ISSUE#8 AUGUST 2017



# UNFPA Response in Yemen

MONTHLY SITUATION REPORT



A displaced mother and her newborn in Ibb Governorate ©UNFPA/YEMEN

## **FAST FACTS**



**20.7M**In need of some form of assistance



9.8M
In acute need



14.8 M
Lack access to basic health services



11.3 M
In need of protection



2.9M

Internally displaced and returnees



2.2M

Women of reproductive age (15-49 yrs)



**1.1 M**Pregnant women malnourished



2.6M

Women and girls at risk of gender-based violence

### HIGHLIGHTS OF THE MONTH

Millions of Yemenis continue to face a triple tragedy from the spectre of famine, the world's largest ever single-year cholera outbreak, and a brutal conflict. Seventeen million Yemenis do not know if or where they will get their next meal; nearly 7 million are facing the threat of famine; nearly 16 million lack access to water or sanitation; and 621,209 suspected cases of cholera have been reported in only the last four months, with the latest figure of 2,167 deaths. Among them are 2.2 million women and girls of reproductive age whose health is at risk and 1.1 million malnourished pregnant women.

In August, the Yemen Humanitarian Response Plan (YHRP) was revised, seeking \$2.3 billion to reach 12 million people with a range of life-saving and protection services across the country. This figure represents a 13 per cent increase in financial requirements, which is primarily attributed to requirements of the Integrated Cholera Response Plan. Altogether, funding requirements have increased by \$271,127,909, of which \$254,053,700 comes from the Integrated Cholera Integrated Response Plan. As of 15 August, The revised YHRP has received 39% per cent funding - US\$ 912.2 million out of \$2.3 billion requested. Contributions to humanitarian funding outside the YHRP is at \$406.2 million.

UNFPA's response in Yemen has so far reached nearly **1.5 million people** with reproductive health and gender-based violence services.

**Eighty midwives** were trained during August, across four governorates to strengthen their knowledge and skills for improved quality and timeliness in the provision of maternal healthcare in remote and conflict-affected governorates.

In raising awareness on gender-based violence, 26 theater plays were conducted across four governorates along with a television series on prevention of gender-based violence.

#### **HIGHLIGHTS OF RESPONSE - AUGUST 2017\***

PEOPLE REACHED	NO.
Number of people reached with reproductive health services	90,295
Number of people reached with mobile clinics	47,862
Number of people directly reached with reproductive health kits	41,735
Individuals reached with birth spacing services	1,206,528
Dignity kits distributed	58,541
Women and girls reached with GBV services, counseling, and information	17,109
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 on	NO.
Reproductive Health Kits –	60

## **2017 FUNDING STATUS**

Minimum Initial Service Package



**2017 Donors (by size of contribution):** Sweden, Netherlands, Country-based Pooled Funds (multiple donors), Switzerland, Canada, Friends of UNFPA

## IN THE NEWS



Yemen's Cholera Epidemic
Puts Pregnant Women at
Greater Risk than Ever: Op-Ed
by UNFPA 's Acting Executive
Director.. Read more..



WATCH: "Giving birth in the time of cholera"
The devastating impact of cholera on pregnant women



WATCH: "We do not have anything now" Women and girls in Yemen explain how their lives have been upended by war.

## **KEY CHALLENGES**

- Continuing fluctuation in the exchange rate of the Yemeni Riyal against the US Dollar and a cash deficit in the country has made programme and procurement activities more costly.
- Lack of humanitarian access to conflictaffected areas.
- Difficulties in obtaining life-saving medical supplies into Yemen due to air and sea blockades.
- 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.