ISSUE#10 OCTOBER 2017

UNFPA Response in Yemen

MONTHLY SITUATION REPORT



Internally displaced family in Hobhan, Taizz ©UNFPA/YEMEN

FAST FACTS



20.7M In need of some form of assistance



9.8M In acute need



14.8M Lack access to basic health services



11.3M In need of protection



2.9M Internally displaced and returnees



2.2M Women of reproductive age (15-49 yrs)





2.6M Women and girls at risk of gender-based violence

HIGHLIGHTS OF THE MONTH

Yemen is now the **world's largest humanitarian crisis**, including the **fastest growing cholera epidemic** ever recorded, and the **world's largest food emergency**. Some 20 million people require humanitarian assistance, **seven million of whom are severely food insecure**, staving off the threat of famine.

Despite challenging conditions and lack of funding, UN and humanitarian parties are providing direct assistance to more than 7 million people each month. During a visit to Yemen in October by the **UN Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator**, he stressed the need for more funding and better humanitarian access to the population in need, calling all parties to ensure respect for international humanitarian law and the protection of civilians.

The Yemen Humanitarian Response Plan is 56.9 per cent funded with \$1.3 billion of the \$2.3 billion required to reach the 12 million people in need of humanitarian support and protection this year.

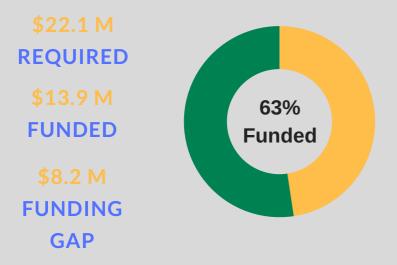
UNFPA's response in Yemen has so far reached nearly **1.5 million people with reproductive health and gender-based violence services**. Support in October included treatment of 23 **fistula** cases in Sana'a and Aden. In addition, nearly 2,000 '**mama kits**' containing items for the hygiene and protection of mother's and their newborns were provided to 25 maternity units across 8 governorates.

A three-day needs assessment visit, to the port city of **AI Hudaydah**, a strategic target in the current conflict and the main entry point for essential commercial and humanitarian goods into northern Yemen, was conducted in October. UNFPA will work to scale up support to the **AI-Thawra Hospital** in AI Hudaydahl by way of maternal life-saving medicines, more reproductive health kits and supplies and work towards strengthening maternal services in remote and conflict-affected areas of the governorate. In addition, provision of services and referral pathways for survivors of gender-based violence will be improved, given the very high incidence of gender-based violence reported in the governorate.

HIGHLIGHTS OF RESPONSE - OCTOBER 2017*

PEOPLE REACHED	NO.
Number of people reached with reproductive health services	101,489
Number of people reached with mobile clinics	54,996
Number of people directly reached with reproductive health kits	43,435
Individuals reached with family planning services	1,208,197
Dignity kits distributed	65,801
Women and girls reached with GBV services, counseling, and information	25,783
SERVICES DELIVERED	NO.
Reproductive health kits distributed	192
Mobile clinics in operation	10
Health facilities with emergency obstetric care	133
PERSONNEL TRAINED Health personnel trained	NO.
on reproductive health kits – Minimum Initial Service Package	60

2017 FUNDING STATUS



2017 Donors** (alphabetical order): Canada, Central Emergency Response Fund, Country-based Pooled Funds (multiple donors), Friends of UNFPA, Japan, Netherlands, Saudi Arabia, Sweden, Switzerland, United States of America



REACHING PREGNANT WOMEN THROUGH MOBILE CLINICS

Naseem, a 22 years old, was five months pregnant when she visited a mobile reproductive health clinic in Khalifa village, operated by UNFPA with the support of the King Salman Humanitarian Aid and Relief Centre.

"This is my first pregnancy. I have wanted to visit a doctor since the beginning of my pregnancy but my husband and I cannot afford the transportation and hospital charges. We are finding it difficult to have even one meal a day."

"Many of us in our village do not go to a health facility because its expensive and there is no female doctor. When I heard about this clinic from my neighbour, I was very happy to know that there was a female doctor." "At the clinic, the doctor told me I was suffering from malnutrition and gave me medication. I am feeling much better now. I pray to God that I will deliver a healthy baby soon with the care from this clinic," adds Naseem.

KEY CHALLENGES

- The cholera outbreak is impacting the provision of already overstretched health services, including reproductive health services, which are being redirected to deal with the new and added burden of managing the epidemic.
- Lack of humanitarian access to conflictaffected areas.
- Difficulties in obtaining life-saving medical supplies into Yemen due to air and sea blockades, and denial of visas for humanitarian workers.
- Difficulty in organizing services for reproductive health and gender-based violence in conflict areas due to damaged or non-operating health structures, limited movement of partners and limited transportation of supplies to health facilities.

*This includes cumulative totals from January to October 2017 ** Includes contributions carried forward from 2016 to 2017 PAGE 02