After more than eight years of conflict, Yemen remains one of the world’s largest humanitarian crises. The impacts of the prolonged conflict, compounded by an economic collapse, high levels of food insecurity, recurring natural disasters, such as droughts and floods, and lack of access to basic services, continued to drive humanitarian needs in 2022; exacerbated by critical funding gaps, global inflation and access challenges. The knock-on effects of the war in Ukraine, which have worsened global food shortages, impacted many households in Yemen as prices of food became unaffordable for vulnerable families.

A UN-brokered nationwide truce, which commenced on 2 April 2022, provided Yemenis with the first sustained reprieve from fighting since the start of the conflict in 2015; witnessing a substantial increase in fuel imports through the Hodeidah ports; enhanced humanitarian access in some areas, significant reductions in internal displacement and security incidents; opening of Sana’a airport to commercial flights with some 26,640 people travelling on commercial flights from Sana’a, many critically ill seeking medical treatment abroad. However, in October 2022 the second extension of the truce ended without an agreement being reached for the further extension and expansion of the truce.

The aid operation in Yemen remained severely underfunded throughout the year, forcing humanitarian partners, including UNFPA, to reduce lifesaving humanitarian assistance or close critical assistance programmes. The 2022 Yemen Humanitarian Response Plan secured only $2.4 billion or 56 per cent of the US$ 4.27 billion appeal for 2022 by the end of the year. UNFPA received only 40 per cent or US$60 million of its US$ 100 million appeal for 2022.

Despite funding shortages, UNFPA’s response reached 2.7 million individuals with life-saving reproductive health services, protection information and services and emergency relief in 2022, with support to 101 health facilities, 35 safe spaces, eight shelters and eight specialized mental health centres.
Ahlam, 37, was pregnant with her ninth child when her family was displaced from Rawan District to Al Jufinah Camp in Marib Governorate. Her body was exhausted from childbirth, displacement and lack of food during her ninth pregnancy. Ahlam’s complications worsened closer to the delivery, threatening her life and that of her unborn child. With no money to take Ahlam to a hospital, the husband resorted to an unskilled midwife to deliver at home.

Ahlam managed to deliver the baby, but soon after she began to bleed profusely. The midwife could not control the bleeding and rushed her to the nearest health clinic. At the clinic, she was provided with first aid, but the clinic was not equipped to provide the urgent treatment Ahlam required.

Ahlam body was turning blue, but the husband had no money left to pay for transportation to the nearest hospital.

With a stroke of luck, a visitor at the clinic offered to take Ahlam to Al Shaheed Mohammed Ha'il Health Centre – a health facility supported by KSrelief to provide emergency obstetric care services.

Ahlam arrived at Al Shaheed Mohammed Ha'il Health Centre unconscious, in a terrible state of shock. Ahlam had suffered a uterine rupture following the home delivery. The doctors could not stop the bleeding. Her blood levels had dropped drastically. A decision was taken to remove her womb in the hope of stabilizing the bleeding. “After six hours of surgery, when I saw her condition stabilize, I was overjoyed. The sound of the heartbeat monitor sounded like victory music,” said the gynecologist.

Ahlam was later admitted to the intensive care unit for five days, where her health gradually began to improve. “I felt like I died the moment I fainted,” tells Ahlam after recovering. When I slowly opened my eyes I thought I was opening them in my heaven, but I could hear the heartbeat monitor, then I knew I had made it out alive.
**RAPID RESPONSE MECHANISM (RRM)**

UNFPA is leading the efforts of three agencies i.e. UNFPA, UNICEF and WFP to distribute immediate, most critical life-saving emergency supplies to families who are newly displaced, on the move, in hard-to-reach areas or stranded close to the front lines, as well as most vulnerable returnees. The RRM minimum assistance package is comprised of these components: (1) ready to eat food provided by WFP; (2) family basic hygiene kits provided by UNICEF; and (3) one female dignity/transit kit provided by UNFPA. A total of 57,348 RRM kits were distributed from January to December 2022. Other highlights for the period June 2018 to December 2022 include:

### HIGHLIGHTS FROM JUNE 2018 TO DEC 2022

Since June 2018, RRM kits were delivered to **611,427 families (4.3 million individuals)**.

- **244,638** RRM kits distributed through the Al Hudaydah humanitarian hub from June 2018 to September 2022.
- **143,870** RRM kits distributed through the Aden humanitarian hub from June 2018 to September 2022.
- **97,710** RRM kits distributed through the Sana’a humanitarian hub from June 2018 to September 2022.
- **29,424** RRM kits distributed through the Ibb humanitarian hub from June 2018 to September 2022.
- **95,785** RRM kits distributed through the Sa’ada humanitarian hub from June 2018 to September 2022.

The RRM is operational country-wide. The map indicates RRM distribution by governorate and volume of distribution since January 2022.

**Donors to the RRM:** European Union Humanitarian Aid, USAID Bureau for Humanitarian Assistance and Yemen Humanitarian Fund
HIGHLIGHTS OF OVERALL RESPONSE  JAN - DEC 2022

PEOPLE REACHED

<table>
<thead>
<tr>
<th>NO.</th>
<th>1,610,410</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of people reached with reproductive health services</td>
<td>143,200</td>
</tr>
<tr>
<td>No. of safe deliveries supported</td>
<td>26,335</td>
</tr>
<tr>
<td>No. of cesarean sections supported</td>
<td>212,692</td>
</tr>
<tr>
<td>Individuals reached with Family Planning services</td>
<td>57,890</td>
</tr>
<tr>
<td>Dignity kits distributed</td>
<td>401,569</td>
</tr>
<tr>
<td>Individuals reached through the Rapid Response Mechanism</td>
<td>692,154</td>
</tr>
<tr>
<td>No. of women reached with protection information &amp; services</td>
<td>101</td>
</tr>
<tr>
<td>No. of health facilities supported with reproductive health services</td>
<td>35</td>
</tr>
<tr>
<td>No. of safe spaces supported</td>
<td>8</td>
</tr>
<tr>
<td>No. of women shelters supported</td>
<td>8</td>
</tr>
<tr>
<td>No. of supported specialized psychological care centres</td>
<td>8</td>
</tr>
</tbody>
</table>

IN THE NEWS

- Mental health needs in Yemen soar as resources remain scarce
  Watch...

- Safe spaces help to transform lives of women in Yemen
  Watch...

- Equipping health facilities to save lives of pregnant women
  Read more...

KEY CHALLENGES

- A non-permissive operating environment with limited humanitarian access and shrinking humanitarian space.

- Limited funding available for the continued provision of humanitarian services.

- Lack of national resources for the provision of basic social services.

- Lack of health workers in severely conflict-affected areas.

- Increasing restrictions imposed on implementing partners to undertake humanitarian operations in conflict-affected areas.

- Delays in transportation of supplies due to bureaucratic impediments.

2022 UNFPA RESPONSE FUNDING STATUS (US$)

- $100 M REQUIRED
- $40 M FUNDED
- $60 M FUNDING GAP

2022 Donors (alphabetical order): Canada, CERF, European Union, Iceland, KSrelief, Netherlands, Norway, Qatar, Sweden, Switzerland, USAID, Yemen Humanitarian Fund