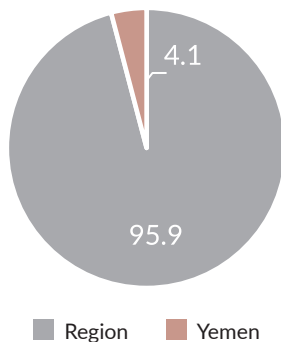


Yemen

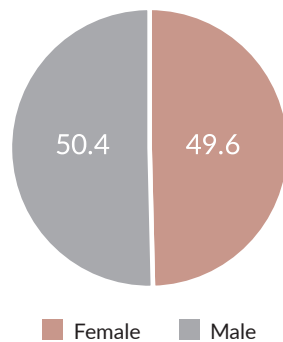
Demographics

Total population (2020)	29 825 968
Life expectancy at birth (years) female/male (2019)	68/64
Under-5 mortality rate (per 1000 live births) (2019)	58
Gross domestic product per capita (current US\$) (2018)	824.1

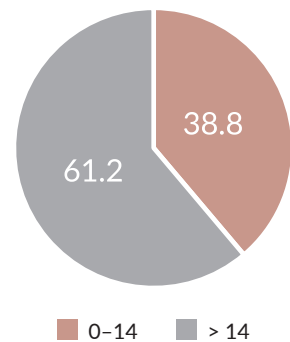
Population as percentage of regional total, 2020



Percentage of female and male population, 2020



Population aged 0-14 of total population, 2020

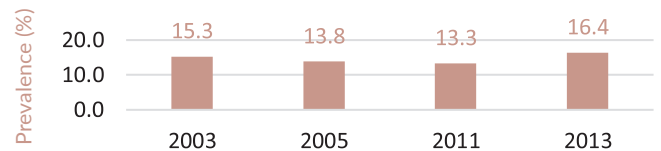


Source: The World Bank

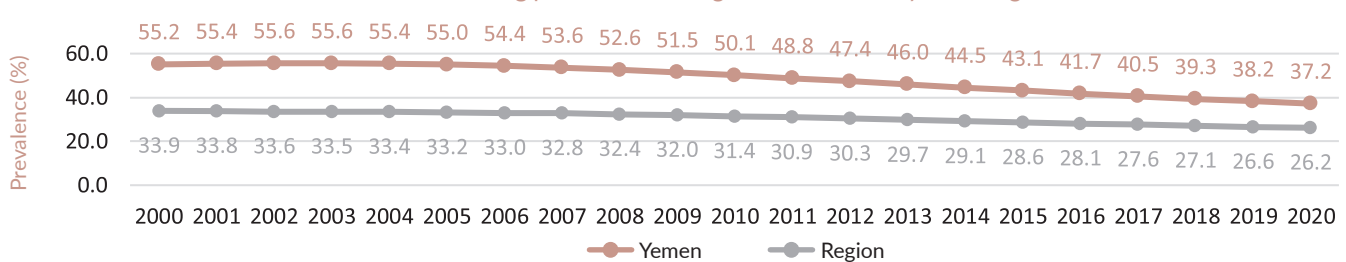
Child malnutrition

The prevalence of wasting in children under five has been at a high level in Yemen throughout the measuring period; the latest estimate from 2013 is 16.4%. The prevalence of wasting decreased from 55.2% to 37.2% over the past two decades, although it remains at very high level. During the same period, the prevalence of overweight in children under five decreased from 4.8% to 2.7%, significantly lower than the regional average.

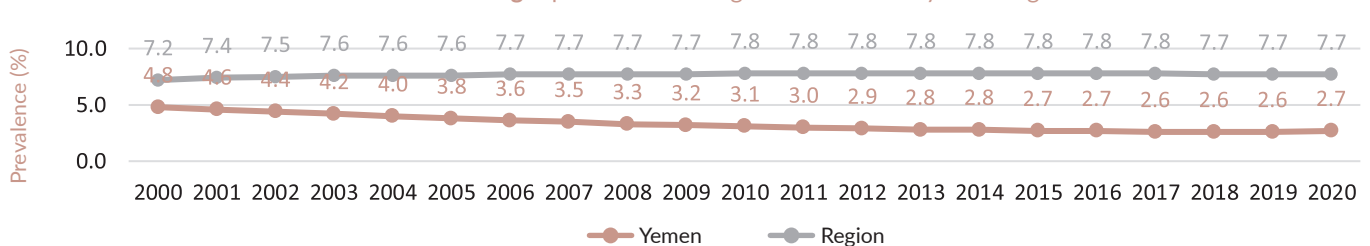
Wasting prevalence among children under 5 years of age



Stunting prevalence among children under 5 years of age



Overweight prevalence among children under 5 years of age

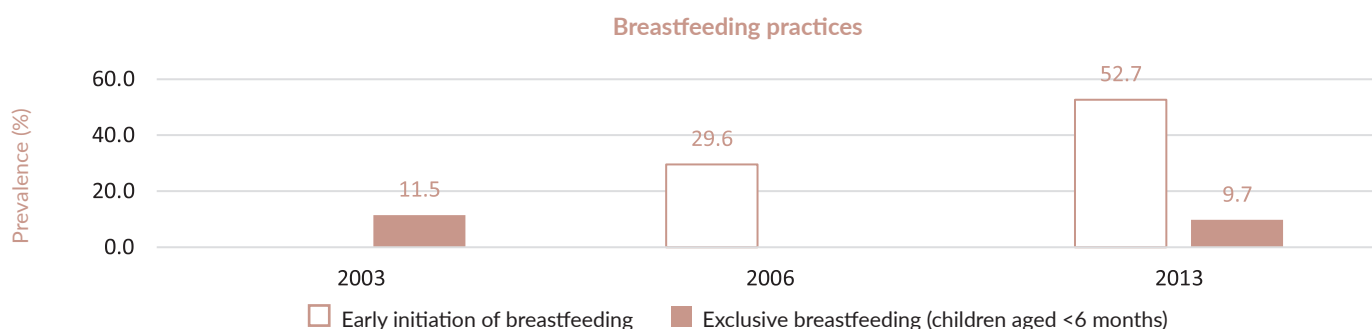


Source: WHO Global Health Observatory.

Note: : The UNICEF/WHO/WB joint child malnutrition estimates for stunting and overweight are modelled at logit (log-odds) scale using a penalized longitudinal mixed-model with a heterogeneous error term. The country modelled estimates are generated using the JME country dataset, which uses the collection of national data sources. Due to this method, estimates may differ from official estimates of Member States (i.e., the stunting prevalence from a household survey for a given country in a given year is not reported as the prevalence for that country in that year; rather, it feeds into the modelled estimates). The methodology is described here: <https://www.who.int/publications/i/item/9789240025257>. Wasting is defined as a percent weight-for-height that is two or more standard deviations below the median. Stunting is defined as a percent height-for-age that is two or more standard deviations below the median. Overweight is defined as a percent weight-for-height that is two or more standard deviations above the median.

Infant and young child feeding

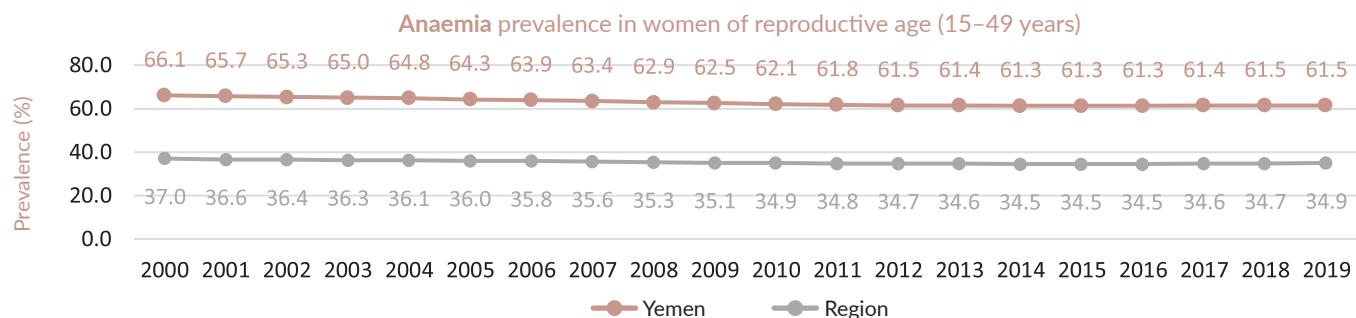
The prevalence of early initiation of breastfeeding (within one hour of birth) in Yemen increased from 29.6% in 2006 to 52.7% in 2013. The prevalence of exclusive breastfeeding remained at almost similar level between the years 2003 (11.5%) and 2013 (9.7%).



Sources: UNICEF

Anaemia in women of reproductive age

The prevalence of anaemia in women of reproductive age (pregnant and non-pregnant women combined) has remained at a very high level throughout the past two decades, with the latest estimate from 2019 being 61.5%.



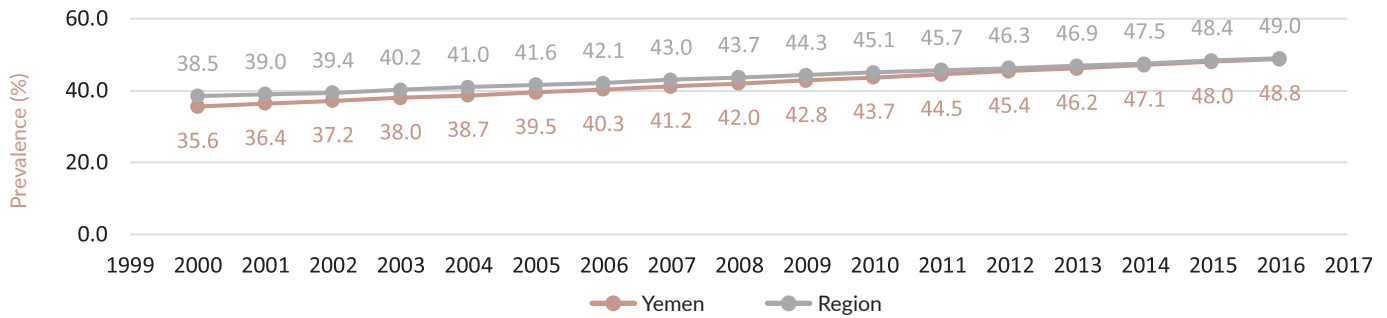
Source: WHO Global Health Observatory.

Note: The WHO global anaemia estimates are derived from a hierarchical Bayesian mixture model that uses all available data to make estimates for each country and year. In the model, estimates for each country are informed by data from that country itself, if available, and by data from other countries, especially those in the same region. Due to this method, the estimates may differ from official estimates of Member States. The methodology is described here: https://cdn.who.int/media/docs/default-source/anaemia-in-women-and-children/hb-methods-for-gather.pdf?sfvrsn=da0ffb5f_11 and here: <https://pubmed.ncbi.nlm.nih.gov/25103581/>.

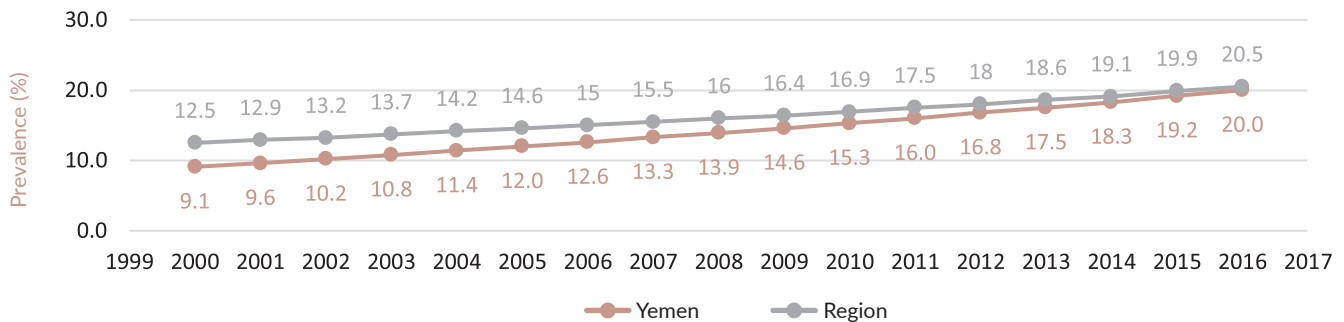
Overweight and obesity

An overall increase in the prevalence of overweight among adults in Yemen was recorded between the years 2000 and 2016 (from 35.6 to 48.8%). Also, the prevalence of overweight among children and adolescents aged 5–19 rose from 9.1% in 2000 to 20% in 2016.

Overweight prevalence among adults, (age-standardized estimate)



Overweight prevalence among children and adolescents (5-19), (crude estimate)



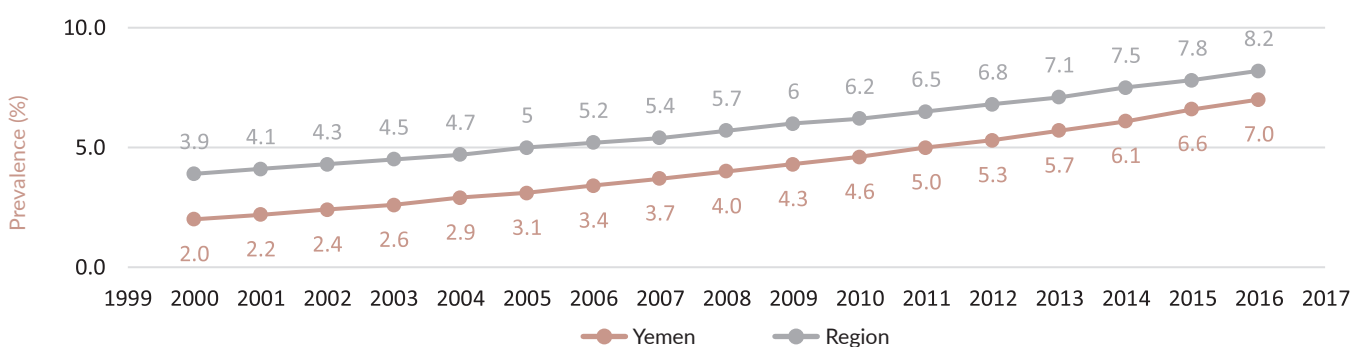
BMI = body mass index. (Overweight in adults is defined as a BMI of 25 or greater, and in children and adolescents as a BMI one or more standard deviations above the median. Obesity in adults is defined as a BMI of 30 or greater, and in children and adolescents as a BMI two or more standard deviations above the median.)

Although Yemen has a low incidence of obesity among adults, its prevalence doubled between 2000 and 2016, from 8.8% to 17.1%. Similarly, the prevalence of obesity among children and adolescents aged 5-19 increased between 2000 and 2016, from 2% to 7%.

Obesity prevalence among adults (age-standardized estimate)



Obesity prevalence among children and adolescents (5-19), (crude estimate)



Source: WHO Global Health Observatory.

Note: The WHO estimates for overweight and obesity are derived from a Bayesian hierarchical model that uses NCD-RisC database of population-based data. The model has a hierarchical structure in which estimates for each country and year are informed by its own data, if available, and by data from other years in the same country and from other countries, especially those in the same region with data for similar time periods. Due to this method, the estimates may differ from official estimates of Member States. The methodology is described here: <https://pubmed.ncbi.nlm.nih.gov/29029897/>.

Micronutrient status

The iodine intake in Yemen is considered adequate (defined as 100–299 µg/L) as the estimated median urinary iodine concentration among school children was recorded as 101 µg/L in 2015.

Source: WHO Micronutrients Database. Vitamin and Mineral Nutrition Information System.

Nutrition policies and strategies

Key national programmes

		Date
Development of national nutrition strategy or action plan ^{a, b}	✓	Updated 2022
Plan of action for obesity prevention ^c	✓	
Strategy or plan of action on infant and young child feeding ^c	✓	
Code of marketing of breast milk substitutes ^{a, c, d, e}	✓	2002
Child growth monitoring ^c	✓	
School feeding programme ^c	✓	
Community-based management of acute malnutrition ^{a, c}	✓	Since 2013

Policies	Policy to reduce salt/sodium consumption	Tax on sugar sweetened beverages	Policy to limit trans-fatty acid intake	Policy to reduce the impact of marketing of food to children	Policy on salt iodization ^{a, c, f}	Front-of-pack nutrition labelling for food	Wheat flour fortification ^{a, c, g}
	✗	✗	✗	✗	✓	✗	✓

✓ = Policy/programme implemented ✗ = Policy/programme not implemented

^a Policies in Yemen: In: Global database on the Implementation of Nutrition Action [website]. Geneva: World Health Organization; 2022 (<https://extranet.who.int/nutrition/gina/en/policies/1586>, accessed 28 July 2022).

^b WHO Eastern Mediterranean Regional Office database in collaboration with WHO country office and Ministry of Health.

^c Programmes in Yemen: In: Global database on the Implementation of Nutrition Action [website]. Geneva: World Health Organization; 2022 (<https://extranet.who.int/nutrition/gina/en/policies/1586>, accessed 28 July 2022).

^d Al Jawaldeh A, Sayed G. Implementation of the International Code of Marketing of Breastmilk Substitutes in the Eastern Mediterranean Region. *East Mediterr Health J.* 2018(1):25–32. doi:10.26719/2018.24.1.25.

^e Marketing of breast milk substitutes: national implementation of the international code, status report 2020. Geneva: World Health Organization; 2020 (<https://www.who.int/publications/i/item/9789240006010>, accessed 6 June 2022).

^f Doggui R, Al-Jawaldeh H, Al-Jawaldeh A. Trend of iodine status in the Eastern Mediterranean Region and impact of the universal salt iodization programs: a narrative review. *Biol Trace Elem Res.* 2020; 198, 390–402. doi.org/10.1007/s12011-020-02083-1.

^g Al-Jawaldeh AE. The regional assessment of the implementation of wheat flour fortification in the Eastern Mediterranean Region. *Int J Sci Res Manag.* 2019; 7(03), 28–37. doi:10.18535/ijrsm/v6i3.ft01.

Success stories

Early detection of malnutrition in Yemen

The Ministry of Public Health and Population, with support from WHO and funding from the World Bank and in collaboration with partners, has established a facility-based sentinel site surveillance system in district hospitals across the country. Regular screening is routinely conducted for all forms of malnutrition among children attending health facilities. The system aims to detect malnutrition early and ensure timely case referral, as well as functioning as an early warning system. Between January and April 2022, 242 009 children aged under 5 were screened for malnutrition in 300 health facility nutrition surveillance sentinel sites in 205 districts in 21 governorates. In addition to enabling the early identification of individual cases, this surveillance enables the close monitoring of particular areas considered to be at high risk. In March 2022, for example, a very high proportion of severe acute malnutrition cases was identified in 13 districts and a very high proportion of stunting in 141 districts.

Ministry of Health Website: <https://moh.gov.ye/en/home.aspx>

WHO-EM/NUT/310/E