

2019

HUMANITARIAN NEEDS OVERVIEW

PEOPLE IN NEED

24.1M

DEC 2018



YEMEN

INTERSECTORAL

ANALYSIS OF NEEDS

FAMINE PREVENTION

The risk of famine in Yemen is intensifying and requires an integrated analysis and response. Based on analysis of food security, nutrition, WASH and health conditions, partners estimate that 230 districts (69 per cent of all districts in the country) are currently at heightened risk of sliding into famine.²⁵ An estimated 18.7 million people live in these districts, including 7.4 million who need life-saving food and livelihoods assistance, 8.3 million people in acute of WASH support and nearly 8.9 million who are in acute need of healthcare. In addition, 3 million people need nutrition assistance, including 2 million acutely malnourished children under age 5.

Associated factors and projection

Famine occurs when a significant number of deaths occur due to lack of food or the interaction of food deficits with disease.

A famine involves a sequential, causal series of events that include severe food deficits²⁶, acute malnutrition²⁷ and death.²⁸

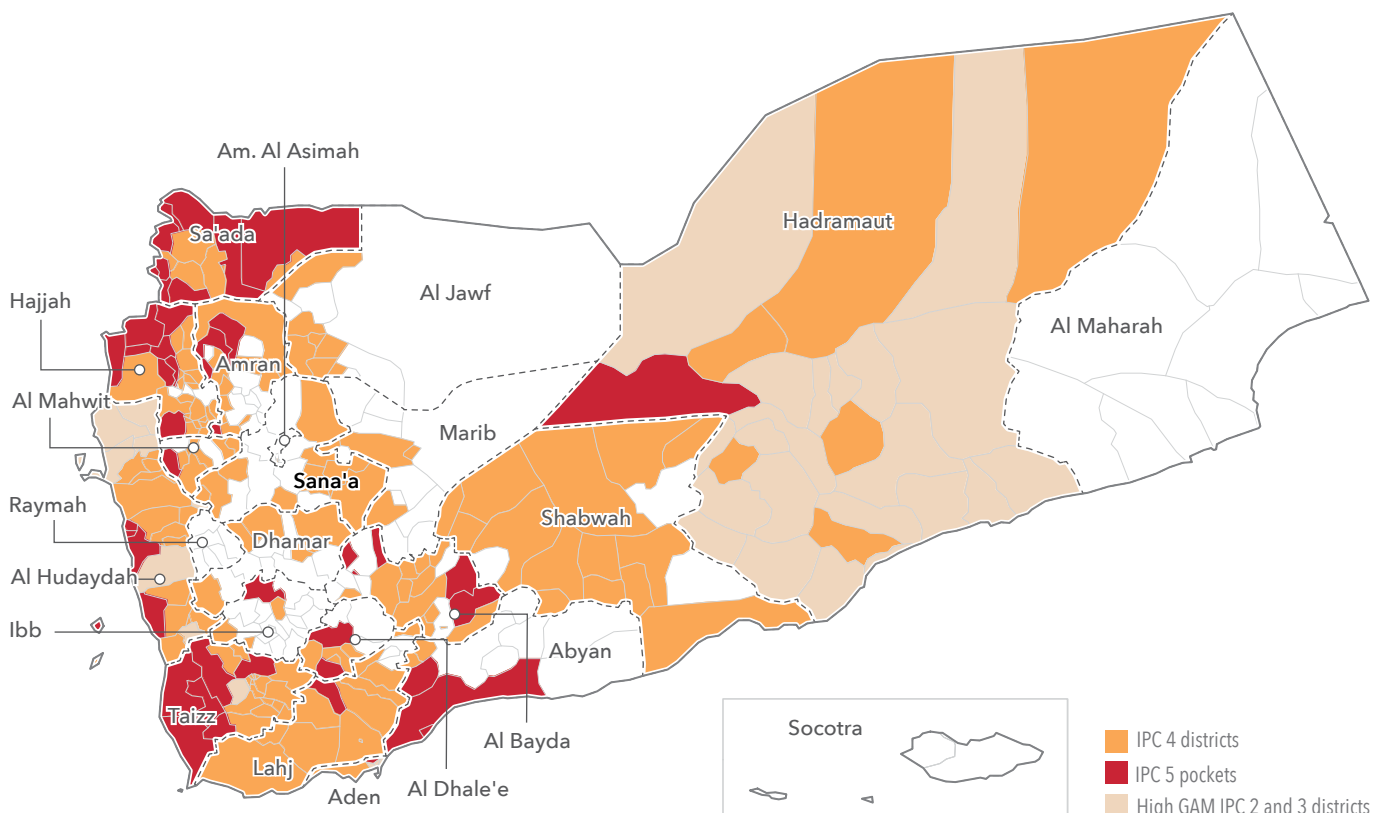
Food deficits

An estimated 7.4 million people in the 230 highest-risk districts do not know how they will obtain their next meal. Most households' livelihoods in these districts have totally or nearly collapsed. This has triggered spiralling coping behaviours like sale of houses, land, productive assets, and livestock, exacerbating household food insecurity. Families are increasingly going into debt to access food. The large IDP population is stretching host communities ability to cope.

Malnutrition

Malnutrition in Yemen has three main underlying causes: (i) inadequate access to food or poor use of available food; (ii) inadequate childcare practices; and (iii) poor water, sanitation and health services. The past three years of conflict in Yemen have further exacerbated the impact and severity of these factors.

DISTRICTS AT HIGHEST RISK OF FAMINE



Source: FSAC, Nutrition, WASH and Health clusters, November 2018

More than half the population currently lacks adequate access to water and sanitation, recognising that, about 51 per cent of under-nutrition worldwide is associated with infections caused by inadequate WASH conditions²⁹, and poor sanitation is the second leading cause of stunting.³⁰ Currently only about 50 per cent of health facilities are fully functioning, whilst feeding and care practices are sub-optimal: the exclusive breastfeeding rate is only about 10 per cent, and the rate of timely introduction of complementary feeding is about 60 per cent.

Water, sanitation and hygiene

Over half of districts in Yemen (167 of 333) are in acute need of sanitation support. Most water systems in famine-risk districts are heavily reliant on humanitarian assistance for fuel or other services. An estimated 55 per cent of the population do not have access to improved water sources. As a result, people are increasingly resorting to unimproved water sources and lack adequate sanitation. This increases the risk of diarrhoeal disease, which in turn leads to deteriorating nutritional status and, in some cases, greater risk of death. Although trucked or bottled water may offer relatively safer water sources, prices have risen considerably – up to 45 per cent in some areas.

Healthcare

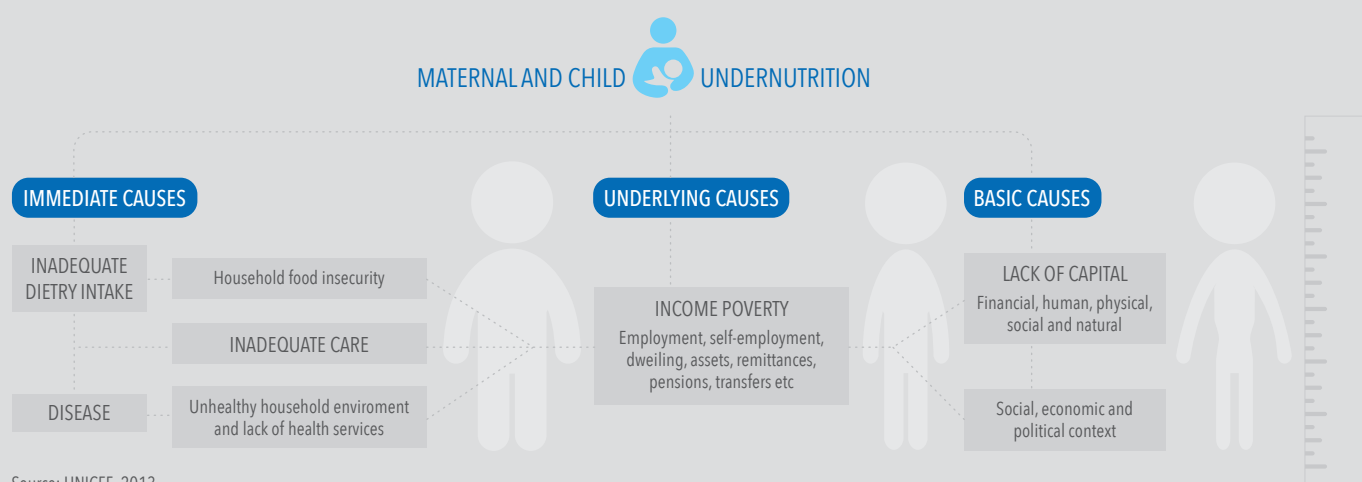
With only 51 per cent of health facilities fully functional³¹, access to healthcare is severely limited. Lack of salaries for health personnel, damage to health facilities and difficulty importing medicines and medical supplies are all accelerating the decline of public health services. Where private-sector health services exist, they remain out of reach for millions of vulnerable people due to high prices. Mortality in famine is often driven by disease preying on weakened immune systems. Famine-risk districts are particularly vulnerable, as many children, mothers and people with illnesses or malnutrition in these areas may be unable to access healthcare.

Related protection needs

Children and women are particularly vulnerable to protection violations in famine-risk areas. Women leaving the home in search of food may be exposed to abuse, and time away from the home can reduce mothers' ability to breastfeed and affect childcare. In most households, women and children are responsible for collecting water. Many primary water sources have stopped functioning, which means longer distances to travel and additional threats to safety and dignity, including GBV. Children may remain out of school so they can fetch water, which families may prioritize over education.

The methodology used for estimating the districts at risk of famine is indicated in the Methodology annex.

UNICEF CONCEPTUAL FRAMEWORK FOR MALNUTRITION



Source: UNICEF, 2013