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HIGHLIGHTS

- The blockade of critical airports and seaports is impacting humanitarian and commercial supply pipelines affecting millions.
- Suspected cholera cases have declined across Yemen but the threat of cholera remains.
- Humanitarian assistance has reached 2.3 million people in areas covered by Aden hub.
- The YPF 2nd allocation has provided US\$70 million to fund 49 projects in 15 governorates.



IDPs in Yemen live without the most basics. Photo: OCHA Yemen

FIGURES

Total population	27.4 m
Total people in need of humanitarian assistance	20.7 m
Total people in acute need of humanitarian assistance	9.8 m
# of people displaced (IDPs & returnees)	2.9 m
# of deaths (WHO)	8,673
# of injuries (WHO)	49,963

Source: PMR, May 2017; WHO (as of 15 Sept. 2017).

FUNDING

\$2.3 billion requested

\$1.3 billion funding against HRP

55.9 per cent funded
(15 November 2017)

Source: FTS, November 2017

A blockade compounds a life-threatening crisis

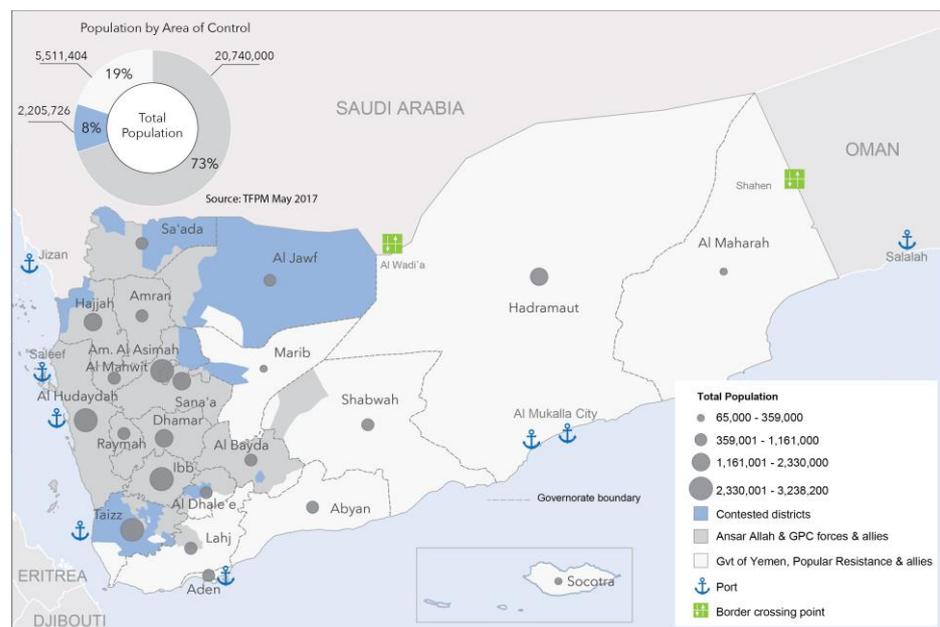
Humanitarian and commercial supply pipelines are disrupted

Yemen is the world's largest food security crisis; 17 million people are food insecure while a staggering seven million people do not know where their next meal is coming from and are at risk of famine. The country relies almost completely on commercial imports to meet the food needs of its people. The closure of critical seaports and airports enforced since 6 November 2017 by the Saudi-led coalition has disrupted both the humanitarian and commercial supply pipelines with life-threatening consequences for the Yemeni population.

Yemen requires monthly food imports of approximately 350,000 MT (of which 75,000 MT is humanitarian imports). About 80 per cent of these imports arrive through Al Hudaydah and Saleef ports, which together have a total handling capacity of 660,000 MT per month. The continuing functioning of these ports is essential to sustain the relief operation in Yemen.

Seaports and airports in areas under the control of the Government of Yemen re-opened on 12 November, however these ports lack the capacity to handle the amounts of commercial and humanitarian cargo previously handled by Al Hudaydah and Saleef ports. Additionally, as shown in the map below, any shipment bound to northern Yemen would have to cross active conflict frontlines to reach areas with people in need, thus increasing transport costs and security risks for aid workers.

Port locations relative to population concentration (as of Apr 2017)



Sources: GoY/MoL/CSO, TFPM

“The humanitarian situation in Yemen will turn catastrophic and lead to loss of more lives, if all the closed sea, air and land ports are not re-opened immediately” Executive Directors of WHO, UNICEF, WFP

Stocks of rice and wheat in Yemen are expected to run out in about three months, if the current blockade persists.

Four days after the blockade was announced, prices of fuel, food and water increased dramatically across Yemen

Critical supplies, including medicines, are blocked from entry

As of 15 November, the blockade had prevented almost half a million MT of food and fuel on 29 vessels from reaching Yemen. Nine vessels that had received clearance from the UN Verification and Inspection Mechanism (UNVIM) were forced to leave Al Hudaydah's port anchorage area before offloading their cargo. Four other vessels, which had been cleared and were *en route* to Al Hudaydah, were denied entry to the port on 13 November. Inside Yemen, commercial and humanitarian food supplies have run low. Fuel, food, cooking gas and trucked water prices have skyrocketed, further hurting already impoverished families. Volatile fuel prices are driving up transport costs across the country. As of 20 November, the preliminary impact of the blockade on key sectors is briefly summarised as it follows:

Price of fuel: With limited supplies available, the prices of fuel and petrol have skyrocketed, registering a 170 per cent increase on the informal market. The increase in fuel prices has in turn led to an increase in the price of trucked water by 133 per cent in Sana'a. This will further increase the vulnerability of millions of Yemenis with limited access to water and threatens to reverse the gains made in combating cholera. WHO reports that 15 health facilities had to shut down due to lack of water. Fuel shortages has also implication on commodities' prices since transport of commodities becomes more expensive. Fuel is also required to mills grains into flour.

Health: Critical medical supplies, including vaccines and treatment to control the spread of the cholera epidemic, remain blocked from entry in Djibouti, putting at risk the lives of millions of people. Failure to deliver maternal medical supplies, will threaten the lives of 400,000 pregnant women and their new born children, including 53,000 at immediate risk of complications during childbirth.

Food: Even with a partial lifting of the blockade, WFP estimates that an additional 3.2 million people will be pushed into further food insecurity. If new supplies fail to arrive 150,000 malnourished children could die within the coming months.

Refugees' repatriation: Three boat trips planned by UNHCR and IOM to transport at least 329 refugees from Aden back to Somalia has had to be postponed.

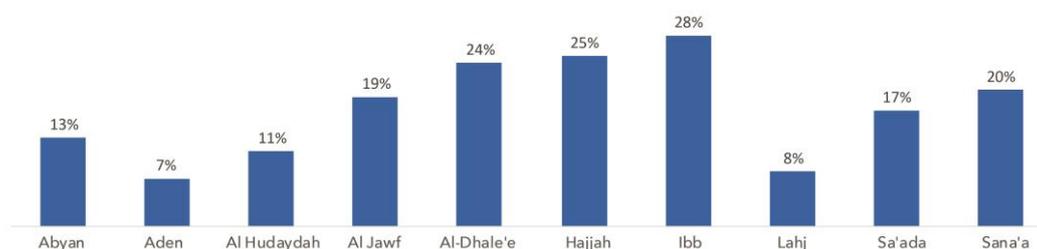
Movement of aid workers: Approximately 400 aid workers remain stranded in Djibouti, Amman, Sana'a and other locations as their flights have been cancelled.

Impact of the blockade on households

Food has become unaffordable for most Yemenis

While stock levels of wheat and rice in Yemen are expected to last two to three months, due to rapid price inflation, the impact of the blockade on the most vulnerable households has already been felt across the entire country, with average increase in the food basket ranging from eight to 28 per cent. Their food security situation is likely to worsen.

Average % increase in price of Basket of Household Basic Items by Governorate 06/11/17 to 10/11/17



Source: ACTED, Oxfam, ACF and FewsNet. Nov. 2017

The cruel reality of many Yemenis for the past two and half years is that while millions of them do not know how to feed their children, food has continued to be available in the markets, but at a price they can no longer afford. By mid-July, of the 19.7 million people affected by the conflict, at least 10.3 million people, or 35 per cent of Yemen's population, were assessed as needing immediate humanitarian assistance to save and sustain their lives. These people who were previously surviving day-to-day by undertaking coping mechanisms, such as not eating every day or accessing contaminated water sources, will

More than 70 per cent of families in Yemen have no food stocks. The current food price increases will have an immediate negative effect on their food security and nutrition status.

be hit by the increasing costs of living. This will result in them having to make further hard decisions on how to use their decreasing resources.

A rapid market price monitoring exercise by ACTED, Oxfam, ACF and FewsNet undertaken four days after the imposition of the blockade, found immediate dramatic increases in prices of essential items (wheat, cooking oil, clean water and cooking fuel). These goods had already increased in price over the last two years, but with a 21 per cent average increase across the country, the current spike in prices is unprecedented.

FAO reports that more than 70 per cent of families have no food stored stocks and are purchasing food as-needed on a daily basis. Price increases will therefore have an immediate negative effect on their food security and nutrition status.

Seventy percent of the population are living at or below the poverty line¹. This is the result of the stoppage of most public salary payments, and an economy that has contracted by 46 per cent, according to estimations by the Economist Intelligence Unit. Businesses have on average reduced operating hours by 50 per cent compared to the pre-crisis period, leading to layoffs that are estimated at 55 per cent of the workforce. Large-scale unemployment has resulted in the daily labour wage remaining unchanged in the last two years while the costs of essential good had increased dramatically.

ERC warns of a famine in Yemen

In October, the ERC travelled to Aden, Lahj, Sana'a, Al Hudaydah, Hajjah and Amran governorates

At the end of his five days visit to Yemen, Mark Lowcock, UN Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator (ERC) reaffirmed that the UN and partners have the capacity to further scale up, but require more generous and timely donor financing. He also called for a commitment by all parties to do all they can to help facilitate humanitarian work. During the mission, the ERC travelled to six governorates and met officials in Aden and Sana'a.

"Everywhere I went, I saw roads, bridges, factories, hotels, and houses that had been destroyed by bombing or shelling," the ERC said. "I visited hospitals in Lahj and Al Hudaydah. Both had barely any electricity or water. In Hudaydah, I met seven-year-old Nora. She weighs 11 kg – the average weight for a two-year-old, not a seven-year-old. Dr. Khaled, the manager of Al Thawra hospital, where she is being treated, said staff there regularly turn away gravely ill malnourished children because they cannot accommodate them.



ERC Lowcock being briefed on the situation in Yemen. Photo: OCHA

"I met some of the three million people who have been forced to flee their homes, and I witnessed their dreadful living conditions. In a settlement for IDPs in Abs district, Hajjah, I met Fatima, 25. She fled with her family from Sa'ada. They used to make a good living from their small farm. Fatima now expects to have her seventh child this month, in her ragged tent made of plastic sheeting with inadequate medical supervision. Her

husband is disabled and cannot work. They survive by begging, and from humanitarian assistance. Women and girls have been hard-hit in this crisis. Before the conflict, gender-based violence was widespread in Yemen, with millions of girls and women at risk. But the incident rate has risen since the conflict began."

The ERC emphasized that ending the suffering requires a political resolution to the crisis. He called on authorities in Aden and Sana'a to uphold commitment made to ensure that

Management of Al Thawra in Hudaydah regularly turn away malnourished children because the facility is overwhelmed and cannot accommodate them. USG Lowcock

Those in positions of authority in Aden and Sana'a need to ensure unhindered humanitarian access so that assistance can reach all people in need

¹ World Bank assessments, 2017

humanitarian assistance reaches everyone in need; salaries are paid to public servants; Sana'a airport is re-opened to commercial traffic and improvement in the operation of ports, especially Al Hudaydah.

He further called on Member States who support and have influence over the Yemeni parties to do more to ensure compliance by all with international humanitarian law and protection of the civilian population. On 8 November, following the briefing to the UN Security Council, the USG told media that unless the blockade is lifted and five particular measures are taken there will be famine in Yemen. The five measures include:

I have told the Council that unless those measures are lifted – and five particular steps – are taken, there will be famine in Yemen. It will be the largest famine the world has seen for many decades, with millions victims. USG Lowcock.

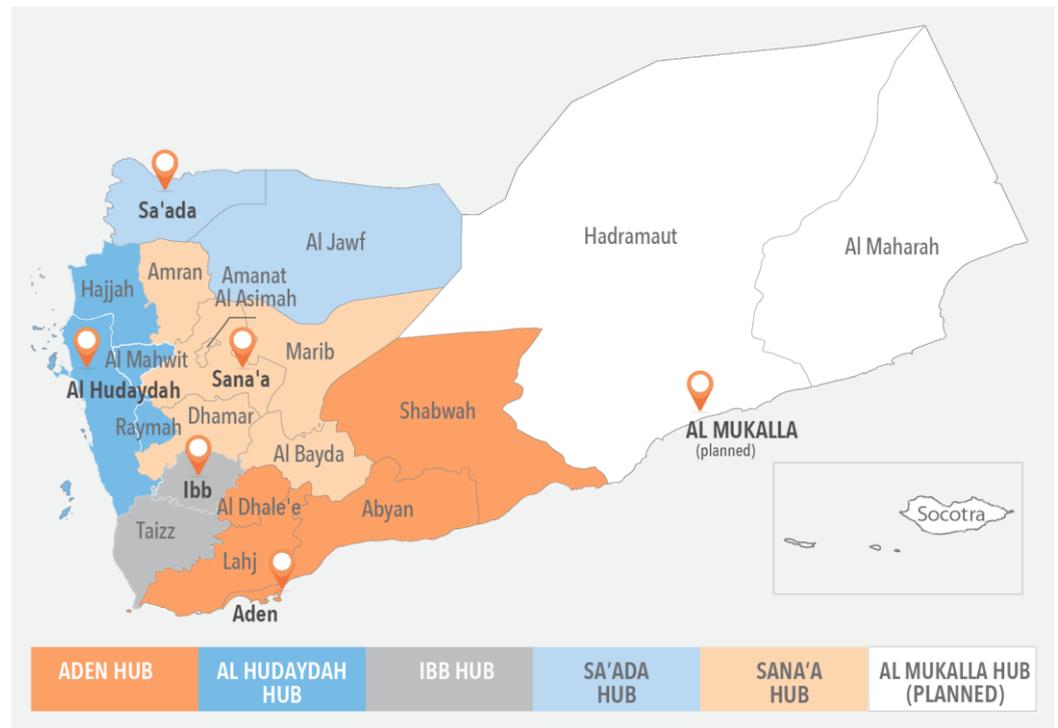
1. Firstly, an immediate resumption of the regular UN and other humanitarian partners' air services to Sana'a and Aden.
2. Secondly, a clear and immediate assurance that there will be no further disruption to these air services.
3. Thirdly, immediate agreement to the repositioning of the WFP – the World Food Programme – vessel in the water off Aden, and assurances that there will be no further disruption to the functions that it supports.
4. Fourth, an immediate resumption of humanitarian and commercial access to all the seaports of Yemen – especially for food, fuel medicines and other essential supplies.
5. And fifth, a scaling back of interference with, delays to or blockages of all vessels that have passed inspection by UN Verification and Inspection Mechanism so that they can proceed to port as rapidly as possible.

The role of hubs in aid coordination: Aden

Despite the challenging environment, humanitarian partners in Yemen continue to deliver assistance out of five humanitarian hubs: Aden, Al Hudaydah, Ibb, Sa'ada, and Sana'a. Since August 2017, direct assistance has been delivered to at least 7 million people with the most acute needs on a monthly basis. The aim of the hubs is to improve the effectiveness of the response by ensuring needs assessments, coordination, response planning and monitoring and evaluation take place closer to the populations in need,

As of November 2017, 133 humanitarian partners are operational across Yemen, of which 91 are national NGOs, 34 international NGOs and eight UN agencies – an increase of six in the last three months. The highest numbers of humanitarian partners are found in Amanat Al Asimah (53), Aden (48), Taizz (48), Sana'a (46), Hudaydah (41), Amran (40), Hajjah (40) and Ibb (39). Access is a key determinant of operational effectiveness. Many international partners work with national organisations, which often have a better understanding of the situation and have easier access to people in need.

Map showing humanitarian hubs with their governorates coverage



Source: UNOCHA

Aden hubs coordinates assistance in five governorates where humanitarian partners reached over 2.3 million people with assistance from January to August

Humanitarian assistance has reached 2.3 million people in areas covered by Aden hub

Aden hub coordinates the humanitarian response in the southern governorates of Abyan, Aden, Al Dhale'e, Lahj and Shabwah. The hub also covers the governorates of Hadramaut, Al Maharah and Socotra until security allows for the establishment of the Mukalla hub. Needs across these governorates are staggering: 3.1 million people need humanitarian assistance, of whom 1.8 million are in acute need; 66 per cent of the population is food insecure, 365 out of 786 health facilities are either partially functional or non-functional, 260 schools have been affected by the conflict and about 159,000 people are displaced from their homes. Between January and August 2017, over 2.3 million people were reached by 57 partners with humanitarian assistance. In Abyan, 69 per cent of people targeted for assistance had been reached by all clusters as of August, while 74 per cent were reached in Shabwah. The humanitarian community aims to expand operations to reach more people in these governorates with a comprehensive package of assistance.

Cholera decreases across Yemen

Some treatment centres close down as the incidence of cholera reduces

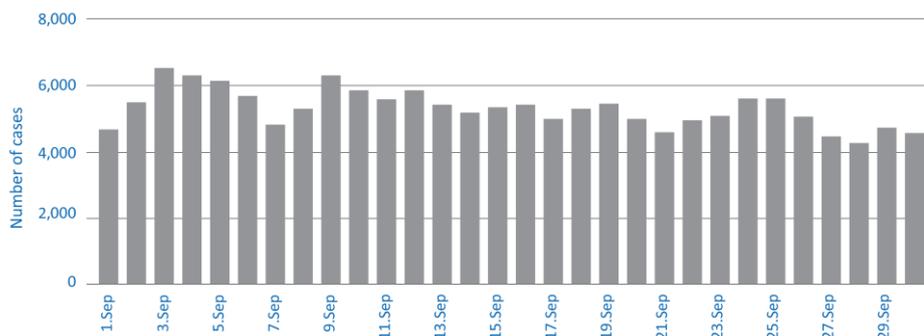
By 15 November, the total reported suspected cholera cases in Yemen since 17 April had reached 926,084 with 2,202 associated deaths. However, the decrease in reported cases has prompted a reduction of cholera response activities.

MSF reports that weekly admissions at cholera treatment centers declined from 11,139 in the third week of June – at the peak of the outbreak – to 567 in the second week of October; only nine per cent of patients admitted towards the end of October needed to be hospitalized. In Khamir, Amran governorate, no positive cases have been confirmed since September. As a result, the medical organization reduced the capacity of several of its facilities.

Since the threat of cholera is not over, health partners are maintaining 3,551 beds in 213 Diarrhoea treatment centres (DTCs) and 937 Oral Rehydration Corners (ORCs) in 234 affected districts in 20 governorates. There is, however, fear that the current blockade could again lead to a spike in the cholera epidemic by blocking the delivery of much needed medical supplies.

Weekly admission of cholera cases at MSF treatment centers declined from 11,139 in the third week of June – when the outbreak was at its peak – to 567 in the second week of October

Suspected cholera cases reported in September 2017



WHO Situation report no. 40 (Sep. 2017)

YHF provides US\$70 m for projects

35 of 49 approved projects to be implemented by national NGOs

The OCHA-managed Yemen Humanitarian Fund (YHF) has released \$70 million to provide life-saving activities across Yemen. Ninety-five districts in 15 governorates, including under-served governorates like Hajjah, Taizz and Sa'ada, Lahj, Al Bayda, Al Dhale'e and Shabwah are being prioritised for funding. These districts are extremely vulnerable due to the convergence of malnutrition, food insecurity and high level of displacement or returns.

This allocation will fund 49 projects to be implemented by four UN Agencies (\$11 million), 12 International NGOs (\$24.5 million) and 35 national NGOs (\$33.8 million). The allocation was agreed through a consultation process launched by the Humanitarian Coordinator in August 2017, and involving clusters and other partners at national and governorate-level.

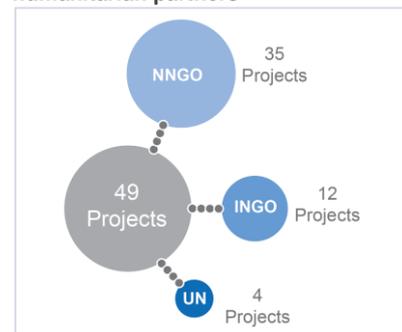
Three funding envelopes were devised to meet the most pressing humanitarian needs in a comprehensive way. The first envelope (\$45 m) aims to address the underlying and immediate causes of food insecurity and malnutrition by ensuring adequate access to food, nutrition, health and WASH by those most vulnerable. The second (\$20m) envelope will support an integrated response for the most vulnerable IDP, returnee and host family communities by ensuring access to a minimum package that includes adequate shelter, non-food items, camp management, food, WASH, health, nutrition and protection services. The third envelope (\$5 m) aims to support partners in the on-going cholera response.

The fund, which was established in 2015, has received \$116 million from 18 donors so far in 2017, in addition to a carry-over of \$22 million from 2016. Some \$60 million were allocated earlier this year.

With over \$128 million allocated in 2017, the Yemen Humanitarian Fund is the largest country based pooled fund globally.

YHF will give priority to projects in the 95 districts found in 15 governorates that are extremely vulnerable due to the convergence of malnutrition, food insecurity and high levels of displacement or returns.

Number of projects implemented by humanitarian partners



Source: UNOCHA humanitarian finance unit

Stories of two families who benefitted from an emergency shelter, WASH, and food assistance project funded by OCHA-managed Yemen Humanitarian Fund, and implemented by ACTED.

Taizz IDPs struggling to cope

Uloom, 30, is a widow and a mother of six; five daughters and a son. Together with her family, Uloom had to abandon her home in Almwaredah village, At Taiziah district in Taizz governorate, fleeing airstrikes and fighting in the area.

The family left their village with only the clothes they were wearing, and settled in a nearby, somewhat more peaceful village. Uloom rented a small shop, but the business is struggling and cannot sustain the family's basic needs such as food, water and medicines.

To ease the burden, Uloom decided to marry off her three young daughters. "I didn't have money and couldn't feed all of the children," she said. "I didn't want to marry off my daughters so young, but I couldn't stand them crying and starving. I regret what I did very much, especially when I see them suffer from the bad behaviour of their husbands."

Uloom mainly depends on donations from neighbours for survival. Whatever she gets helps her pay the rent for the shop and buy food. "I try to use one onion for the whole week," she said, as tears welled up in her eyes. "Food has become so expensive. We eat a small amount and save the rest."

On days when she does not get enough money or assistance from other people, Uloom goes to the market to borrow foodstuffs. "I would prefer to die than beg," she said. "Some days, the children go to sleep with an empty stomach."

Like Uloom, Mohammed, 65, was displaced by fighting from Taizz and moved to Mahjer village, Thi Sofal district in Ibb governorate. Here, Mohammed and his family live with other IDPs in a school.

Disabled by a blood clot, the former soldier can no longer work and does not receive any salary. His wife is anaemic and one of their three sons is disabled. One of their three daughters is divorced with a baby.

"There is water in the school but it is not enough for all of us living here," he said. "Four or five families share one small tank. We are forced to look for water from other areas, which can be dangerous of the children. When we find work for a day we use the money to buy only food - two small meals per day. Us adults can manage the hunger and thirst, but the children cannot."

Inadequate food and water has affected Mohammed and his family's health. The children are malnourished, and suffer from various diseases. The family lacks necessities and largely depends on humanitarian assistance. The 2016/17 project ended earlier this year, and the families found themselves helpless again. "I wish this [project] could be extended at least to the end of the war," said Uloom.

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