**Yemen - Complex Emergency**

**Fact Sheet #2, Fiscal Year (FY) 2017**

**Numbers at a Glance**

- **26 million**
  Population of Yemen
  UN – February 2016

- **21.2 million**
  People in Need of Urgent Humanitarian Assistance
  UN – February 2016

- **19.4 million**
  People in Need of WASH Services
  UN – February 2016

- **14.1 million**
  People Lacking Adequate Access to Health Care
  UN – February 2016

- **7+ million**
  People in Need of Emergency Food Assistance
  FEWS NET – November 2016

- **2.2 million**
  IDPs in Yemen
  IOM, UNHCR – August 2016

- **4.6 million**
  People Reached with Humanitarian Assistance in 2016
  OCHA – September 2016

**Highlights**

- Al Houthi and KSA-led Coalition representatives agree to new cessation of hostilities, violence continues.
- Health actors confirm 86 cholera cases, WHO cautions that number could increase.
- Between 7 million and 10 million people experiencing at least Crisis levels of food insecurity.

**Humanitarian Funding**

<table>
<thead>
<tr>
<th><strong>USAID/OFDA</strong></th>
<th><strong>$81,576,334</strong></th>
</tr>
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<tbody>
<tr>
<td><strong>USAID/FFP</strong></td>
<td><strong>$196,988,400</strong></td>
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<tr>
<td><strong>State/PRM</strong></td>
<td><strong>$48,950,000</strong></td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$327,514,734</strong></td>
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</table>

**Key Developments**

- On November 15, U.S. Secretary of State John F. Kerry announced that Al Houthi and Saudi-led Coalition representatives agreed to a cessation of hostilities following consultations in Oman and the United Arab Emirates (UAE). The agreement was scheduled to come into effect on November 17; however, the Republic of Yemen Government (RoYG) has withheld support for the agreement and violence continues.
- As of November 13, health care workers had reported 4,119 suspected cholera cases and 86 confirmed cases, according to the UN World Health Organization (WHO). The UN agency cautions that case numbers could rise due to conflict-related health care disruptions and damage to water, sanitation, and hygiene infrastructure (WASH). A RoYG Ministry of Public Health and Population (MoPHP)-led Cholera Task Force—which includes USAID/OFDA partners—is implementing cholera response interventions, such as the establishment of cholera treatment centers (CTCs), increased surveillance and monitoring, and water chlorination.
- Between 7 million and 10 million people in Yemen are experiencing at least Crisis—IPC 3—levels food insecurity, according to the USAID-funded Famine Early Warning Systems Network (FEWS NET). Although ongoing humanitarian assistance has likely prevented a further deterioration of food security in many areas and data is limited, FEWS NET cautions that households in areas where the impact of conflict on livelihoods and humanitarian access have been most severe could possibly experience Catastrophe—IPC 5—conditions between October 2016 and May 2017.
- Since March 2015, conflict in Yemen has resulted in more than 7,000 deaths and injured more than 36,800 people, WHO reports.

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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)
4 The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Catastrophe—IPC 5.
INSECURITY, DISPLACEMENT, AND HUMANITARIAN ACCESS

- Secretary Kerry attended high-level meetings in Oman and the UAE from November 14–15 to discuss the Yemen crisis and a potential peace settlement, as well as other challenges facing the region. Following the meetings, Secretary Kerry announced that Al Houthi and Kingdom of Saudi Arabia-led (KSA) Coalition representatives had agreed to a cessation of hostilities in Yemen set to begin on November 17; however, RoYG authorities subsequently expressed dissatisfaction with the agreement and withheld support, according to international media. As of November 18, clashes continued, with Médecins Sans Frontières reporting that it had treated 76 patients with conflict-related injuries in Ta’izz since the cessation of hostilities was scheduled to commence.
- UN Special Envoy for Yemen Ismail Ould Cheikh Ahmed visited the capital city of Sana’a on November 4 and encouraged the KSA-led Coalition to permit commercial flights in and out of Sana’a airport, which has been closed to commercial flights since the beginning of August, to facilitate the evacuation of wounded individuals, according to international media. The KSA-led Coalition has allowed the UN Humanitarian Air Service (UNHAS)—whose flights facilitate the movement of relief personnel and goods—and other humanitarian flights to use the airport on a case-by-case basis.
- In a late October Security Council briefing, UN Under-Secretary General and Emergency Relief Coordinator (ERC) Stephen O’Brien reported that a recent uptick in airstrikes and clashes had impeded humanitarian efforts, disrupting emergency relief activities. ERC O’Brien encouraged parties to the conflict to support the peace process and negotiate an immediate cessation of hostilities to enable the provision of humanitarian assistance.
- The Yemen Task Force on Population Movement (TFPM)—comprising the International Organization for Migration (IOM), the Office of the UN High Commissioner for Refugees (UNHCR), and humanitarian protection actors—reports that nearly 2.2 million people remained internally displaced as of September 30 due to the current conflict, 51 percent of whom are displaced in Hajjah, Sana’a, and Ta’izz governorates. The TFPM also identified more than 1 million returnees across 20 governorates; of these, nearly 70 percent have returned to Aden, Amanat al ‘Asimah, and Ta’izz governorates.

HEALTH AND WASH

- The RoYG MoPHP first confirmed an outbreak of cholera in Yemen on October 6. As of November 13, WHO reported 4,119 suspected cholera cases and 86 confirmed cases, with Aden and Ta’izz governorates hosting the largest caseloads. Conflict-related disruptions to health care and WASH infrastructure could contribute to a significant increase in cholera cases, the UN agency cautions.
- An integrated Cholera Task Force—comprising the RoYG MoPHP, the UN Children’s Fund (UNICEF), WHO, and non-governmental organizations (NGOs)—is responding to the outbreak, including through cholera awareness and hygiene promotion campaigns, chlorination of water sources, heightened surveillance efforts, and the establishment of 21 CTCs in affected governorates. WHO reports that the RoYG and response organizations plan to establish an additional 60 CTCs in high-risk areas.
- In early November, WHO released final results from the Health Resources Availability Mapping System, which indicated that only 45 percent of health facilities are fully functional and accessible in the 16 surveyed governorates. The mapping also identified that 49 of 276 surveyed districts—or 18 percent—have no doctors, and a full package of health care services is available in only 37 percent of surveyed health facilities.
- USAID/OFDA partners continue to review programming and adjust activities to respond to the cholera outbreak. In late October, one NGO partner provided medical supplies for the treatment of cholera and acute watery diarrhea to CTCs in Aden and Lahij; trained 40 MoPHP health staff on cholera treatment and prevention; and, through 50 trained community health volunteers, raised awareness among more than 9,900 people regarding hygiene and prevention of diarrhea.
- Through USAID/OFDA support, an NGO partner continues to support health facilities and mobile medical teams throughout Yemen. In October, the partner provided health consultations for nearly 6,530 people, as well as
reproductive health services for more than 1,960 women. Additionally, the partner reached more than 16,300 people with a hygiene and sanitation promotion campaign; to date, the campaigns have reached nearly 392,300 people.

**FOOD SECURITY, LIVELIHOODS, AND NUTRITION**

- Between 7 and 10 million people in Yemen are experiencing Crisis-level food insecurity conditions or worse; of this population, between 1.75 million people and 2.5 million people are likely experiencing Emergency—IPC 4—levels of food insecurity, according to FEWS NET. Conflict-related loss of livelihoods and high food prices compared to pre-crisis levels are significant contributors to the deteriorating food security situation, FEWS NET notes.

- Humanitarian assistance has likely prevented a further decline in food security populations in some areas. In the absence of assistance by USAID/FFP partner the UN World Food Program (WFP), FEWS NET estimates that food security conditions in Ad Dali’, Amran, Hajjah, Lahij, Sa’dah, and Shabwah governorates—currently Crisis—would likely be at Emergency levels. FEWS NET cautions that people in areas with severely constrained humanitarian access and significant disruptions to livelihoods could experience Catastrophe levels of food insecurity between October 2016 and May 2017.

- Household incomes have declined significantly compared to pre-crisis levels, according to a recent FEWS NET rapid assessment across 10 conflict-affected governorates. Loss of livelihoods, limited earning opportunities, and barriers to accessing remittances—such as bank closures and currency shortages—have contributed to the decline in household income, FEWS NET reports. Additionally, 1.25 million civil servants, including all RoYG MoPHP staff, did not receive salary payments in September or October, limiting their ability to purchase food and basic commodities, according to the UN Office for the Coordination of Humanitarian Affairs (OCHA).

- The average price of wheat remained stable in October compared to September, with the exception of slight price increases in Al Hudaydah, Hadramawt, and Hajjah governorates, according to the UN Food and Agriculture Organization (FAO). Meanwhile, the average price of rice declined in nearly all monitored markets. Despite the stabilization in market conditions compared to previous months, average food prices remain significantly above pre-crisis levels. The sustained high prices, in conjunction with the conflict-related loss of livelihoods, has eroded household purchasing power and limited household food access, FAO reports.

- USAID/FFP partner WFP has reached 1 million beneficiaries to date in November and plans to reach a total of 3 million people for the month with general food distributions. In October, WFP reached 2.9 million people through general food distributions and more than 813,000 people through food vouchers.

- A USAID/FFP NGO partner recently completed the distribution of food vouchers to 1,400 households in Abyan Governorate, with recipients also receiving specialized nutrition training. The partner plans to distribute vouchers and provide training in two other governorates of southern Yemen in the coming weeks.

- In October, a USAID/OFDA partner provided nearly 2,300 children with nutritional therapy services, including more than 660 children experiencing severe acute malnutrition and nearly 1,620 children experiencing moderate acute malnutrition.

**OTHER HUMANITARIAN ASSISTANCE**

- During the week of November 7, IOM—with support from the KSA’s King Salman Humanitarian Aid and Relief Center (KSRelief)—evacuated nearly 130 Somalis fleeing conflict in Yemen. The operation was the first evacuation under a one-year $10 million KSRelief-funded project implemented by IOM and UNHCR to facilitate safe, orderly, and humane returns from Yemen to Somalia. IOM and UNHCR aim to evacuate approximately 20,000 people by June 2017.
Between 2004 and early 2015, conflict between the RoYG and Al Houthi opposition forces in the north and between Al Qaeda-affiliated groups and RoYG forces in the south had affected more than 1 million people and repeatedly displaced populations in northern Yemen, resulting in humanitarian needs. 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 expansion 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 late March 2015, a KSA-led coalition began airstrikes on Al Houthi and allied forces to halt their southward expansion. The ongoing conflict has damaged public infrastructure, interrupted essential services, displaced many people, and reduced the level of 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.

The escalated conflict, coupled with protracted political instability, the resulting economic crisis, rising fuel and food prices, and high unemployment, has left nearly half of Yemen’s 26 million people food-insecure and more than 7 million people in need of emergency food assistance. In addition, the conflict has displaced a total of 3.1 million people, including 950,000 people who had returned to areas of origin, as of August 2016. The volatility of the current situation prevents relief agencies from obtaining accurate, comprehensive demographic information.

In early 2015, Yemen hosted approximately 248,000 refugees and a substantial population of third-country nationals (TCNs). The escalation in hostilities prompted IOM to organize large-scale TCN evacuations from Yemen.

On October 26, 2016, U.S. Ambassador Matthew H. Tueller re-issued a disaster declaration for Yemen for FY 2017 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 2016

## USAID/OFDA

<table>
<thead>
<tr>
<th>Implementing Partner</th>
<th>Activity</th>
<th>Location</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>IOM</td>
<td>Health, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Protection, Shelter and Settlements, WASH</td>
<td>Abyan, Aden, Ad Dali', Al Hudaydah, Al Mahrah, Hadramawt, Hajjah, Ibb, Lahij, Sana'a, Shabwah, Ta'izz</td>
<td>$7,500,000</td>
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<tr>
<td>FAO</td>
<td>Agriculture and Food Security, Humanitarian Coordination and Information Management</td>
<td>Hadramawt, Shabwah</td>
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<td>UNHAS</td>
<td>Logistics Support and Relief Commodities</td>
<td>Abyan, Aden, Al Hudaydah, Sana’a</td>
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<td>UNICEF</td>
<td>Logistics Support and Relief Commodities, Protection, Shelter and Settlements, WASH</td>
<td>Abyan, Aden, Al Bayda’, Ad Dali’, Al Hudaydah, Al Jawf, Amran, Hajjah, Ibb, Lahij, Marib, Sa’dah, Sana’a, Ta’izz</td>
<td>$15,000,000</td>
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<td>OCHA</td>
<td>Humanitarian Coordination and Information Management</td>
<td>Countrywide</td>
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<td>UN Population Fund (UNFPA)</td>
<td>Health, Protection</td>
<td>Abyan, Aden, Ad Dali’, Al Bayda’, Al Hudaydah, Al Jawf, Al Mahwit, Amanat Al Asimah, Amran, Hadramawt, Hajjah, Ibb, Lahij, Marib, Raymah, Sa’dah, Sana’a, Shabwah, Ta’izz</td>
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<td>WFP</td>
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<td>WHO</td>
<td>Health, Nutrition</td>
<td>Countrywide</td>
<td>$10,000,000</td>
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<tr>
<td></td>
<td>Program Support</td>
<td>Countrywide</td>
<td>$726,613</td>
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<tr>
<td><strong>TOTAL USAID/OFDA FUNDING</strong></td>
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## USAID/FFP

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<tbody>
<tr>
<td>Implementing Partners</td>
<td>Food Vouchers</td>
<td>Abyan, Ad Dali’, Al Hudaydah, Al Mahwit, Hajjah, Lahij, Sana’a, Ta’izz</td>
<td>$20,500,000</td>
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<td>UNICEF</td>
<td>420 Metric Tons of Ready-to-Use Therapeutic Food</td>
<td>Countrywide</td>
<td>$1,793,900</td>
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<tr>
<td>WFP</td>
<td>U.S. In-Kind Food, Food Vouchers, Local Purchase and Milling</td>
<td>19 Governorates</td>
<td>$174,694,500</td>
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<tr>
<td><strong>TOTAL USAID/FFP FUNDING</strong></td>
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## STATE/PRM

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<td>Health, Logistics Support and Relief Commodities, Shelter and Settlements, WASH</td>
<td>Countrywide</td>
<td>$6,000,000</td>
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</tbody>
</table>
IOM
Evacuation of Vulnerable Migrants from Yemen
Regional
$3,400,000

UNHCR
Camp Coordination and Camp Management, Logistics Support and Relief Commodities, Protection, Refugee Response, Shelter and Settlements
Countrywide
$28,800,000

UNHCR
Camp Coordination and Camp Management, Logistics Support and Relief Commodities, Protection, Refugee Response, Shelter and Settlements
Djibouti, Ethiopia, Somalia, Sudan
$10,750,000

TOTAL STATE/PRM FUNDING
$48,950,000

TOTAL USG HUMANITARIAN FUNDING FOR THE YEMEN RESPONSE IN FY 2016
$327,514,734

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, 2016.
2 USAID/OFDA funding represents anticipated or actual obligated amounts as of September 30, 2016.
3 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 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, dietary, and environmentally appropriate assistance.
- More information can be found at:
  - Information on relief activities of the humanitarian community can be found at www.reliefweb.int

USAID/OFDA bulletins appear on the USAID website at