

## Key nutrition challenges



**2.25M** children under 5 years were **wasted** in 2021  
**395 200** of them were **severely wasted**



**1.16M** pregnant and lactating women were **acutely malnourished**

Source: IPC, February 2021.

**High levels of acute food insecurity, mass displacement, exhaustion of coping capacities and the collapse of basic health, nutrition and WASH services have had a devastating toll on the nutritional status of children under 5 years and women.**

In Hodeidah, at least 30 percent of children under 5 years were wasted. Hodeidah Lowland, Taiz Highland, Hajjah Lowland, Sana'a City and East Ibb accounted for nearly half of the severely wasted children (IPC, February 2021).

Some 46.4 percent of children under 5 years of age are stunted. Some 61.5 percent of women aged 15–49 years are affected by anaemia, indicating a severe public health problem (Global Nutrition Report 2021).

### Key drivers

#### Food security and access to healthy diets

In Yemen, high levels of acute food insecurity coincide with high levels of acute malnutrition. All 22 northern zones classified in a Serious or worse (IPC AMN Phase 3 or above) phase of acute malnutrition from January–March 2021 were also classified in Crisis or worse (IPC Phase 3 or above) state of acute food insecurity (IPC, February 2021).

#### Health services and household environment

Ongoing armed conflict, destruction of health facilities and limited access to safe drinking water and improved sanitation facilities contribute to high levels of disease outbreaks. Since 2020, the fragile healthcare system has faced the collateral impact of COVID-19, which has drained meagre resources and resulted in fewer people seeking medical care (UNICEF, February 2021).

Disease outbreaks, such as cholera, malaria and Acute Respiratory Infections (ARIs), put further pressure on a health system that is greatly constrained in terms of skilled personnel, functionality, supplies, logistics and poor health-seeking behaviour (IPC, February 2021).

The current cholera epidemic in Yemen has been ongoing since October 2016. Between 1 January and 30 November 2021, nearly 27 000 acute watery diarrhoea/cholera suspected cases were reported, a significant decline compared with the same period of 2020 (nearly 222 000 suspected cases) (UNICEF, February 2022).

Approximately 20.1 million people reportedly required assistance to access health services in early 2021, more than half of them children. Immunisation programmes for over ten types of lifesaving vaccines, including those for polio, measles and COVID-19, faced major disruptions (UNICEF, February 2022).

Poor water, sanitation and hygiene (WASH) services are a major concern in all zones (IPC, February 2021). More than 15.4 million people urgently need assistance to access WASH services (UNICEF, February 2022).

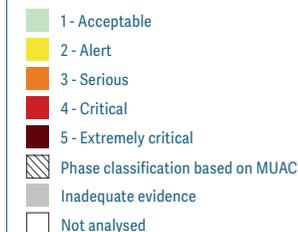
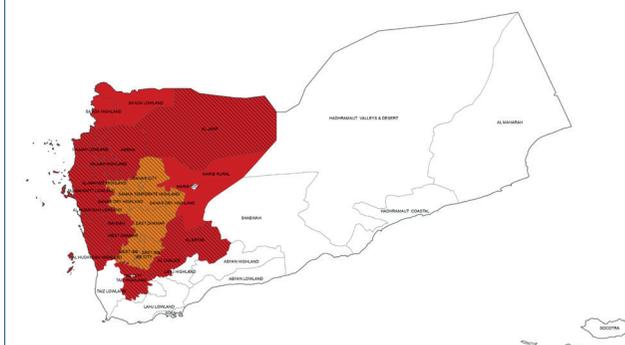
#### Caring and feeding practices

Almost one third of families have gaps in their diets, and rarely consume foods like pulses, vegetables, fruit, dairy products or meat (WFP, January 2022). About 40 percent of children aged 6–23 months in the north and 50 percent in the south were meeting minimum dietary diversity requirements. Exclusive breastfeeding prevalence was worse in the south (25 percent, indicating a 'Critical' public health concern) than the north (35 percent, indicating a 'Serious' public health concern) (IPC, February 2021).

MAP 3.68

### IPC acute malnutrition situation, January–March 2021

From January–March 2021, out of 22 zones analysed in the north, 15 were classified in Critical (IPC AMN Phase 4) and seven in Serious (IPC AMN Phase 3).



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Source: Yemen IPC AMN Technical Working Group, February 2021.