SNAPSHOT

Yemen





KEY FIGURES



7 years of conflict



23.4 million people require humanitarian assistance * 3/4 Yemeni population



19 million people face crisis levels of food insecurity (IPC 2022)



Over 4 million internally displaced people**

KEY INFORMATIONS

In September 2014, the Ansar Allah movement (commonly known as Houthis) took control of Yemen's capital, Sana'a, and began pushing south towards the country's second city, Aden. In response, in 2015, a coalition of Arab states launched a military campaign against the Houthis to re-establish the Yemen's government. Since the start of the conflict, the country has become even more fragmented, with the opening of a new frontline in the south opposing the Internationally Recognized Government (IRG) to the Southern Transitional Council (STC), and with the continuous implication of several neighbouring countries. In 2018, the UN-brokered Stockholm Agreement provided a ceasefire in Hodeida, as well as the formation of a joint committee to address the situation in Taiz. Despite these efforts and the intensification of the negotiations, the political instability has persisted. In November 2019, the Saudi-led Riyadh Agreement provided for power-sharing in the south between the IRG and the STC. But its provisions were hardly implemented and soon lapsed. In 2020, the active conflict between the Houthis and the IRGC intensified in some areas, opening up new front lines along the borders of Ma'rib and Sana'a governorates. In 2022, under the guidance of the United Nations, Yemen has benefited from a truce in fighting over the past six months. This is the first such long period of respite since the civil war began. With the deadline for renewing the truce, the UN special envoy has submitted a new proposal to the warring parties, but the truce is at its most fragile. The escalation of the conflict has had a serious negative impact on the economy and the humanitarian situation. Further, as a result of the conflict in Ukraine, Yemen is witnessing a deterioration and further increase in fuel and food prices due to its heavy dependence on imports.- Ukraine and Russia being the main suppliers of wheat to the Middle East. This has an impact on poverty and food security in the country, leaving millions unable to meet their basic needs.

^{* 2022} Humanitarian Needs Overview analysis

^{**}Yemen Humanitarian Plan Response Plan 2021







HEALTH SITUATION

The conflict has devastated the health care system in Yemen. According to the 2022 Yemen Humanitarian Response Plan, only 51 % of health facilities are considered fully functional, due to the lack of operational specialized personnel, equipment, and basic medicines. As of July 2022, 12.6 million people are estimated to be in acute need of health services. The availability of health workers to sustain the health services for the population is largely dependent on incentives offered by the humanitarian actors. Outbreaks such as cholera, diphtheria, dengue, malaria and Covid-19 pose an imminent threat to the health system, in case of inadequate coordinated response. Out of the 7.3 million in acute need, more than 2.2 million children are acutely malnourished and, at the end of 2022, extreme hunger looms for 161,000 people. The situation of malnutrition is exacerbated by the limited access to health services of the most vulnerable, mainly women and children.

MDM INTERVENTION

Since 2007, Médecins du Monde (MdM) has been operating in Yemen to support the populations affected by the conflict. MdM overall strategy focuses on a holistic primary health care (curative consultations, MHPSS services, SRH services) by supporting the provision of free-of-charge consultations and medications for the more vulnerable groups (such as children and pregnant and lactating women) in the targeted districts. This approach is implemented in partnership with the MoH and local organizations. Through MdM support, the populations can have access to curative consultations, antenatal and postnatal consultations, routine immunization, nutritional referrals, health education, psychosocial support and individual counselling for mental health. In addition to this minimum package, MdM strategy is to strengthen two components: Protection/GBV and Mental Health & Psycho-Social Support (MHPSS). Further, MdM aims to respond to outbreaks of communicable diseases affecting the population (Diphtheria, Cholera, Measles and COVID-19) and to rehabilitate health facilities when needed, to ensure dignity and confidentiality of consultations. At a community level, MdM work with identified community volunteers from the target communities to provide health education activities. These sessions empower the community to identify health problems and create community awareness on health issues and on the availability of PHC services.

MdM supports 20 public health facilities in 6 governorates (Sana'a, Amanat, Lahj, Abyan, Aden, Marib) through 3 established offices (Sana'a as coordination base, Aden and Marib as field offices) .

ACTIVITIES: January / November 2022



288,894 **CURATIVE CONSULTATIONS INCLUDING 28.938**

ANTENATAL CONSULTATIONS



88,492 PERSONS ATTENDED HEALTH **EDUCATION AWARENESS** sessions (individual and group sessions)



1.851



49,818 MHPSS CONSULTATIONS CHIDREN < 5 yrs SCREENED for **MALNUTRITION**

FINANCE



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MAP OF THE PRESENCE OF MdM

