



A health worker screens a child for malnutrition.

The ongoing escalation of conflict across Yemen's west coast continues to drive displacement, disrupt essential services, and increase humanitarian needs across Hodeidah and Taiz governorates. Local authorities have appealed for urgent humanitarian assistance.

As of September 27, the cumulative displacement caseload had increased by approximately 109% (180,513 individuals), while the number of displaced households rose by approximately 118% (27,413 households), compared with 86,415 individuals from 12,597 households reported on September 17. Government-controlled areas of Taiz host about half of all displaced families, followed by Lahj (21%) and Aden (14%).¹

Almost 70% of displaced populations remain within their governorate of origin and continue to rely on local health services for essential care. As local facilities continue to serve non-displaced crisis-affected families, continued support in these areas remains essential to ensure access to lifesaving services for both displaced populations and vulnerable host communities.

Health and nutrition needs are expected to rise. Severe acute malnutrition (SAM) is expected to remain a significant concern, with an estimated 9,142 children requiring treatment.² Growing stockouts of nutrition commodities amid humanitarian access constraints are increasing the risk of interruptions to lifesaving nutrition services.

International Medical Corps Response

International Medical Corps continues to adapt our integrated health, nutrition, mental health and psychosocial support (MHPSS), and maternal, newborn and child health (MNCH) programming to respond to the rapidly evolving humanitarian situation in Yemen. International Medical Corps has maintained a presence on the west coast, with 18 of 19 static primary

FAST FACTS

- 180,513 individuals from 27,413 households have been displaced.
- Eighteen of 19 International Medical Corps-supported health facilities are now functional across the west coast, up from 15 in the last two weeks.

OUR FOOTPRINT

- Across Yemen, International Medical Corps supports 63 health facilities with an estimated coverage of 3.3 million people across seven governorates: Aden, Al Dhale'e, Al Hodeidah, Ibb, Lahj, Sana'a and Taiz.
- Our lifesaving multi-sectoral assistance prioritizes active conflict zones and high-risk environments. In 2025, we reached more than 400,000 people with integrated humanitarian programming.

OUR RESPONSE

- International Medical Corps-supported mobile medical teams provided 271 medical consultations, screened 54 children under 5 and 28 pregnant and lactating women for acute malnutrition, provided immunization services to 31 women and 20 children, and conducted 32 antenatal care consultations.
- We provided 5 metric tons of essential medicines and medical supplies to Al Thawra Hospital, a key referral facility serving cases from the west coast and displaced families in Taiz. This will help sustain critical health services for approximately two months, amid increasing needs and ongoing supply constraints. Continued availability of medicines and medical supplies remains essential to ensuring uninterrupted access to lifesaving care for displaced populations and vulnerable host communities.

¹ WHO Yemen, Conflict Escalation Situation Report #5

² 2026 Taiz Health and Nutrition Cluster Partner Operational Preparedness and Response Plan

healthcare facilities and one mental health hospital currently functional and serving conflict-affected, displaced and vulnerable populations across affected areas in Al Hodeidah and Taiz governorates.

Since September 16, International Medical Corps-supported mobile medical teams serving displaced populations have provided 271 medical consultations, immunization services to 31 women and 20 children, and 32 antenatal care consultations. They also have screened 54 children under 5 and 28 pregnant and lactating women for acute malnutrition. They have identified nine cases of SAM and 29 cases of moderate acute malnutrition (MAM), representing 17% and 54% respectively of the 54 children under 5 screened, indicating a substantial burden of acute malnutrition among the displaced families reached. Of the 31 women immunized, 26 received a first dose and five received a second dose. All 32 antenatal care consultations represented first visits. These results demonstrate the value of mobile outreach in rapidly identifying unmet health and nutrition needs among displaced families, enrolling vulnerable individuals into lifesaving services and creating opportunities for continued follow-up and continuity of care.

International Medical Corps continues to engage with health authorities at the local, subnational and national levels, and actively participates in humanitarian coordination efforts to support a coordinated response and sustain access to essential healthcare services for displaced populations and host communities across the west coast.

International Medical Corps has provided 5 metric tons of essential medicines and medical supplies to Al Thawra Hospital, a key referral facility serving displaced families in Taiz and receiving referrals from the west coast. However, needs remain high. As of September 24, at least five health facilities reported stockouts of ready-to-use therapeutic food, which affects management of SAM, while three facilities had exhausted stocks of ready-to-use supplementary food used for the management of MAM. Without immediate de-escalation of the conflict and additional humanitarian support, health facilities and mobile response teams will face significant challenges in maintaining essential health, nutrition, MNCH, MHPSS, and acute watery diarrhea/cholera response services at a time when humanitarian needs continue to increase.

Since 2012, International Medical Corps has provided integrated health, nutrition, protection, cash and voucher assistance, and water, sanitation and hygiene services in Yemen, addressing immediate humanitarian needs while strengthening resilience and supporting the continuity of essential services. With a strong presence in the country, we provide direct services while working with community-based organizations, women-led groups and government institutions to expand access to quality services. By helping local actors, we strengthen communities' resilience, self-reliance and capacity to withstand recurrent shocks and vulnerabilities in a protracted crisis.