

UNFPA Response in Yemen

SITUATION REPORT



A post-partum mother with her newborn child at a UNFPA-supported health facility in Aden, Yemen ©UNFPA Yemen

FAST FACTS



18.2M

In need of humanitarian assistance



17.6M

In acute need



17.8M

In need of health assistance



16.4M

Food insecure



4.5M

Internally displaced



5.5M

Women of reproductive age (15-49 yrs)



2.7M

Malnourished pregnant & lactating women



6.36M

Women in need of GBV protection

HIGHLIGHTS: JANUARY- MARCH

After nine years of conflict, the needs in Yemen remain immense. Over half of the country's population, **18.2 million people**, require some form of **humanitarian assistance in 2024**, with recent regional conflict dynamics escalating risks.

Among the **4.56 million displaced in Yemen**, women and children constitute an estimated 80 per cent. More than **6.36 million women and girls face increased risks of various types of violence**, including harmful practices. Insufficient access to comprehensive services for gender-based violence compounds the issue, with rural areas lacking such services by 90 per cent.

An estimated **17.8 million individuals require healthcare assistance in 2024**. Among them, **5.5 million women of reproductive age face challenges in accessing reproductive health services**; while **2.7 million pregnant and breastfeeding women** are projected to require treatment for acute malnutrition. Only one out of five functioning facilities offers maternal and child health services, highlighting the urgent need for increased healthcare capacity.

A surge in the incidence of acute watery diarrhoea and cholera, with more than 18,600 cases and 109 related deaths has been reported since March 2024 in 18 of the 22 governorates. UNFPA's rapid response and reproductive health teams are working closely with health partners in the response, helping to address the needs in particular of pregnant women, who are at increased risk.





In 2024, UNFPA aims to raise **US\$70 million to maintain its critical support for women and girls**. UNFPA's appeal is currently funded at 37 per cent.

Since the beginning of the year, **UNFPA's response reached over 350,000 individuals with life-saving reproductive healthcare, protection information and services and emergency relief**, with support to 103 health facilities, 36 safe spaces, eight shelters and seven specialized mental health centres.

UNFPA GOVERNORATE RESPONSE

UNFPA's interventions cover 20 of the 22 governorates in Yemen. Overall coordination is handled by UNFPA's office in Sana'a. In other governorates, joint UN humanitarian hubs coordinate. UNFPA has presence in all operational UN humanitarian hubs. Services provided and people reached from January to March are detailed below:

HIGHLIGHTS: JAN- MAR 2024

 <p>284,409 WOMEN REACHED WITH REPRODUCTIVE HEALTH SERVICES</p>	 <p>56,599 WOMEN REACHED WITH PROTECTION INFORMATION & SERVICES</p>	 <p>103 HEALTH FACILITIES SUPPORTED WITH RH SERVICES</p>	 <p>36 WOMEN AND GIRLS SAFE SPACES SUPPORTED</p>
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GOVERNORATE

PEOPLE REACHED

SERVICES DELIVERED

	Women reached with reproductive health services	Women reached with protection information & services	Health facilities supported with RH services	Women and girls safe spaces supported
Abyan	11,775	409	3	1
Aden	6,525	786	3	1
Al Bayda	13,792	311	5	1
Al Dhale'e	8,596	0	3	0
Al Hudaydah	20,210	6,031	12	5
Al Jawf	13,191	435	7	1
Al Maharah	1,347	478	1	1
Al Mahwit	12,960	262	4	1
Amanat Al Asimah	5,679	1,650	2	1
Amran	3,330	1,270	4	1
Dhamar	4,753	460	3	0
Hadramaut	4,509	2,333	4	2
Hajjah	40,069	5,968	10	3
Ibb	26,684	2,476	7	3
Lahj	370	670	1	1
Marib	40,660	5,937	9	5
Sa'ada	9,106	406	7	1
Sana'a	0	35	0	1
Shabwah	14,091	1,271	4	1
Taizz	46,387	4,245	11	5
Raymah	375	137	3	1
Socotra	0	0	0	0

FOOD INSECURITY ADDS TO THE STRUGGLES OF CHILDBIRTH IN YEMEN

"Shoaiah, 33, lives in a mountainous village in Hajjah Governorate with almost no basic services. Shoaiah's husband suffers from a mental illness and as a result work has been irregular. "Life has been a struggle. Many nights we sleep hungry. We have no money to buy food or clothes, but I lived in hope of raising a child," tells Shoaiah.

For 18 years, Shoaiah dreamt of having a baby, but she was severely malnourished and failed to get pregnant, but she never lost hope, until she fell pregnant. "Every day, I woke up with fear of losing my baby. I knew my body was too weak, and I did not have any way of getting health services," adds Shoaiah.

Six months into her pregnancy, she met with a malnutrition community volunteer who immediately referred her to Qafil Shamr Hospital. At the hospital, Shoaiah was provided with antenatal care as well as medication for acute malnutrition. Soon, Shoaiah began to recover and stabilize her pregnancy.

When Shoaiah went into labour, her family rushed her to the hospital, knowing that they would be able to receive free reproductive health services. In the delivery room, Shoaiah's weak body from years of severe malnutrition did not have the strength for a normal delivery and the pulse rate of the baby could no longer be felt. The medical team at the hospital rushed Shoaiah for a caesarean section and safely delivered a healthy boy. When Shoaiah gained consciousness, she cried in disbelief while holding her baby.

"At heart of despair, there is always hope," tells Shoaiah. I am so grateful to this hospital for helping to fulfil my dreams and for saving my life and my child's," she added.

RAPID RESPONSE MECHANISM (RRM)

UNFPA is leading the efforts of three agencies i.e. UNFPA, UNICEF and WFP to distribute immediate, most critical life-saving emergency supplies to families who are newly displaced, on the move, in hard-to-reach areas or stranded close to the front lines. The RRM minimum assistance package is comprised of these components: (1) ready to eat food provided by WFP; (2) family basic hygiene kits provided by UNICEF; and (3) one female dignity/transit kit provided by UNFPA. A total of 1,953 RRM kits were distributed from January to March 2024. Other highlights for the period June 2018 to March 2024 include:

- HIGHLIGHTS FROM JUNE 2018 TO MARCH 2024**

Since June 2018, RRM kits were delivered to **658,989 families (4.6 million individuals)**.

257,517 RRM kits distributed through the **Al Hudaydah** humanitarian hub from June 2018 to March 2024.

167,980 RRM kits distributed through the **Aden** humanitarian hub from June 2018 to March 2024.

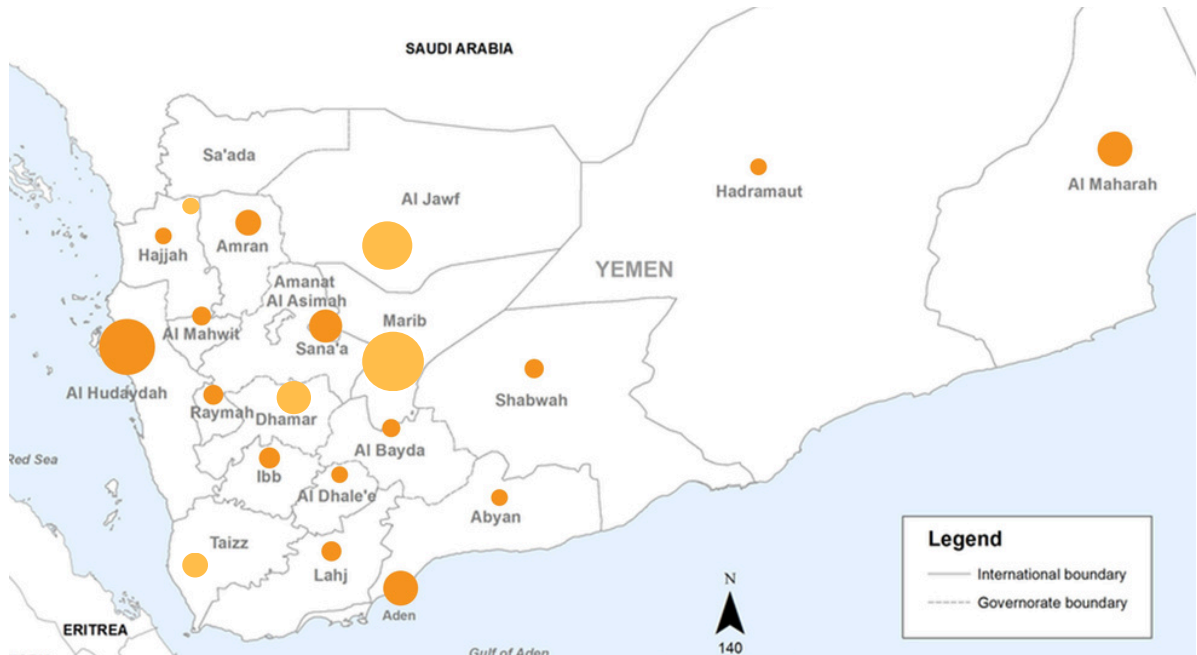
102,482 RRM kits distributed through the **Sana'a** humanitarian hub from June 2018 to March 2024.

33,018 RRM kits distributed through the **Ibb** humanitarian hub from June 2018 to March 2024.

97,992 RRM kits distributed through the **Sa'ada** humanitarian hub from June 2018 to March 2024.



Distribution of rapid response kits to flood-affected families. ©UNFPA Yemen



The RRM is operational country-wide. The map indicates RRM distribution by governorate and volume of distribution.
Donors to the RRM: European Union Humanitarian Aid, USAID Bureau for Humanitarian Assistance and Central Emergency Response Fund

IN THE NEWS

PEOPLE REACHED

	NO.
No. of people reached with reproductive health services	284,409
No. of safe deliveries supported	21,138
No. of cesarean sections supported	5,095
Individuals reached with family planning services	24,690
Dignity kits distributed	1,954
Individuals reached through the Rapid Response Mechanism	13,671
No. of women reached with protection information & services	56,599
No. of health facilities supported with reproductive health services	103
No. of safe spaces supported	36
No. of women shelters supported	8
No. of supported specialized psychological care centres	7



Yemen's camel ambulances
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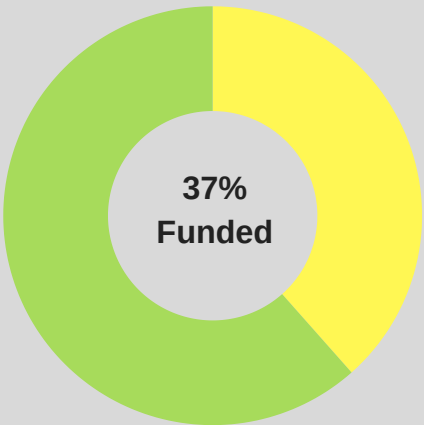
Overview of UNFPA's Humanitarian Response for Yemen in 2024
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UNFPA offers counselling and support to abandon female genital mutilation in Yemen
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2024 UNFPA RESPONSE FUNDING STATUS (US\$)

\$70 M
REQUIRED
\$26.1 M
FUNDED
\$43.9M
FUNDING GAP



2024 Donors (alphabetical order): CERF, European Union, Iceland, Japan, KSrelief, Netherlands, Norway, USAID, Yemen Humanitarian Fund

KEY CHALLENGES

- A non-permissive operating environment with limited humanitarian access and shrinking humanitarian space.
- Limited funding available for the continued provision of humanitarian services .
- Lack of national resources for the provision of basic social services.
- Lack of health workers in severely conflict-affected areas.
- Increasing restrictions imposed on implementing partners for humanitarian operations in conflict-affected areas.
- Delays in transportation of supplies due to bureaucratic impediments.