Yemen – Complex Emergency

APRIL 15, 2022

SITUATION AT A GLANCE

<table>
<thead>
<tr>
<th>Population of Yemen</th>
<th>People in Need of Humanitarian Assistance</th>
<th>IDPs in Yemen Since March 2015</th>
<th>People in Acute Food Insecurity</th>
<th>Children Likely to Experience Wasting</th>
</tr>
</thead>
<tbody>
<tr>
<td>31.9 MILLION</td>
<td>23.4 MILLION</td>
<td>4.3 MILLION</td>
<td>17.4 MILLION</td>
<td>2.2 MILLION</td>
</tr>
<tr>
<td>IPC – March 2022</td>
<td>UN – March 2022</td>
<td>IPC – March 2022</td>
<td>IPC – March 2022</td>
<td>IPC – March 2022</td>
</tr>
</tbody>
</table>

- All parties to the Yemen conflict have agreed to a two-month truce that halts military operations and eases restrictions on civilian flights, fuel imports, and road movement. Meanwhile, the RoYG has transitioned to a new governance structure under a presidential council, and KSA offered $300 million in humanitarian aid.

- Persistent fuel shortages and subsequent fuel price increases have delayed food delivery by WFP in northern Yemen.

- The number of people experiencing acute food insecurity in Yemen is expected to increase from 17.4 million people to 19 million people in 2022.

- The USG has assisted nearly 43,000 internally displaced families with cash assistance since January.

TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING

For the Yemen Response in FY 2022

<table>
<thead>
<tr>
<th>USAID/BHA</th>
<th>State/PRM</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$561,387,945</td>
<td>$23,300,000</td>
<td>$584,687,945</td>
</tr>
</tbody>
</table>

For complete funding breakdown with partners, see detailed chart on page 5

1 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—IIPC 1—to Famine—IIPC 5—for acute food insecurity. A Famine—IIPC 5—classification applies to a wider geographical location, while the term classification of Catastrophe—also IPC 5—refers to a household. A household in Catastrophe has an extreme lack of food at the household level even with full employment of coping strategies.

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

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

RoYG and Al Houthi Officials Agree to Two-Month Truce

The Republic of Yemen Government (RoYG), backed by the Kingdom of Saudi Arabia (KSA)-led coalition, and Al Houthi officials agreed to a UN-facilitated two-month truce from April 2—the start of the Islamic holy month of Ramadan—until June 2, UN Special Envoy (UNSE) for Yemen Hans Grundberg announced on April 1. The agreement—the first nationwide truce since 2016—includes a cessation of offensive military operations by both parties. The truce also facilitates limited weekly commercial flights between Yemen’s Houthi-held Sana’a city and Egypt and Jordan, the entry of 18 fuel ships to ports in Al Hudaydah Governorate, and civilian road movement in Ta’izz Governorate and other areas of Yemen during the two-month period. The parties also agreed to engage with UNSE Grundberg on proposals for next steps towards ending the conflict. The truce came into effect amid separate, ongoing negotiations aimed at ending the conflict that occurred during a series of meetings hosted by the Gulf Cooperation Council in Riyadh, Saudi Arabia, from March 29 to April 7. At the conclusion of the meetings, RoYG President Abdrabbuh Mansour Hadi announced a presidential transition of power to the Presidential Leadership Council, viewed internationally as a critical step toward reaching broader agreements to end the conflict, according to international media. Also on April 7, the KSA and United Arab Emirates announced an economic support package of more than $2 billion to stabilize Yemen’s economy through the Central Bank of Yemen. The KSA also announced an additional $1 billion for fuel grants and development projects, and an additional $300 million towards the 2022 UN Humanitarian Response Plan for Yemen.

Fuel Crisis Impacts WFP Food Assistance Distribution in Northern Yemen

Fuel shortages and associated price increases are challenging the ability of the UN World Food Program (WFP) to distribute food assistance, particularly in northern Yemen. Commercial fuel prices have increased significantly in recent months, according to WFP. Prior to April, the KSA-led coalition had severely limited the entry of commercial fuel imports through Al Hudaydah Port, contributing to fuel shortages in northern Yemen and resulting in increased food, fuel, and transportation prices. Additionally, the ongoing Government of the Russian Federation invasion of Ukraine that began in late February has increased global fuel prices in recent weeks. WFP-contracted transporters had exhausted nearly all contingency fuel supplies by late March, forcing transporters to buy commercial fuel and increasing WFP’s operational costs. WFP experienced significant delays in reaching food distribution points during its March distribution cycle, with transporters carrying food commodities delayed by significant waiting periods at fuel stations.

IPC Analysis Projects Increased Acute Food Insecurity for Yemen

Acute food insecurity is likely to worsen across Yemen during the second half of 2022, according to the latest IPC analysis. Approximately 17.4 million are currently experiencing Crisis—IPC 3—or worse levels of acute food insecurity, including an estimated 31,000 people currently facing Catastrophe levels of acute food insecurity. The number of people experiencing Crisis or worse levels of acute food insecurity will likely increase to 19 million people—including approximately 161,000 people experiencing Catastrophe levels—between June and December, according to the IPC. In addition, approximately 2.2 million children younger than five years of age and 1.3 million pregnant and lactating women (PLW) are likely to experience wasting—the deadliest form of malnutrition—in 2022, according to the report. While conflict remains the primary driver of both food insecurity and malnutrition in Yemen, the country’s economic crisis and the depreciation of the Yemeni riyal in RoYG-held areas have also resulted in higher food prices, further exacerbating food insecurity. Furthermore, funding shortages have
forced WFP to reduce food rations for 8 million people countrywide since early January, and the ongoing conflict in Ukraine has threatened to limit Yemen’s wheat imports from Russia and Ukraine; Yemen sourced approximately 30 percent of its wheat imports from Ukraine in 2021, according to the UN.

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**U.S. GOVERNMENT RESPONSE**

**FOOD SECURITY**

USAID/BHA has provided more than $422 million to date in FY 2022 to support WFP food assistance activities in Yemen and supports 10 international non-governmental organizations (INGOs) to implement food security programming in the country. USAID/BHA partners are providing emergency food assistance through in-kind food aid, including U.S.-sourced commodities, as well as cash and vouchers for people to buy food in local markets. By providing food and other basic goods and services, partners are also helping to reduce household expenditures, thereby strengthening purchasing power among vulnerable households. USAID/BHA partners in Yemen aim to provide emergency food assistance to nearly 13 million people per month.

**HEALTH**

The U.S. Government (USG) supports the International Organization for Migration (IOM), Office of the UN High Commissioner for Refugees (UNHCR), UN Children’s Fund (UNICEF), UN Population Fund (UNFPA), and 11 INGOs to conduct life-saving health care interventions amid Yemen’s ongoing conflict and the coronavirus disease (COVID-19) pandemic. USG partners are providing primary health care services, often in coordination with nutrition and water, sanitation, and hygiene (WASH) programming, through static health facilities and mobile medical teams serving hard-to-reach areas. USG partners also support community health volunteers to encourage people to seek health care services when needed, thereby promoting better health outcomes. In addition, USAID/BHA partners are providing incentive payments to health care workers and medical supplies and pharmaceuticals to health facilities to expand local access to quality health care services. Meanwhile, State/PRM is supporting IOM and UNHCR to address the specific health care needs of internally displaced persons (IDPs), migrants, refugees, and other vulnerable populations in Yemen. In February and early March, UNHCR supported a national oral polio vaccine campaign, deploying mobile health workers to administer vaccinations that reached 2,000 children in Aden and Lahj governorates.

**MPCA**

The USG supports the provision of multipurpose cash assistance (MPCA) to help conflict-affected households in Yemen meet their basic needs while also supporting local markets. With State/PRM support, UNHCR is distributing MPCA to IDPs and refugees across Yemen to increase household purchasing
power amid COVID-19-related economic shocks and restrictions. UNHCR has supported nearly 43,000 internally displaced families and more than 8,000 refugee families with MPCA since the beginning of 2022. USAID/BHA partners are also providing MPCA to enable vulnerable households to procure cooking gas, food, hygiene items, and other essential commodities.

**NUTRITION**

USAID/BHA supports partners to identify, prevent, and treat wasting across Yemen. Working with UNICEF, WFP, and 12 INGOs, USAID/BHA is assisting community- and evidence-based programs to decrease morbidity and mortality resulting from malnutrition, with a particular focus on children and PLW. Additionally, USAID/BHA provides nutrition support for health clinics and mobile health teams, integrating health, nutrition, and WASH interventions to comprehensively assist affected populations.

**PROTECTION**

Through support to IOM, UNFPA, UNHCR, and six INGOs, the USG is furthering critical protection interventions across Yemen. USAID/BHA partners work to address child protection and psychosocial support (PSS) needs, prevent and respond to gender-based violence, and respond to protection concerns and violations through specialized case management services, community mobilization activities, and protection risk mitigation efforts. With State/PRM funding, UNHCR leads the Protection Cluster and provides protection services to meet the needs of IDPs, refugees, and other vulnerable populations countrywide, including through PSS activities and legal assistance to facilitate access to identity documents and public assistance. Moreover, the USG requires partners to incorporate protection principles into USG-supported interventions in Yemen and promote meaningful access, dignity, and safety for beneficiaries.

**WASH**

The USG supports IOM, UNHCR, UNICEF, and 15 INGOs to expand local access to safe drinking water and prevent and respond to communicable disease outbreaks. USAID/BHA partners conduct critical WASH interventions—including distributing hygiene kits, promoting hygiene activities, providing water trucking services, and rehabilitating water systems damaged by conflict—for IDPs and other vulnerable populations. State/PRM partners provide WASH interventions to meet the needs of conflict-affected populations, as well as migrants and refugees in Yemen originating from the Horn of Africa.
CONTEXT IN BRIEF

- Between mid-2004 and early 2015, conflict between the RoYG and Al Houthi opposition forces in northern Yemen affected more than 1 million people, generating widespread and repeated displacement and exacerbating 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. Ongoing conflict since 2015 has damaged and destroyed public infrastructure, interrupted essential services, and reduced commercial imports to a fraction of the levels required to sustain the Yemeni population, as Yemen typically imports much of its food supply.

- Since March 2015, the conflict—along with an economic crisis, high levels of unemployment, protracted instability, and rising food and fuel prices—has left approximately 20.7 million people in need of humanitarian assistance, including approximately 12.1 million people in acute need. In addition, the conflict has displaced more than 4 million people, an estimated 1.3 million of whom have since returned to their areas of origin, according to a November 2018 IOM assessment. The volatility of the current situation has impeded relief agencies from obtaining accurate, comprehensive demographic data on conflict-affected populations.

- On November 3, 2021, U.S. Chargé d’Affaires Catherine Westley redeclared a disaster for Yemen for FY 2022 due to continued humanitarian needs resulting from the complex emergency and the impact of the country’s economic and political crises on vulnerable populations.

<table>
<thead>
<tr>
<th>IMPLEMENTING PARTNER</th>
<th>ACTIVITY</th>
<th>LOCATION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>USAID/BHA</td>
<td>Food Assistance; Health; Humanitarian Coordination, Information Management, and Assessments (HCIMA); MPCA; Nutrition; Shelter and Settlements; WASH</td>
<td>Abyan, Aden, Amanat Al Asimah, Amran, Al Bayda', Ad Dali', Al Hudaydah, Al Jawf, Al Mahrah, Al Mahwit, Hadramawt, Hajjah, Ibb, Lahij, Marib, Sa'dah, Sana'a, Shabwah, Socotra, Ta'izz</td>
<td>$85,040,847</td>
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<tr>
<td>IOM</td>
<td>HCIMA; Health; MPCA; Protection; Shelter and Settlements; WASH</td>
<td>Countrywide</td>
<td>$5,000,000</td>
</tr>
<tr>
<td>UNICEF</td>
<td>1,390 metric tons (MT) of U.S. In-Kind Nutrition Aid</td>
<td>Abyan, Aden, Amran, Al Bayda', Ad Dali', Al Hudaydah, Al Jawf, Al Mahrah, Al Mahwit, Dhamar, Hadramawt, Hajjah, Ibb, Lahij, Marib, Sa'dah, Sana'a, Shabwah, Socotra, Ta'izz</td>
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<td>WASH</td>
<td>Countrywide</td>
<td>$10,077,910</td>
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<td>UN Office for the Coordination of Humanitarian Affairs (OCHA)</td>
<td>HCIMA</td>
<td>Countrywide</td>
<td>$3,000,000</td>
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<tr>
<td>WFP</td>
<td>Food Assistance—390,880 MT of U.S. In-Kind Food Aid</td>
<td>Countrywide</td>
<td>$387,995,766</td>
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<tr>
<td></td>
<td>Food Assistance—Vouchers; Logistics Support; Nutrition</td>
<td>Countrywide</td>
<td>$65,000,000</td>
</tr>
<tr>
<td></td>
<td>Program Support</td>
<td></td>
<td>$159,386</td>
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<tr>
<td>TOTAL USAID/BHA FUNDING</td>
<td></td>
<td></td>
<td>$561,387,945</td>
</tr>
<tr>
<td>STATE/PRM</td>
<td>Health, Protection</td>
<td>Countrywide</td>
<td>$8,700,000</td>
</tr>
</tbody>
</table>
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:
  - USAID Center for International Disaster Information: cidi.org
  - 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