN World Food Program (WFP), and the UN World Health Organization (WHO) conducted an assessment mission to Al Hudaydah Governorate’s Durayhimi city, which has remained inaccessible since June 2018 due to continued fighting between Al Houthi and RoYG forces. In addition to assessing humanitarian needs, the UN agencies distributed emergency relief items, including food assistance, hygiene kits, medicine, nutrition supplements, and safe drinking water, to the estimated 200 civilians remaining in the city.

NUMBERS AT A GLANCE

30.5 million
Estimated Population of Yemen
UN – December 2018

24.1 million
Estimated Number of People in Need of Humanitarian Assistance
UN – December 2018

3.6 million
Estimated IDPs in Yemen
IOM – November 2018

20.1 million
Estimated Number of People in Need of Food Assistance
UN – December 2018

19.7 million
Estimated Number of People in Need of Basic Health Care
UN – December 2018

17.8 million
Estimated Number of People in Need of WASH Assistance
UN – December 2018

HIGHLIGHTS
• Fuel shortages hinder access to food, health care services, and safe drinking water in northern Yemen throughout October
• Flooding adversely affects nearly 4,300 households across six governorates in late September and early October
• UN agencies conduct assessment and emergency distribution mission to Durayhimi city

HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2019

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>USAID/OFDA 1</td>
<td>$102,058,924</td>
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<tr>
<td>USAID/FFP 2</td>
<td>$594,548,790</td>
</tr>
<tr>
<td>State/PRM 3</td>
<td>$49,800,000</td>
</tr>
</tbody>
</table>

$746,407,714

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)
FUEL SHORTAGES

• Fuel import delays that began in mid-September have heightened fuel prices across northern Yemen, with the Norwegian Refugee Council reporting more than doubled fuel prices in Yemen’s capital city of Sana’a. The UN reports long lines and reduced operating hours at fuel stations, with individuals waiting as long as multiple days to purchase fuel. As of late October, the arrival of eight fuel ships at Al Hudaydah Port enabled some fuel stations to reopen and resulted in reduced wait times. However, the shortages have already worsened humanitarian conditions in affected areas due to negative impacts on public infrastructure operations and increasing costs for vulnerable households to meet basic needs, as well as constraining humanitarian operations in northern Yemen. Relief actors remain concerned that fuel shortages could continue in late November, further exacerbating already dire humanitarian conditions, unless a long-term solution to fuel import regulations is reached.

• The lack of fuel in recent weeks has impeded water trucking services, restricting access to safe drinking water for Yemenis, particularly internally displaced persons (IDPs), residing outside of urban centers in northern Yemen, the WASH Cluster reports. Furthermore, central water systems in the capital cities of Dhamar, Ibb, and Al Mahwit governorates had suspended operations due to insufficient fuel supply, restricting access to safe drinking water for an estimated 400,000 people, according to Oxfam. The WASH Cluster warns that lack of safe drinking water could exacerbate the spread of waterborne diseases, such as cholera.

• Fuel shortages have also adversely affected health care services and impacted food assistance operations in northern Yemen, according to the UN. The shortages have prompted some mobile clinics to suspend operations, while high fuel prices have hampered patients’ ability to travel to health facilities for treatment. More than 70 percent of Yemen’s hospitals rely on fuel-powered generators to operate equipment for life-saving medical services. Meanwhile, the UN reports that food transporters have been forced to purchase fuel from the black market or use contingency fuel supplies to continue operations, while increased fuel costs have hindered vulnerable households’ abilities to travel to food distribution points. As Yemen imports more than 90 percent of its food, continued fuel shortages could further increase food prices and heighten risk of acute food insecurity, according to the Famine Early Warning Systems Network (FEWS NET).

ASSESSMENTS AND MULTI-SECTOR ASSISTANCE

• During the week of October 13, USG partners UNHCR, WFP, and WHO conducted a joint assessment and emergency distribution mission to Durayhimi, providing food assistance, hygiene kits, medicine, nutrition supplements, and safe drinking water to the estimated 200 civilians remaining in the city, which has been inaccessible since June 2018 due to continued fighting between Al Houthi and RoYG forces. Civilians lacked access to hospitals, schools, other basic services, and commodities, the UN agencies report. Relief actors have expressed concerns regarding freedom of movement in Durayhimi, as many civilians have requested assistance obtaining safe passage to leave the city to access basic services and commodities.

• Through State/PRM support, UNHCR distributed cash assistance and basic household items in two IDP sites in Sana’a Governorate’s Hamdan District in October, following a recent needs assessment that identified poor humanitarian conditions in the area. UNHCR is providing relief items to prepare for the winter season and coordinating with the Health Cluster to address IDPs’ health needs in the two sites, including to respond to recent cases of respiratory illness, reportedly resulting from the burning of debris for warmth.

• Heavy rainfall and subsequent flooding adversely affected nearly 4,300 households, including IDPs, in southern Yemen’s Abyan, Aden, Hadramawt, Lahij, Shabwah, and Ta’izz governorates between September 27 and October 6, according to the UN. Relief actors responded by providing food assistance to nearly 2,200 households, shelter kits to nearly 900 households, mosquito nets to approximately 300 households, and plastic sheeting for shelter repair to approximately 300 households. Humanitarian organizations also conducted mosquito spraying campaigns, as well as

4 The coordinating body for humanitarian WASH activities, comprising UN agencies, non-governmental organizations (NGOs), and other stakeholders.
cleaning services in 10 IDP sites, to prevent the spread of vector-borne and waterborne diseases in three of the affected governorates.

### FOOD SECURITY AND NUTRITION

- USAID/FFP partner WFP reached approximately 12.2 million people in Yemen with food assistance in September. WFP’s assistance included cash transfers for food for 450,000 people, representing the highest monthly total of beneficiaries reached through cash-based assistance since the beginning of the crisis in Yemen. Amid increased logistical constraints resulting from fuel shortages in northern Yemen, the UN agency used contingency fuel supplies to ensure uninterrupted transport of assistance in September.

- USAID/FFP supported an NGO partner to deliver food vouchers—redeemable for specific food items from local shops—to approximately 38,200 people in Abyan, Aden, and Lahij in September. The partner continues to provide monthly assistance to households in governorates identified as most vulnerable to Catastrophe—IPC 5—levels of acute food insecurity by the Integrated Programming for Famine Risk Reduction Initiative, supported by the Food Security and Agriculture, Health, Nutrition, and WASH Clusters.5

- In Abyan, Ad Dali’, and Lahij governorates, a USAID partner distributed food vouchers and conducted health and nutrition awareness sessions for more than 10,800 people in September. The partner also provided livelihoods support, distributing beekeeping equipment to nearly 190 people in Abyan and traditional irrigation equipment to nearly 100 people in Abyan and Lahij.

### HEALTH AND WASH

- Health actors continue to record cholera cases across Yemen, with more than 764,000 suspected cases recorded between January 1 and October 31. While the number of monthly reported cholera cases remains high, health actors recorded approximately 59,300 cases during October, representing a decrease of nearly 26,500 cases from September and the lowest monthly caseload recorded since February. Several USAID partners continue to conduct critical cholera response and prevention activities in affected and high-risk areas.

- USAID/OFDA supported an NGO partner to provide health, nutrition, and WASH assistance in Ad Dali’, Sana’a, and Ta’izz governorates in August, with the partner treating more than 16,000 people for communicable and non-communicable diseases and conducting a five-day cholera awareness campaign in Sana’a that reached nearly 76,000 people. The partner also reached more than 4,800 people in the three governorates through nearly 300 hygiene promotion sessions on topics including cholera prevention and treatment practices. In addition, USAID/OFDA supported the partner to improve safe drinking water access for approximately 24,000 people by delivering water to seven health facilities and nearly 30 IDP sites in Sana’a and Ta’izz. A second organization reached nearly 3,300 people through 100 hygiene promotion sessions—including cholera awareness education—in Ibb and Ta’izz during August with support from USAID/OFDA. The NGO also cleaned water storage containers and water sources to reduce contamination, improving safe drinking water access for more than 2,600 people.

- Another USAID/OFDA NGO partner conducted more than 140 hygiene awareness sessions and 100 house-to-house visits to reach more than 2,000 IDPs with critical hygiene education during September in Al Hudaydah’s Al Khawkha District, a priority response area. In addition, the partner constructed nearly 70 emergency latrines to support more than 200 displaced households in three sites in the district.

- USAID/OFDA partner the International Organization for Migration (IOM) is supporting a local partner to deliver approximately 130,000 liters of water per day and setting up nearly 20 additional water points to address health and WASH needs in Marib Governorate’s Al Jufainah IDP camp, which hosts nearly 4,000 households, according to the

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5 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. A Famine classification applies to a wider geographical location, while the term Catastrophe—IPC 5—refers to an extreme lack of food at the household level even with full employment of coping strategies. Famine is determined when more than 20 percent of households in an area are experiencing Catastrophe, when global acute malnutrition levels exceed 30 percent, and when the crude mortality rate exceeds two people per 10,000 persons per day.
Camp Coordination and Camp Management (CCCM) Cluster. IOM is also providing mobile primary health services in the camp, as well as establishing a primary health clinic and referral pathways for ambulance services and hospitals.

DISPLACEMENT AND PROTECTION

• Population growth—primarily due to a continued influx of IDPs—is straining Marib Governorate’s local capacity, infrastructure, and resources to provide basic services, according to IOM. During a September assessment, the CCCM Cluster identified nearly 7,000 displaced households sheltering in 12 sites—including collective centers, settlements, and Al Jufainah IDP camp—in Marib city, eight of which were at risk of eviction by local authorities.

• A USAID/OFDA NGO partner continued to provide critical protection services at a women’s community center in Al Khawkha during September. The partner registered nearly 270 women and girls to participate in psychosocial support (PSS) activities at the center and conducted six group sessions that focused on building self-confidence and conflict management. The group sessions supported 40 women heads of household ages 20–40 years and more than 20 women ages 18–30 years. In addition, the partner provided adult literacy classes for more than 20 women older than 40 years of age. USAID/OFDA also supported another NGO partner to provide protection assistance to more than 2,400 people in Ibb and Ta’izz in September, including child protection services, gender-based violence prevention and treatment, and PSS services.

**2019 HUMANITARIAN RESPONSE PLAN FUNDING* **

*Funding figures are as of November 8, 2019. All international figures are according to the UN Office for the Coordination of Humanitarian Affairs (OCHA)’s Financial Tracking Service and based on international commitments during the current calendar year, while 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.**

**Kingdom of Saudi Arabia (KSA)**

**United Arab Emirates (UAE)**

**European Commission’s Directorate-General for Humanitarian Aid and Civil Protection (ECHO)**
**USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2019**

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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.
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.

CONTEXT

• Between 2004 and early 2015, conflict between RoYG and Al Houthi opposition forces in the north and between Al Qaeda-affiliated groups and RoYG forces in the south affected more than 1 million people and repeatedly displaced populations in northern Yemen, resulting in humanitarian need. Fighting between RoYG forces and tribal and militant groups since 2011 limited the capacity of the RoYG to provide basic services, and humanitarian needs increased among impoverished populations. 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 KSA-led 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 more than 20 million people in 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 14, 2018, U.S. Ambassador Matthew H. Tueller reissued a disaster declaration for Yemen in FY 2019 due to continued humanitarian needs resulting from the complex emergency and the impact of the country’s political and economic crises on vulnerable populations.