UNFPA HUMANITARIAN RESPONSE IN YEMEN 2019

Ensuring rights and choices for all

Cover photo: UNFPA Yemen
IMpact on Women and Girls

The humanitarian crisis in Yemen remains the worst in the world. Nearly four years of conflict has led to the collapse of the economy and social services. Millions of Yemenis are hungrier, sicker and more vulnerable than a year ago.

An estimated 24 million people – over 80 per cent of the population – are in need of some kind of assistance, including 14.3 million who are in acute need – nearly two million people more than in 2018.

An estimated six million women and girls of childbearing age (15 to 49 years) are in need of support. Rising food shortages have left more than one million pregnant and lactating women malnourished, who risk giving birth to newborns with severe stunted growth. In addition, an estimated 114,000 women are likely to develop childbirth complications.

Nearly half of the health facilities are not functioning or only partially functioning. Only one-third of the functioning health facilities provide reproductive health services due to staff shortages, lack of supplies, inability to meet operational costs or damaged due to conflict. Equipment and medical supplies are inadequate or obsolete. Health workers not having been paid or having been paid only irregularly for more than two years has left Yemen with only 10 health workers per 10,000 people – less than half the WHO minimum benchmark.

In a country with one of the highest maternal mortality ratios in the Arab region, the lack of food, poor nutrition and eroding healthcare, worsened by epidemics such as cholera, can mean an increase in premature or low-birth weight babies and post-partum bleeding.

As many as 4.3 million people have been displaced in the last three years, while some 3.3 million people remain displaced. About half of the displaced are women, 27 per cent of whom are below age 18. Their coping mechanisms are stretched to the limit and they are paying the heaviest price, as is so often the case in humanitarian crises.

With limited shelter options, displaced women and girls tend to suffer most from lack of privacy, threats to safety and limited access to basic services, making them even more vulnerable to violence and abuse. Displaced girls are more likely to lose access to schooling as families with limited resources de-prioritize their right to education.

Conflict-related loss of male breadwinners in Yemeni families adds to the economic burdens women face, especially in the case of female-headed households, 21 per cent of which are headed by females under the age of 18. The pressure is even more severe where women or girls suddenly find themselves responsible for providing for their families when they themselves have been deprived of basic education or vocational training that would equip them for the labour market. In the absence of adequate empowerment and support, women and girls readily become vulnerable to negative coping strategies such as child marriage and child labour.
Ameera, 32 years old
“This is what is left of my teeth. My husband hit me so hard that he fractured my nose and broke my teeth.

“I got married when I was 13 years to a man about 20 year older than me. It was impossible to satisfy him. One day I got late to wake him up for lunch. He was so angry he took the broom and beat me till my teeth fell. I am keeping these teeth as evidence of his brutality.” --Ameera,

Interviewed at a UNFPA women and girls safe space in Ibb

Zahra, 35 years old
“The fighting in Taizz destroyed our house. We now live in a camp in Al-Hawban. The conditions in the camp are harsh. My husband doesn’t have a stable income.

“I have had six miscarriages since moving here. There is no water in the camps so we have to fetch from far away. The last time I went to fetch water, while pregnant, I had nobody to help me take the container off my head so it fell hard on my stomach. My husband carried me all the way to the hospital since we could not afford to take a car, but it was too late and I lost the child.

“I am pregnant again. I pray to God to give me a healthy boy or a girl, I cannot bear to lose another one.” --Zahra,

Interviewed at a UNFPA-supported midwife home clinic in Taizz

Kefaya, 40 years old
“During the pregnancy with my sixth child, my husband lost his job. I had to work as a house maid to provide food and pay the school fees. Even then my children had to leave school because we could not save enough money to pay the fees.

“I neglected myself in order to feed my children, surviving on bread and water most days so when my son was born he weighed only 1.5 kilograms.”

-- Kefaya Interviewed at a UNFPA-supported health facility in Sana’a
2018 MAIN ACHIEVEMENTS

In response to the humanitarian crisis in Yemen, UNFPA has been striving to meet the urgent health needs of women and girls, with a focus on reproductive health and protection services for women and girls who face multiple forms of violence. In 2018, UNFPA significantly expanded both its coverage and the size of its humanitarian operations in Yemen. This resulted in an increase of 77 per cent in the number of health facilities supported by UNFPA (from 133 health facilities in 2017 to 235 in 2018), while the provision of protection services more than quadrupled. Following the acute emergency in Hodeida, UNFPA also took leadership of the Rapid Response Mechanism (RRM) across the country. As a result, more than 167,000 families were provided with front line assistance between June and December 2018.

2018 Overview of humanitarian support

- 335,199 People reached with reproductive health services
- 273,059 People reached with protection services
- 1,020,000 People benefited from dignity kits
- 32,763 Safe deliveries assisted with UNFPA support
- 235 Health facilities supported with reproductive health services
- 163 Midwife home clinics established
- 382 Maternity tents/homes established with UNFPA support
- 87,924 People reached with Family Planning services
- 37,658 Survivors of different forms of violence reached
- 15 Women and girls safe spaces supported by UNFPA
- 6 Women’s shelters supported by UNFPA

258 Maternal deaths averted
183,706 Unintended pregnancies averted
37,000 Survivors of violence assisted

2018 Donor Contributions

<table>
<thead>
<tr>
<th>Donor</th>
<th>Contribution (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>KSA/UAE</td>
<td>$11.0M</td>
</tr>
<tr>
<td>ECHO</td>
<td>$9.1M</td>
</tr>
<tr>
<td>Pooled Funds</td>
<td>$7.2M</td>
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<tr>
<td>WHO</td>
<td>$3.0M</td>
</tr>
<tr>
<td>Kuwait</td>
<td>$1.7M</td>
</tr>
<tr>
<td>Canada</td>
<td>1.5M</td>
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<tr>
<td>Japan</td>
<td>$0.7M</td>
</tr>
<tr>
<td>Italy</td>
<td>$0.4M</td>
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</tbody>
</table>
Samah, 17 years old

"I was six months pregnant when our house was bombed. We ran with only the clothes we were wearing, there was no time to even collect my Abaya. We travelled for two days till we came to Aden. It was the most exhausting two days of my life. I didn’t only have to worry about my family, but the baby I was carrying inside."

"Due to exhaustion from the journey I developed complications. When we arrived in Aden, I was received at a humanitarian service point and provided with a rapid response kit. I was then rushed to the UNFPA-supported Al-Sha’ab Hospital in Aden. If I did not manage to reach a hospital, I don’t think me or my baby would have survived. Thanks to God we are both safe and healthy." -- Samah

Hayat, 25 years old

"I married when I was 14 years to a very old man. My dreams of an education, a job and my independence were all shattered that day. My life revolved around looking after my six children, until recently when my husband lost his job due to the crisis. It was a stressful time as we had no means to feed the children."

"UNFPA provided me with psycho-social support and enrolled me in the Springboard Training Programme. This helped me understand how to handle my finances and start a business. With the grant I received to start the business I took on something bold by starting a security company, which is normally done by men. Now I have my own team of trained female security officers. We provide security services for weddings, exhibitions and bazaars. I am a different woman now. A strong, empowered one, providing for her whole family." -- Hayat

Nasaeh, 21 years old

"When I started experiencing contractions, my husband rushed me to the Dhahian Health Facility in Sa’ada. They immediately transferred me to the Kharef Hospital in Amran, which was said to have a new maternity unit established by UNFPA. "The gynecologist told me I was 36 weeks and 5 days into my pregnancy with a extended pelvis and in labour. The Cesarean went smoothly and almost 20 minutes later, tears of joy filled our eyes as we welcomed our first born, a beautiful boy weighing 2.8 kilograms. This was the first C-Section at Kharef Hospital in Amran, which the staff told me they had waited for 39 years." – Nasaeh
WHY UNFPA MATTERS FOR YEMEN

- UNFPA is the sole provider of lifesaving reproductive health supplies and medicines in Yemen. This reproductive health supply chain serves as a lifeline to the millions of women and girls in Yemen.
- UNFPA leads coordination and provision of lifesaving women's protection services throughout Yemen, reaching thousands of survivors of different forms of violence.
- UNFPA leads the multi-agency Rapid Response Mechanism across the country, providing lifesaving assistance to displaced persons at the frontlines.
2019 STRATEGIC PRIORITIES FOR UNFPA

1. Strengthening health systems to provide emergency obstetric and neonatal care and other lifesaving reproductive health services to reduce maternal mortality and morbidity

2. Strengthening mechanisms to protect women and girls with emphasis on prevention and response to different forms of violence

3. Reaching all newly displaced persons and most destitute returnees with emergency lifesaving packages through the Rapid Response Mechanism

$110.5M
2019 Total Funding Requirement

5.5M
Targeted Population
UNFPA HUMANITARIAN RESPONSE:
STRATEGIC PRIORITIES

REPRODUCTIVE HEALTH

- Ensure availability of lifesaving reproductive health medicines, supplies and equipment in health facilities
- Ensure qualified health personnel are in place to provide reproductive health services in health facilities
- Provide mobile medical teams and clinics with reproductive health services that include safe deliveries integrated with nutrition services for pregnant women as well as disease prevention information
- Make birth spacing methods available and accessible to people in health facilities and mobile clinics
- Provide skilled healthcare personnel, particularly midwives, at the community level
- Provide coordination of reproductive health response through the Reproductive Health Inter-Agency Working Group under the Health Cluster

PROTECTION OF WOMEN AND GIRLS

- Provide medical supplies including post-rape treatment kits or survivors of sexual violence
- Respond to different forms of violence through the provision of psycho-social support, legal aid, access to safe houses and referrals to health and other services
- Engage men and boys to enhance mitigation of different forms of violence at the community level
- Strengthen women’s protection Information and Management System
- Strengthen community awareness about issues related to different forms of violence, and available relevant services
- Establish referral pathways, protocols and capacity building of service providers
- Provide support services and livelihood opportunities for survivors of various forms of violence
- Lead coordination of women’s protection response through the women’s protection sub-cluster within the UN

RAPID RESPONSE MECHANISM

- Lead response to distribute immediate, most critical, lifesaving emergency supplies to newly displaced, on the move families, who may be in hard-to-reach areas or stranded close to the front lines (also most vulnerable returnees)
- Ensure provision of a minimum assistance package comprising of (1) WFP ready-to-eat food rations (2) UNICEF family basic hygiene kits (3) UNFPA female transit/dignity kit

2019 Requirements: $65.5M

- Reproductive health kits, medicines, supplies 15.5%
- Mobile clinics 3%
- Capacity & awareness 1.5%
- Emergency obstetric care services 80%

2019 Requirements: $26.4M

- Women’s protection services 49.2%
- Coordination 1.9%
- Capacity building & awareness 12.5%
- Transit/Dignity kits 18.6%
- Livelihood opportunities 17.8%

2019 Requirements: $18.6M

- Distribution & Coordination 41%
- Transit/Dignity kits 59%
2019 FUNDING REQUIREMENTS: OVERVIEW

$110.5M REQUIRED
$10 M FUNDED
$100.5 M* FUNDING GAP

$18 FOR EVERY AFFECTED WOMAN AND GIRL

2019 Requirements by Programme Area**

<table>
<thead>
<tr>
<th>PROGRAMME AREA</th>
<th>USD</th>
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<tr>
<td>Reproductive Health</td>
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<tr>
<td>Emergency obstetric care</td>
<td>52,344,000</td>
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<tr>
<td>Reproductive health kits &amp; supplies</td>
<td>10,200,000</td>
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<tr>
<td>Mobile teams and clinics</td>
<td>2,000,000</td>
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<tr>
<td>Capacity building &amp; awareness raising</td>
<td>1,000,000</td>
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<td>Sub-total</td>
<td>65,544,000</td>
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<tr>
<td>Protection of Women and Girls</td>
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<tr>
<td>Service provision</td>
<td>13,000,000</td>
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<tr>
<td>Capacity building &amp; awareness raising</td>
<td>3,300,000</td>
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<tr>
<td>Transit/dignity kits</td>
<td>4,903,540</td>
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<tr>
<td>Livelihood opportunities</td>
<td>4,687,500</td>
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<tr>
<td>Coordination</td>
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<tr>
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<tr>
<td>Rapid Response Mechanism</td>
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<tr>
<td>Transit/dignity kits</td>
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<tr>
<td>Distribution &amp; Coordination</td>
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<tr>
<td>Sub-total</td>
<td>18,631,043</td>
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<td>110,566,083</td>
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2019 Targeted Direct Beneficiaries

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<tr>
<th>PROGRAMME AREA</th>
<th>NO.</th>
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<tbody>
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<td>Reproductive Health</td>
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<tr>
<td>Female</td>
<td>1,800,000</td>
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<tr>
<td>Male</td>
<td>480,000</td>
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<td>Protection of Women and Girls</td>
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<tr>
<td>Female</td>
<td>1,072,376</td>
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<tr>
<td>Male</td>
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<tr>
<td>Rapid Response Mechanism</td>
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<tr>
<td>Individuals</td>
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<tr>
<td>Households</td>
<td>324,115</td>
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<tr>
<td>Total</td>
<td>5,521,168</td>
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</table>

*Funding gap as of February 2019.
**Operations and programme support costs are included in overall costs.
**GEOGRAPHICAL COVERAGE**

UNFPA’s interventions cover all 22 governorates in Yemen, with a team of 60 personnel (10 international and 50 national). Overall coordination is handled by UNFPA’s office in Sana’a. In other governorates, joint UN humanitarian hubs coordinate. UNFPA has presence in all six operational UN humanitarian hubs (Aden, Al Hudaydah, Al Mukalla, Ibb, Sa’ada and Sana’a), an arrangement that relies on closely monitoring evolving needs to ensure a flexible and appropriate response to the changing demands of the humanitarian dynamic.
WHAT IF... WE FAIL TO RESPOND?

- At least 3,500 maternal deaths from among an estimated 144,000 women at risk of developing complications during childbirth
- Total collapse of reproductive health facilities, when only one-third of functioning health facilities provide reproductive health services across the country
- Lives of an estimated 120,000 women and girls at risk from different forms of violence
- Grave threats to the basic rights of millions of Yemenis without support or access to food, water, health services, medication and protection
UNFPA is grateful for the invaluable support of the following donors for its response to the crisis in Yemen since 2015 (in alphabetical order): Canada, Central Emergency Relief Fund, European Union Civil Protection and Humanitarian Aid, Friends of UNFPA, Italy, Japan, Kuwait, Netherlands, Saudi Arabia, Sweden, Switzerland, United Kingdom, United Arab Emirates, World Health Organization, and Yemen Humanitarian Pooled Fund

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