

SITUATION REPORT FEBRUARY 2021



A group counselling session for migrants at IOM's Migrant Response Point in Aden © M. Mohammed/IOM 2021


45,294

Individuals provided with clean water and hygiene kits


30,308

Primary health care consultations conducted


4,960

Migrants received humanitarian assistance

SITUATION OVERVIEW

More than two years since the Stockholm Agreement, the conflict in Yemen continues unabated, driving displacement and worsening living conditions for millions. Protection risks for conflict-affected communities and migrants remain a concern. Civilian casualties resulting from fighting are on the rise; estimates suggest that the conflict has led to more than 233,000 deaths, including of more than 3,000 children .

At the same time, mobile populations—internally displaced persons (IDPs) and migrants—have continued to struggle to access services. The International Organization for Migration's (IOM) Displacement Tracking Matrix (DTM) teams estimated that a total of 17,394 people were displaced in February alone, bringing the total number of people so far in 2021 to 21,066 people. The [conflict in Ma'rib](#) has been a major driver of displacement, and in February, IOM and partners sounded the alarm on the humanitarian impact of renewed fighting across the governorate. More than 1,500 households were forced to flee conflict affected areas in Sirwah district. Many were already living in displacement sites and are now being forced to move for third time. With the ongoing fighting, the situation is expected to worsen and service gaps to widen. The most significant challenges to sustaining a largescale response activities are limited partner presence and insufficient resources.

COVID-19 is taking a toll on communities, contributing to a deterioration of living conditions, and impacting access to employment, remittances and basic services. The end does not seem near in sight, as Yemen grapples with a second wave of the virus amidst a weakened public health system. Underreporting remains a major concern, having a negative impact on surveillance, preventative and response activities. At a time when resources are urgently needed to respond to growing needs exacerbated by the COVID-19 pandemic, the humanitarian response to the world's worst humanitarian crisis remains severely underfunded.

The number of migrant arrivals to Yemen is on the decline due to COVID-19 related movement restrictions. A total of 1,255 migrants arrived in the country in February 2021 compared to around 9,624 arrivals in the same month in 2020. Thousands of migrants remain stranded in Yemen, many of whom are unable to access basic services and in dire need of food, shelter, health and protection assistance. Migrants are at increased risk of contracting diseases, including COVID-19, because they typically live in overcrowded conditions without the means to follow basic public health measures. In February, IOM provided humanitarian assistance to 4,960 migrants. Moreover, IOM has so far registered over 6,394 migrants (394 in February) in Aden through the Organization's Voluntary Humanitarian Return (VHR) programme, with the [first return flight](#) set to take off in March 2021.



COVID-19 RESPONSE

2,314 Reported Cases

635 Reported Deaths

The pandemic has had a catastrophic impact on Yemen where public health systems are weakened and communities have lived through six years of conflict. People are further losing access to livelihoods and income, while drops in remittances along with a depreciating currency have reduced purchasing power and limited basic services. Because of the lack of access to testing and surveillance, the full extent of the spread of the virus in Yemen remains unknown.

Despite the severe underreporting (2,314 cases reported country wide since the start of the pandemic), it has increasingly become clear for health partners that the country is dealing with a second wave of COVID-19. Behavioural changes aimed at reducing community level transmission remain to be a key priority, while IOM works on increasing surveillance; boosting testing capacity and protect essential health services.

IOM imported six GeneXpert testing machines and liaised with the Health Cluster and relevant authorities to begin using the machines in areas located far from laboratories. In Ta'iz, IOM provided one GeneXpert machine to Al Makha COVID-19 treatment centre and trained 10 lab technicians on sample collection and processing. IOM also provided 2,592 hygiene and COVID-19 awareness sessions to 6,853 people across the country. In Ma'rib, IOM is in the process of handing over COVID-19 quarantine centre in Al Jufainah IDP hosting site to the Governorate Health Office (GHO) for their continued administration. IOM teams also distributed 387 shielding kits to vulnerable households, including people with disabilities, in Al Jufainah camp. Additionally, IOM delivered personal protective equipment (PPE) to three hospitals and one isolation centre in Ma'rib city to support the national COVID-19 response.



CAMP COORDINATION & CAMP MANAGEMENT (CCCM)

IOM continued to provide camp coordination and camp management (CCCM) support in 62 IDP hosting sites, carrying out site improvements, coordinating service delivery, and conducting community mobilization and committee empowerment activities, in addition to the installation of solar panels. Following a recent escalation of conflict this month in Ma'rib which led to the displacement of over 1,500 HHs within three weeks, the CCCM teams responded by verifying displacement along with needs assessments, provision of urgent assistance, and referrals to relevant humanitarian actors.



101,079 Displaced people
supported in 62 sites

The situation in Ma'rib is especially concerning because even before the uptick in displacement this month, IOM and partners were already struggling to meet the needs of over 21,000 households (HHs) displaced since January 2020 alone. As of February, IOM and partners were only able to sustain support in 34 IDP hosting; while 91 IDP hosting sites (10,321 IDP HHs), including all 6 IDP sites in Sirwah district, are not supported by site management and coordination partners. Due to the risk of fire in overcrowded sites, the CCCM teams identified and trained 143 fire-wardens and provided 141 fire extinguishers in 12 IDP hosting sites in Ma'rib City and Ma'rib Al Wadi district. The teams held focus group discussions on safe cooking practices with 100 displaced women in five IDP hosting sites in Ma'rib city and Ma'rib Al Wadi.

In Ibb, IOM provided essential cooking propane cylinders to 634 households in 15 IDP hosting sites and provided and installed solar panels for 548 households in 17 IDP hosting sites. As part of livelihood opportunity initiatives, IOM continued supporting a three-month training on various sewing methods for 81 displaced women. The CCCM team provided 24 sewing machines and material to the trainees. IOM also supported the formation of maintenance, carpentry and plumbing committees in 17 IDP hosting sites. The 130 members of the committees received tool kits and on-the-job training to perform minor repairs in the sites. In Ta'iz, IOM teams installed solar lamps in three IDP hosting sites, benefiting 362 households. The teams continued overseeing lamps installation in six additional sites in south of the governorate.

WATER, SANITATION AND HYGIENE (WASH)

IOM's activities focus on vulnerable populations in Yemen, including displaced people, migrants and host communities, people living in cholera/malaria-affected areas, and those most at risk of contracting infectious diseases. This month, IOM provided 11.9 million litres of safe water to 28,850 households through vouchers and water trucking in 13 displacement sites in Sirwah, Ma'rib and Ma'rib City districts, and rehabilitated one water-point in Ma'rib benefiting 240 displaced households. IOM WASH teams continued carrying out hygiene promotion activities, providing 34 sessions to 4,560 IDPs in two sites in Ma'rib Al Wadi. The teams distributed 10,620 bars of soap and 885 long-lasting insecticidal nets to 1,481 displaced people from Sirwah in 16 sites in Ma'rib City and Ma'rib Al Wadi. An additional 663 basic hygiene kits were distributed to 4,560 individuals in Ma'rib city, as well as 120 hygiene kits to 720 individuals in Sirwah. IOM continued to support solid waste collection and disposal activities in 12 sites in Ma'rib City, Sirwah and Ma'rib Al-Wadi. Waste was collected, benefiting 74,166 displaced people. Additionally, the teams constructed eight latrines to support 48 IDPs relocated from Al Muasasa to Al Jufainah IDP site, Ma'rib City.

IOM resumed supporting solid waste collection and management in two sites in Tuban district, Lahj, reaching 5,110 people. IOM completed the rehabilitation of the Gael Marssas water-site and installation of solar power system in Shabwah, benefiting more than 1,800 people from displaced and host communities. IOM also completed the rehabilitation of a sewage system in Shabwah, ensuring that more than 20,000 individuals from the displaced and host community members can lead healthier lives. In Ta'iz, IOM provided a total of 1.4 million litres of safe water to 3,301 people in four IDP hosting sites. IOM continued providing capacity building training to local WASH actors on the operation and maintenance of water and sanitation supply systems. In February, 64 people in Ma'rib, three men in Ta'iz, and 12 people in Al Hodeidah received training.

HEALTH

In February, IOM carried out over 30,308 health consultations, including 2,740 with migrants, through 19 health facilities in Aden, Sana'a City, Lahj, Ma'rib, Ta'iz and Shabwah governorates. In response to the escalating conflict in Ma'rib, IOM conducted health assessments and coordinated response activities in its role as lead of the sub national health cluster, helping to identify gaps and partners to respond. In the same governorate, IOM provided training to 24 health workers on integrated management of childhood illnesses and another to 20 health workers on basic emergency of obstetric and neonatal care. In coordination with the Ministry of Public Health and Population (MoPHP) and relevant Governorate Health Offices (GHOs), IOM began providing support to six health facilities in Shabwah and Ta'iz and one mobile medical team in Ma'rib. In total, IOM is providing health support in 13 static primary and secondary health facilities and through six mobile clinics in six governorates. IOM continued supporting the National Malaria Program (NMCP) and conducted 10 review meetings for 247 community health volunteers (CHVs) on Integrated community case management (ICCM) in Hajjah, Shabwah, Al Maharah and Abyan governorates. IOM also sustained support to support the National AIDS Program (NAP) and provided food baskets to 1,837 people living with HIV (PLHIV) who receive antiretroviral therapy (ART) in five IOM-supported ART sites in Sana'a, Aden, Ta'iz, Al Hodeidah and Al Mukalla cities.



32,051 People supported with access to safe water



20,048 People served by sanitation systems rehabilitation



30,308 Health care consultations conducted



12 Facilities received equipment

IN FOCUS A YOUNG WOMAN'S JOURNEY TO PROVIDE FOOD FOR HER FAMILY

"I need a doctor. I can't even stand. Can you please help me?"

These were the first words that Monta, a young Ethiopian mother, said to the IOM mobile medical team in Shabwah. She was barely able to get the words out through her tears. The eighteen-year-old started her journey in Harar, Ethiopia. She had wanted to find well-paying work to be able to support her younger siblings.

"My father is dead. I have two brothers with disabilities and a sister who cannot hear. My mom is also sick so, I am the breadwinner of the family," said Monta. Adding to her responsibilities, she recently became a mother.

"I got married when I was 17 years old. My husband promised to let me study and finish my school, but he left me after one year. Now, I am taking care of our one-year-old baby alone," she explained.



Monta stands near the mobile medical team's clinic following her emergency treatment © M. Mohammed/IOM 2020

Migrants endure days or even weeks of trekking through difficult and dangerous terrain in the Horn of Africa and then cross the Gulf of Aden in cramped boats, hoping to continue north through Yemen and cross the border into the Kingdom of Saudi Arabia. Monta she did not know the trip would be so difficult and how far she would have to walk. The smugglers had sold her something different—an easy journey ending in a land of abundant opportunity.

"On the coast, after getting on the boat, I could not sleep and there was no food or water. The sea journey took more than 24 hours. We were squatting, tightly packed together, and sitting on top of each other. I spent more than two days without food or water," Monta added.

Every phase of the journey to Yemen is dangerous. While travelling in these boats, an unknown number of migrants lose their lives due to asphyxiation or drowning. Monta was lucky to survive but when she reached Yemen, she was exhausted and could not stand properly. IOM's mobile teams search the coast to provide emergency medical care to tired, dehydrated and hungry new migrant arrivals. When Monta arrived, the team were already present on the beach and ready to treat anyone in need. Dr Mukhtar Alshaibi who is IOM's mobile medical team leader, immediately proceeded with the necessary checks, while the team's translator made sure that the doctor and patient could understand each other. Monta was suffering from severe dizziness, fatigue, and joint and stomach pain as a result of the grueling journey and having not eaten for a long time. Laying down in mobile patient's bed, eating some food and being given medication was enough to help her to start feeling better.

A typical IOM mobile medical team consists of a lead physician and an assistant, a translator, a pharmacist and a driver. "We wake up at six o'clock in the morning every day ready to embark on a new life-saving mission. We travel long distances every day along the coast to search for vulnerable migrants, and we are fully prepared to provide life-saving assistance to migrants," explained Dr Mukhtar.

SHELTER & NON-FOOD ITEMS (S-NFI)

Through IOM's S-NFI teams and the Multisectoral Contingency Stock Pipeline partners, a total of 903 families were supported with emergency shelter materials and non-food items in Ma'rib, Ta'iz, Al Hodeidah and Sa'dah. Following the recent displacement in Ma'rib, IOM's rapid response mechanism (RRM) provided 452 households with RRM kits to cover their basic needs while 757 households received multi-purpose cash assistance (MPCA) in two IDP hosting sites in Sirwah and Ma'rib city. IOM is prepositioning shelter and non-food items (S-NFI) stocks through the nationwide Multi-sectoral Contingency Stock Pipeline, which is managed by IOM and DRC: this month, IOM transported 6,000 plastic sheets and 5,000 blankets to Sana'a and 20,000 blankets and 12,000 plastic sheets to Ibb, Sa'dah and Hajjah to serve as contingency stocks in case of emergency.

As part of IOM's transitional shelter activities, the S-NFI team conducted beneficiary verification for the construction and provision of shelters to 675 households in 15 IDP hosting sites in Ta'iz. In Ma'rib, 850 transitional shelters were provided, and the teams registered and verified an additional 726 households for transitional shelter support in five IDP hosting sites in Ma'rib city and Ma'rib Al Wadi. IOM S-NFI teams continued shelter improvement activities through the cash-for-shelter modality. In February, 590 IDP households received their first installment, and 165 households received the second installment to carry out shelter rehabilitation activities and improve the living conditions in two displacement sites in Ma'rib. The teams also conducted assessments in 10 additional sites in Ma'rib Al Wadi and Ma'rib City. A total of 1,145 households were identified to receive shelter rehabilitation assistance in Al Jufainah IDP site.

CASH

With the continued decline of the Yemeni Rial (YER) against the dollar in the south, access to commodities remains a challenge faced by many displaced and host community members. IOM provides multi-purpose cash assistance (MPCA) to newly displaced families with extremely limited economic resources to help them meet their basic needs and reduce their reliance on negative coping mechanisms especially amid the COVID-19 pandemic. MPCA is considered as an ideal response mechanism for its recognized effective and harmonized coordination structure. IOM is co-lead of the Rapid Response Mechanism in Yemen and in January, supported 398 displaced households with MPCA (YER 117,000 per family) in Abyan, Al Hodeidah, Hajjah, and Ta'iz. The cash transfers were conducted by an established financial service provider identified and contracted by IOM.



577 Households provided with emergency shelter materials



342 Households provided with humanitarian relief items



1,974 Displaced families supported through cash assistance



The S-NFI team helps a displaced family build their shelter with materials from IOM in Al Machka © M. Mohammed/IOM 2021

TRANSITION AND RECOVERY

While the conflict continues, there are pockets of stability where there are opportunities to maintain development gains. IOM supports the recovery, with the rehabilitation and construction of schools and core infrastructure, by providing livelihood opportunities to increase household incomes and building local capacity to resolve community-level conflicts. The transition and recovery team continued activities in Ma'rib, Lahj, Aden and Hadramawt. Technical assessments for five schools in Hadramawt were completed and three were identified for rehabilitation. In Ma'rib, the team completed technical assessments for one community-based infrastructure project and nine are in tendering process, including schools, health facilities and WASH infrastructure. The team also commenced consultations with local stakeholders in Ma'rib on capacity building activities. In Lahj, IOM conducted field visits to three communities and carried out assessments on WASH and medical needs, while also conducting community consultations to identify appropriate programming approaches.

PROTECTION

A total of 1,255 migrants are estimated to have entered the country in February — many of whom are unable to access basic services are in dire need of food, shelter, health and protection assistance, putting further pressure on host communities and public services. IOM continues to advocate for migrants' rights in Yemen and provide emergency assistance to those transiting through and stranded in the country through its Migrant Response Points (MRPs) and mobile protection teams. In February, 394 migrants were registered for Voluntary Humanitarian Return (VHR) at the Aden Migrant Response Point, which brings the total number of people registered since October 2020 to 6,394. Preparations continued to facilitate the voluntary return of 600 Ethiopian migrants to their country of origin through IOM's VHR. The first return flight is set to take off in March 2021. In Ma'rib, the protection team provided 29 migrant families with child-care kits. Additionally, 27 migrant women participated in a cash-for-work initiative supported by IOM to produce face masks. IOM also supported 123 IDPs and 1,300 migrants through food assistance, individual case management assistance, including shelter, cash for protection and NFIs.



4,960 Migrants received protection assistance

DISPLACEMENT TRACKING MATRIX (DTM)

DTM's Rapid Displacement Tracking (RDT) activities covered 13 governorates where IOM has access. From 1-28 February, IOM tracked 17,394 displaced individuals (2,899 households) who have mainly moved within and to Ma'rib, Ad Dali', Ta'iz and Al Jawf governorates. Of those tracked, approximately 55 per cent reported that they lacked access to adequate shelter, with food (20%), non-food items (20%) and water (13%) also reported to be of concern. The arrival of 1,255 migrants was recorded through flow monitoring points during February. When compared against migrant arrivals in January 2021 (2,500), the number of arrivals has reduced by 50 per cent. IOM recorded migrant arrivals through flow monitoring points in Lahj and Shabwah governorates, with the majority originating from Ethiopia (87%) and Somalia (13%). In total, 47 per cent of recorded migrant arrivals traveled through Somalia, and the remainder from Djibouti (53%). IOM teams do not have access to Manfath Alwadeeah on the KSA-Yemen land border point, and therefore cannot report information on Yemeni returnees. Find all DTM reports on displacement and migration [here](#).



1,255 Migrant arrivals in February



17,394 Displaced individuals tracked in February

IOM YEMEN'S ACTIVITIES IN FEBRUARY 2021 WERE SUPPORTED BY

