

# HUMANITARIAN UPDATE



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## PREVENTABLE DISEASES CONTINUE TO SPREAD: THE URGENT NEED FOR CHILD IMMUNIZATIONS

“I will live all my life regretting seeing my son paralyzed,” Mohammad’s mother Bushra said.

Four-year-old Mohammad contracted polio in late 2021. He spiked a high fever, recalls Bushra, and his right leg suddenly went floppy and weak. Acute flaccid paralysis is the primary sign of poliovirus infection, and it was confirmed in Mohammad’s case by laboratory testing, making it one of the first cases in the ongoing outbreak.

“My grief for my son is enormous,” said Bushra. “He was walking and playing and suddenly he is disabled and does not move and cannot play like his brothers, he cannot move his leg at all.”

In Yemen, 228 children have been paralyzed since 2021 by the ongoing polio outbreak. Eliminated in nearly all other parts of the world and on its way to global eradication, the poliovirus case count in Yemen is expected to rise.



A four-year-old girl gets vaccinated against polio in Aden in a UNICEF-WHO door-to-door polio vaccination campaign. Credit: ©UNICEF



OCHA

YEMEN

## Spread of polio and other vaccine-preventable diseases in Yemen

It's not just polio. Against the backdrop of ongoing conflict, widespread malnutrition and shortages of food and medicine, one of Yemen's fastest growing problems, is, ironically, easily solvable: multiple outbreaks of vaccine-preventable diseases.

The numbers are daunting. Yemen recorded more than 22,000 measles cases in 2022, including 161 deaths. In 2023 to date, cases have already spiked to 9,418, with 77 children dead. Diphtheria and pertussis – whooping cough – cases are also on the rise, as are deaths from each disease.

Yemen's already fragile and severely over-burdened health system, combined with sub-optimal population immunity against vaccine-preventable diseases, increases the likelihood of further explosive outbreaks of these diseases. Moreover, the lack of immunization has major negative socio-economic impacts on households, which face unaffordable high hospitalization costs.

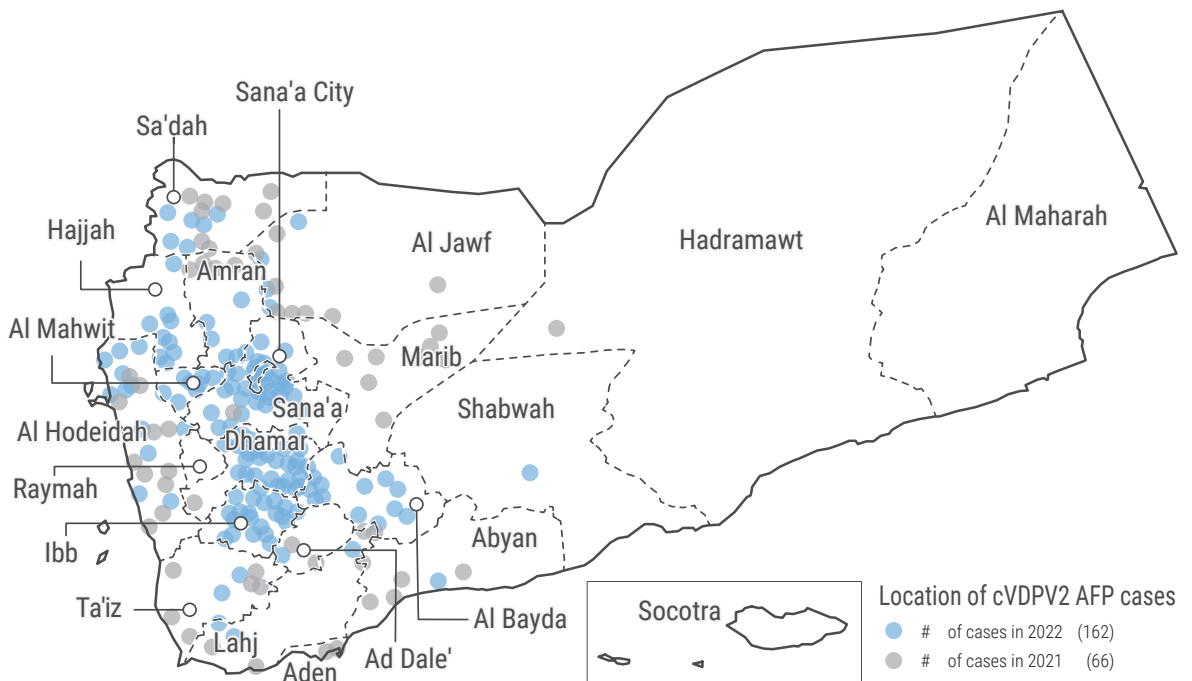
The human cost of these outbreaks is particularly painful in that it is children, not adults, who bear the brunt.

## Challenges to immunization efforts

Yemen's vaccine-preventable disease outbreaks are the direct consequence of increasingly low immunity levels in children. With the rapid decline in immunization coverage, an atypically high mortality rate is expected to increase, especially if malnutrition rates continue to rise.

For decades, Yemen's high coverage rates for childhood immunization were amongst the best in the region, kept high by a steady stream of state-funded risk communications and a robust public health system. Conflict has decimated both.

Since confirmation of the outbreak of type-2 vaccine-derived poliovirus (cVDPV2) in November 2021, the Global Polio Eradication Initiative has been unable to obtain house-to-house access to children in Yemen's northern governorates. As a result, the polio outbreak there has continued, and even spread to other countries in the region. Of Yemen's 228 paralytic polio cases, 86 per cent (197) are from the northern governorates.



Type-2 vaccine-derived poliovirus (cVDPV2) cases, 2021 and 2022

While multiple measles and polio vaccination campaigns have been implemented in the southern governorates over the past two years, the ongoing deadlock in the northern governorates over supplementary immunization activities puts children there at particular risk. The restriction of vaccination campaigns to only fixed-site health facilities, combined with prohibition of integrated community outreach services in all northern governorates, has led to continued multiple outbreaks of polio and other vaccine-preventable diseases, specifically measles and diphtheria. The current measles outbreak, ongoing since 2019, is disproportionately affecting children there.

For Bushra, the lack of a “pull” to immunize her children shaped the choices her household made around the children’s health. Mohammad is a zero-dose child, meaning he is completely unvaccinated.

“We didn’t know we were supposed to take them to the hospital to get vaccinated, and I wasn’t aware of the seriousness of these diseases or thinking that any of my children would get sick,” she said.

Bushra’s three older children, two boys and a girl, received a few vaccinations during house-to-house campaigns. However, between Mohammad’s birth and the onset of his paralysis, Bushra notes there had been no house-to-house campaigns. This is why the polio programme advocates for house-to-house vaccination: it is the method that delivers the highest coverage, delivering vaccines even to children who may have until then missed out on routine immunization.

Other challenges remain. Insecurity in parts of the country—particularly in some districts in Yemen’s southern governorates—makes accessing them difficult. The result is that most children in these districts are not vaccinated.

## PREPARING FOR FLOODS

The rainy season in Yemen has arrived. Starting in mid-March, numerous governorates experienced heavy rains and wind, causing various degrees of shelter damage, completely destroying some homes.

Based on the Information Management and Assessment Working Group’s (IMAWG) risk

## Disinformation: spreading faster than the disease

Over the past year or so, the lack of a “pull” towards vaccinations has been joined by an aggressive “push” away from it. An escalating campaign of anti-vaccine propaganda has taken root on YouTube, television, radio and social media, calling into question established scientific fact and sowing fear and doubt in parents’ minds.

While the material is produced and broadcast in the northern governorates, its effects are increasingly felt in the country’s southern governorates. Parental refusals in the March 2023 house-to-house polio vaccination campaign were markedly higher than in other recent rounds. The driver, according to post-campaign monitoring activities and conversations with parents, is overwhelmingly the fear-based rumors and disinformation parents take in on social media and in WhatsApp groups. The result is a combination of mistrust, vaccine hesitancy and refusals that undermine immunization coverage.

The longer the current disinformation campaign persists, the greater the risk that parents will opt out of vaccines for their children when they are finally offered that protection, based on misguided, if well-intentioned, fears.

Immunizations are essential to prevent the further spread of these vaccine-preventable diseases and others. For Bushra, the cost of missing out on Mohammad’s childhood immunizations is a price she and her son will pay forever – and one she urges other parents to guard against.

“I was able to keep my son healthy and I didn’t. Vaccination is very important – more than I could have ever imagined.”

analysis, around 603,000 people in 112 districts are at high risk of floods this year.

To date, 16,435 families have been affected. Out of the top 3 affected governorates, Marib has been the worst impacted, with 7,972 families affected, followed by Hajjah (2,228 families), and Amran (1,454 families). While humanitarian

actors continue undertaking rapid assessments, over 1,260 HH (8,820 individuals) have received emergency response assistance within 72 hours through the Rapid Response Mechanism (RRM).

The first rains of the year affected displaced families in particular, whose precarious living situations make them more vulnerable to the impacts of natural disasters. Within some IDP sites, partners reported that flooding washed away displaced families' shelters and belongings, including essential items, food stocks, and water tanks, leading to further displacements.

Aid agencies in Yemen have been preparing for the seasonal rains and additional flooding to ensure a rapid response. OCHA and humanitarian clusters have mapped prepositioned relief stock and are assessing mitigation measures in high-risk sites. OCHA is closely working with concerned authorities to ensure safe, rapid and unhindered humanitarian access to flood-affected areas.

To support these efforts, the Humanitarian Coordinator for Yemen, Mr. Gressly, has launched the first reserve allocation for 2023 of the Yemen Humanitarian Fund. USD \$8 million

have been allocated to enhance preparedness and response and pilot the Anticipatory Action approach. US \$5 million of the YHF allocation will support

the urgent scale-up of emergency preparedness activities in high-risk areas in line with the inter-cluster analysis on risks, specifically supporting urgent priorities under the CCCM, Shelter/NFIs, WASH and RRM clusters. US \$3 million will support a pilot on Anticipatory Action, in line with the 2023 Humanitarian Response Plan specific objective to mitigate the effects of climate change and natural disasters.

Yemen is prone to recurrent seasonal flooding which results in displacement, disruption to livelihoods, a spike in water-borne diseases, loss of crops and damage to property. In 2022, climate-related events triggered a 93 per cent increase in new and secondary displacements, concentrated mainly in Al-Hodeidah, Al-Jawf, Marib and Ta'iz

governorates. Torrential rains and flooding alone affected over 517,000 people and displaced over 170,000 people.

## REHABILITATING HEALTH FACILITIES FOR LONG-TERM ACCESS TO MATERNAL HEALTH CARE

When Tahaani, now 20, experienced complications in her pregnancy, she had to travel hundreds of miles from her home in Ta'iz Governorate to give birth at a health facility. By the time she arrived, it was too late. She lost the baby.

This year, she became pregnant again. This time she was able to visit the newly rehabilitated maternity unit at Al Mokha Hospital to deliver under the care of a female gynecologist and a midwife free of charge. She had a healthy baby boy.

"I am happy to come to this hospital. If it was not here, we would have to make the long journey again to the city. I could not bear to lose another child," said Tahaani.

In December 2022, the maternity unit at Al Mokha Hospital in Ta'iz was revamped by

UNFPA, the United Nations Population Fund and Deem for Development Organization, supported by European Union Humanitarian Aid to provide reproductive health services and address complicated pregnancies requiring surgical care and treatment. This is the only comprehensive maternal health unit in the area, serving an estimated population of around 400,000 and covering eight neighboring districts.

In Sana'a, a new emergency obstetric care unit was established by UNFPA at the Bani Al Harith Health Centre with the support of the Qatar Fund for Development. The new unit will help to address the urgent maternal health needs of more than 17,000 women in Bani Al Harith District, allowing them to deliver safely with skilled care and treatment.

These efforts aim to ensure the long-term availability of maternal health and obstetric

care services in these governorates. Yet, the reproductive health needs across the country are far greater than the funds available to provide immediate life-saving services or make more long-term investments.

Maternal and infant mortality rates in Yemen remain extremely high—one of the highest in the Middle East and Northern Africa region. One woman dies in childbirth every two hours in Yemen, mostly from causes that are entirely preventable. Less than half of births are assisted by skilled medical personnel, and only one-third of births take place in a health facility.

An estimated 42 per cent of Yemen's population lives more than one hour away from the nearest fully or partially functional public hospital. Only one in five of the functioning health facilities in Yemen can provide maternal and child health services.

As a result, roughly 5.5 million women and girls of childbearing age across Yemen have limited or no access to reproductive health services, including antenatal care, safe delivery, postnatal care, family planning and emergency obstetric and newborn care. Among them are an estimated 1.5 million pregnant and breastfeeding women who are acutely malnourished.

Health facilities in the country lack sufficient qualified health care workers due to the lack of government funds to pay their salaries and limited donor funds to retain them on incentives. The number of obstetric gynecologists, anesthetists and midwives are particularly inadequate, affecting access to lifesaving caesarean operations when needed. This is alarming given that between five to ten per cent of all pregnancies require a caesarean intervention to save the lives of the mother and/or the newborn baby. Referral systems are not

functional in most districts, and women end up dying before reaching a hospital.

Under-investment in healthcare, particularly maternal health, risks an increase in maternal deaths in Yemen as women and girls of childbearing age struggle to access the reproductive health services they desperately need.

Medical equipment and resources are also insufficient. Nineteen out of 22 governorates face severe shortages in available maternity beds – less than six beds per 10,000 people, half of the WHO standard. Moreover, without access to lifesaving medicines, about one million women who are estimated to deliver in 2023 are at risk of life-threatening complications. Another one million women who would want to use family planning to postpone or avoid pregnancy will be at risk of unwanted pregnancies.

Reproductive health interventions under the Health Cluster remain among the least-funded interventions of the 2023 Humanitarian Response Plan. Under-funding will make it extremely difficult to sustain the current provision of services, and will have an impact on the long-term availability of reproductive healthcare.

A funding gap of \$63 million remains.



Al Mokha Hospital new maternity unit. Credit: UNFPA Yemen

## ONE STEP CLOSER TO PREVENTING THE CATASTROPHE IN THE RED SEA

The UN is closer than ever to beginning the operation on the water to prevent a catastrophic oil spill in the Red Sea from the decaying FSO Safer supertanker.

On 9 March, the UN Development Programme (UNDP) signed an agreement to purchase the replacement vessel that will take on the oil from the *Safer*. After undergoing maintenance

and necessary modifications at a drydock in Zhoushan, China, the *Nautica* set sail for Singapore on 6 April en route to the Red Sea for the operation.

Urgent funding is still required to start the salvage operation. Donors have generously pledged \$97 million, of which \$77.5 million has been received. However, the cost of the

emergency operation to transfer the oil is \$129 million, leaving a \$32 million gap.

Moored off Yemen's Red Sea coast, the FSO *Safer* was constructed in 1976 and converted to a floating storage and offloading facility (FSO) for oil a decade later. The aging tanker is carrying an estimated 1.14 million barrels of light crude oil.

With the war in Yemen, operations on the *Safer* were suspended in 2015. The vessel is now beyond repair and could break apart or explode at any time.

The resulting major oil spill would be an environmental, humanitarian and economic catastrophe, with its epicenter on the coast of Yemen. The impact on coral reefs, life-supporting mangroves and other marine life would be severe. Fish stocks would take 25 years to recover. Entire communities would be exposed to life-threatening toxins and highly polluted air would affect millions of people.

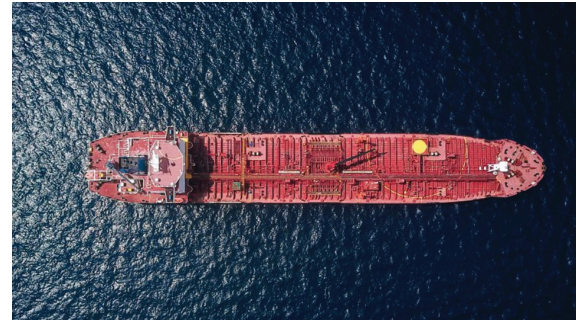
The spill could also close the ports of Hodeidah and Saleef – which are essential to bringing food, fuel and life-saving supplies into Yemen.

The cost of cleanup alone is estimated at \$20 billion. A spill would devastate fishing communities on Yemen's Red Sea coast, and 200,000 livelihoods would likely be instantly lost. A disruption in shipping through the Bab al-Mandab Strait and the Suez Canal would also result in billions of dollars in trade losses every day.

The UN-coordinated plan to prevent the spill is a two-phase operation: the urgent transfer of the oil off the *Safer* and installation of a safe, long-term replacement capacity for the vessel. This plan has the support of the parties to the conflict and key stakeholders.

The original budget for the two-phase operation was \$144 million; this estimate was initially lowered after a buoy system<sup>1</sup> was selected as the long-term storage capacity. However, since then, the costs of very large crude carriers surged, largely due to factors related to the war in Ukraine. The current budget for both phases one and two is \$148 million.

The UN continues to fundraise to close the budget gap for the first phase of the operation, as well as for the critical second phase. If the gap is closed quickly, the critical work to prevent a massive oil spill can begin in May.



*The decaying Safer supertanker contains four times the amount of oil spilled by the Exxon Valdez, which caused one of the greatest environmental disasters in the United States' history.*

## EXPANDING HUMANITARIAN ACCESS IN YEMEN: INTER-AGENCY MISSION VISITS BAQIM DISTRICT, SA'DAH GOVERNORATE

In a crucial step towards providing much-needed humanitarian assistance to conflict-affected communities in hard-to-reach areas in Yemen, UN and INGO humanitarian partners took part in an inter-agency mission to Baqim District of Sa'dah Governorate in Yemen in early March. The mission aimed to assess the needs of the district and engage with local officials on expanding humanitarian operations there.

Baqim District, a frontline area near the Yemeni-

Saudi border, has received limited humanitarian assistance over the past eight years. Only two of the seven sub-districts have been accessible by the humanitarian community. With this mission, humanitarian organizations will expand access to two more sub-districts, Sharawah and Qahr Bani Al Harith, where many of the homes and public services were heavily impact by conflict.

The mission was comprised of representatives

<sup>1</sup> Catenary anchor legged mooring (CALM) buoy system

from YFCA, OXFAM, ACTED, Action for Humanity, UNICEF, UNHCR, and OCHA. As the team navigated through destroyed bridges and off-road terrains, the immense scale of devastation became apparent. From schools to health facilities, the vital infrastructure that supports the well-being and education of local communities was found in ruins.

With the assistance of Supreme Council for the Management and Coordination of Humanitarian Affairs and International Cooperation (SCMCHA), the inter-agency team visited four schools in the district. All four schools had been destroyed due to airstrikes from conflict, leading to dropouts. The remaining students are studying in open spaces or mosques.

The mission also visited Yasnam Health Unit, which functions as a district hospital after the destruction of Baqim Hospital. Yasnam is severely understaffed. Due to the lack of incentive payments for an extended period of time, zero doctors remain. Only a dedicated group of eight medical staff remain to provide essential care under severely limited resources. The health unit struggles to meet the needs of the community, particularly for women, who often have to travel long distances to access specialized care. The health unit has one midwife who helps pregnant mothers in the district; however, there is no specialist doctor for women.

Following the mission, OCHA has initiated several follow-up actions, including advocating for increased support to improve road

accessibility, education, WASH and health services. Recommendations include increasing the number of mobile clinics and installing solar pumping systems and water points in villages to facilitate access to clean water. A focus on girls' education and awareness-raising on the importance of education is also essential to decrease the number of student dropouts.

An estimated 5.4 million of the people in need (PiN) across Yemen are affected by access constraints.<sup>2</sup> The humanitarian community is committed to scaling-up interventions in areas where the needs are the most severe.

The inter-agency mission is a crucial step in addressing the humanitarian crisis in this region. By making a ground visit and engaging with local officials, the UN and humanitarian partners can now work towards providing much-needed assistance and resources to help these resilient communities recover.



*Al Fath School in Yasnam District, which was destroyed due to conflict. Credit: OCHA/Belal Al-Madhehagi, Ameen Abdulhameed.*

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<sup>2</sup> 2023 Humanitarian Response Plan. OCHA.

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