

Emerging

crises



The need for humanitarian work will remain high but they should be provided within the framework of the humanitarian-development-peace nexus.



The long-term impact of the COVID-19 crisis must be addressed throughout the decade with capacity-building and financing for all related needs — social, financial and medical.



Climate-related crises are likely to increase in frequency and severity; mitigation measures must be included in all national planning and in development financing.

Many structural issues and crises in the four Arab LDCs have been discussed in some detail in the earlier sections. This section discusses only those which are either new or have only become particularly pressing in the course of the second decade of the twenty-first century.

A. The emerging gravity of the humanitarian crises

During the decade, there has been a significant shift from development to humanitarian aid (table 23), with a remarkable reduction of development investments, which previously dominated, particularly in Yemen and the Sudan. This shift is easily explained by the dramatic worsening of the humanitarian crises in the region, resulting from the combination of economic collapse, governance failures and the series of climate-related disasters and emergencies.

Regardless of the emphasis on humanitarian aid, support remains far below what is required (table 24). Moreover, with the exception of Yemen in 2019, average financing for humanitarian crises is about 60 per cent of United Nations appeals. Although the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) records cover the

majority of funding, some funding falls outside its framework. There is increasing attention during the monthly meetings of key donors to Yemen convened by the World Bank and UNDP to the humanitarian-development-peace nexus and the importance of strategically approaching the crisis, especially in Yemen, taking into consideration the worsening gap between HRPs issued annually by the United Nations and donor's contributions.

The figures in table 23 on humanitarian needs for 2020 were prepared before the many additional disasters which struck the region in 2020, including the COVID-19 pandemic, severe flooding and locust infestations. Consequently, the needs for 2020 are far higher than they were in 2019, but the amounts available from the international community are well below even the earlier estimated requirements. In the

Table 23. Humanitarian and development aid disbursed to Arab LDCs

	Period	Total aid disbursed	Humanitarian aid		Development support	
		(millions of dollars)	(millions of dollars)	(percentage of total aid)	(millions of dollars)	(percentage of total aid)
Mauritania						
Sudan	2005-2015	16.4	9.2	56	7.2	44
Somalia	2010-2019	1 858	934	50	924	50
Yemen	2011-2018	17.4	12.688	73	4.7	27
Sources: Else	Sources: Elsewhere in report for Somalia and the Sudan, Yemen Humanitarian from FTS.					

Figure 25. Number of people in need in Yemen, 2010-2020 (Millions)

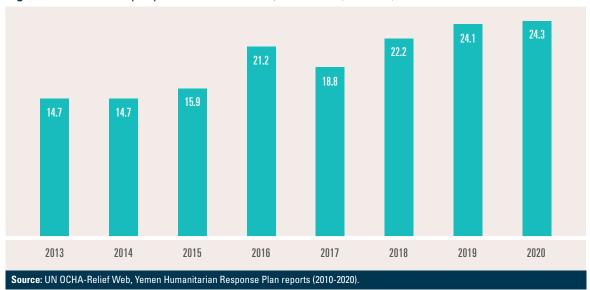
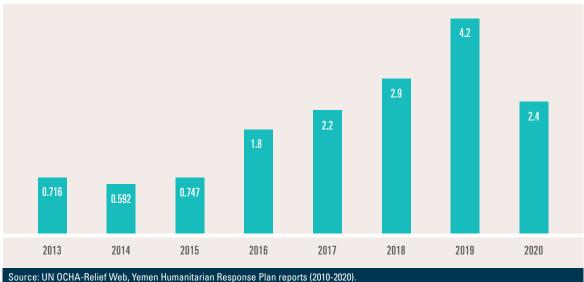


Figure 26. Total support required in Yemen, 2010-2020 (Billions of dollars)



case of Yemen, the funding requirement set by OCHA for 2020 was already estimated at 25 per cent lower than in 2019, without any indication that needs might be lower. As is frequently the case, there is a significant gap between those listed as 'in need' and those actually 'targeted' by the humanitarian agencies. Furthermore, as actual funding is usually lower than the funding figure upon which United Nations

humanitarian plans are based, the 'targeted' figure specified within those plans can often not be reached, leaving millions in need and without any support.

The medium- and long-term risks of this shift have been discussed above with respect to the sustainability of programmes. There is no doubt that emergency humanitarian aid

Table 24. Change in humanitarian funding 2010–2020 (Millions of dollars)

	2020		2019 2019		2015	2015		2010	
	Required	Funded percentage	Required	Funded percentage	Required	Funded percentage	Required	Funded percentage	
Mauritania					95	55			
Sudan	1 600	51	1 100	52	1 000	56	596	67	
Somalia	1 000	77	1 100	83	863	45	1 800	60	
Yemen	3 400	46	4 200	87	1 600	55	186	65	
Source: OCHA	Source: OCHA, "Appeals/Plans", Financial Tracking Service.								

Table 25. The humanitarian crisis within Arab LDCs, 2020

	People in need (millions)	People targeted by United Nations plan (millions)	Humanitarian funding (percentage as of December 2020)	Change from 2019 (percentage points)
Mauritania	0.6	-	60.0	-
Sudan	9.3	5	53.0	+14
Somalia	5.2	3	79.0	-12
Yemen	24.0	16	48.5	-27
Source: OCHA, Global Humanitarian Overview 2020, 2020; OCHA, "Appeals/Plans", Financial Tracking Service.				

is desperately needed in the face of climate disasters and political upheavals which affect the population at large and particularly the most vulnerable. From a purely humanitarian point of view, such assistance is justified. However, given that the wealthier members of the international community are largely responsible for the problems arising from global warming, and consequently the climate disasters, and are at least partly responsible for the poor performance of development strategies, those same members also have a duty to help remedy this situation. However, it is only through development investment that enables the citizens of the LDCs to establish viable economies and provide income and employment for the population that the longterm problems can be solved and stability

re-established. Therefore, the balance between development and humanitarian aid must be reversed to avoid the need for emergency humanitarian assistance in the medium- to long-term.

As of the end of 2020, both the Sudan and Yemen were declared by the United Nations as being on the brink of famine, 106 while funding for humanitarian efforts remained well below the estimates made prior to the latest crises, with Yemen showing the largest proportional shortfall, largely due to a sharp reduction of support from GCC States. Out of six Gulf countries, only Saudi Arabia donated \$500 million to Yemen during the virtual High-Level Pledging Event for the Humanitarian Crisis in Yemen, Riyadh 2020. 107

B. The COVID-19 crisis and health sector issues

The analysis in this section is informed by an assessment of the impact of COVID-19

on global poverty by Giovanni Valensisi. 108 Occurring in the context of pre-existing

inequalities, economic sluggishness, unstable global economic markets and uncertainties regarding development policy, the COVID-19 crisis has subjected LDCs to supply and demand shocks and exacerbated the humanitarian crises that many of them face. The sudden disruptions to global value chains, intermittent and sudden border closures and the decline in global trade have slowed economic activity, while waves of redundancies, layoffs and the closure of workplaces have reduced demand. Any decline in external demand will disproportionately hurt poor households employed in labour-intensive manufacturing and agriculture sectors, which will further undermine state efforts to eradicate extreme poverty and achieve SDG 1. The adverse effects of trade shocks resulting from the fall in commodity prices (with oil, minerals, food and other commodities accounting for more than 70 per cent of goods exported from LDCs), the decline in global FDI and capital flows and the debt obligations of many LDCs are serious challenges to Governments' abilities to increase expenditures on social protection and safety net measures in response to the pandemic. The absence of social protection systems - or, where they exist, their failure to reach workers in the informal economy and other vulnerable segments of the population – exposes populations in LDCs to further effects from such shocks. The International Labour Organization (ILO) has predicted that close to 300 million will lose their jobs worldwide with a large number of informal sector workers in immediate risk of job losses, and other studies have found that the number of people living below \$1.90 per day could increase by 68 million in 2020 alone.

The severity of the impact of the pandemic depends on a number of factors, including the state of a country's health system and the extent of the health crisis it faces, the economic impact of the crisis which in turn is dependent on the structural aspects of the economy, such as the dependence on primary commodities, key markets or value chains, the availability of fiscal

space, and outstanding debt, and the scale of pre-existing vulnerabilities and humanitarian emergencies in the country. Even though some developing countries may not suffer directly from large numbers of cases, they remain highly vulnerable to the economic impacts of the pandemic. The World Bank estimated early in the pandemic that the number of highly food insecure people would increase by 25 per cent as a result of the pandemic. It is estimated that in Sub-Saharan Africa, the 2020 headcount poverty ratio is estimated to increase by 2.7 per cent, corresponding to an additional 31 million people living in extreme poverty in the wake of the pandemic. In the Middle East and North Africa, the incidence of extreme poverty is also estimated to increase by more than 1.2 per cent.

Beyond the destructive humanitarian and developmental impact of the political instabilities faced by Arab LDCs such as Yemen and Somalia, the COVID-19 pandemic has dealt a double-pronged blow to these economies. The Arab LDCs' weakened health infrastructure and public welfare capacities have undermined their institutional responses to the pandemic, while disruptions to global and domestic value chains have worsened unemployment, inequality, poverty and displacement. The pandemic has also led to reduced remittances from workers from Arab LDCs based in economies suffering retrenchment as a result of the pandemic and reduced demand for their exports, affecting state budgets and private sector incomes. A further side effect has been increased instability as populations took to the streets either in response to the inadequate performances of their Governments, or in political opposition regardless of the medical and political risks. Further such uprisings are to be expected, including in the four Arab LDCs.

The WHO declared the COVID-19 outbreak as a pandemic on 11 March 2020. The United Nations' "Global Humanitarian Response Plan COVID-19" listed the Sudan, Somalia and Yemen as priority

countries due to ongoing humanitarian crises in those countries, their weak healthcare systems and the projected implications of the pandemic.109 Out of an estimated \$20 trillion allocated to the global COVID-19 response, \$8.5 billion were spent in LDCs, landlocked developing countries and small island states as of October 8 2020.110 Responding to the pandemic is particularly challenging in countries with stretched health systems, where around 75 per cent of the population lacks access to soap and water¹¹¹ and testing kits and other medical equipment are scarce. Such countries risk being disproportionately affected by the pandemic "in terms of human lives and the destruction of their economies", as LDCs highlighted in a statement made in the Seventy-fourth session of the United Nations General Assembly on 7 May 2020.¹¹² Table 26 presents the critical COVID-19 funding for Arab LDCs, although Arab LDCs are in need of more international support to address the effects of and recover from crises.113

In response to the crisis, many LDCs resorted to similar measures to other countries, such as imposing states of emergency, prohibiting public gatherings, closing schools and universities, banning international travel and closing non-essential businesses.

Women are affected in different ways by the pandemic and may suffer more: women are the main providers of health care and are therefore most exposed to infection, while specific medical services for women are reduced due to the

diversion of funds and staff to address the pandemic. Restrictions on movement may also prevent them from seeking needed attention. Women face higher unemployment in both the formal and informal sectors, worsening their economic situation and increasing poverty. Increased social stress may exacerbate the risk of violence, including gender-based violence. Constraints on mobility related to the COVID-19 pandemic may lead women to seek livelihood opportunities further away from their homes regardless of regulations, thus opening them to abuse both inside and outside the household, and refugees and IDPs are subject to additional risks. Women and girls' reduced access to internet and social media can both impact their access to medical advice and prevent distance learning.114

In Mauritania, the government took immediate stringent measures such as suspending flights, closing land borders and shutting universities, schools and non-essential businesses to contain the spread of the virus. These restrictions were gradually lifted during June, July and August 2020. As part of the fiscal response to the crisis, the Government has set up emergency funds to procure medical supplies and equipment, extended subsidies to 30,000 poor households, and offered financial assistance to small businesses. The IMF has also provided Mauritania with emergency financing (roughly \$130 million) under the Rapid Credit Facility. Furthermore, the central bank eased liquidity conditions to encourage economic activity. In the fisheries sector,

 Table 26. COVID-19 funding for Arab LDCs (as of December 2020)

	Population	Disbursement per capita (dollars)	Amount Disbursed (dollars)
Mauritania	4 526 000	3.24	14 661 689
Somalia	15 443 000	40.39	623 792 249
Sudan	42 813 000	3.54	151 397 465
Yemen	29 162 000	12.34	359 727 594

Source: United Nations, Office of the High Representative for the Least Developed Countries, Landlocked Developing Countries and Small Island Developing States, "COVID-19 Funding for Least Developed Countries", 2020.

the ILO has planned to revive fish processing by marketing high value products, improving the technical capacities of women processors and providing a market for fishermen. The World Bank has provided assistance to Mauritania in support of the country's national public health preparedness and to enhance the quality of health interventions. The African Development Bank Group (AfDB) has allocated \$20 million to build capacity to curb and stop the spread of the COVID-19 pandemic in Mauritania, Mali, Burkina Faso, Niger and Chad.

Somalia also took a number of lockdown measures to contain the outbreak and strengthen health systems. Restrictions on trade and other activities have resulted in huge shortfalls in the country's already limited domestic revenue. Partners of Somalia and the Ministry of Health have launched a Country Preparedness and Response Plan (CPRP) to address the immediate humanitarian and socioeconomic consequences. The reopening of the economy took place during July and August. The government revised a 2020 supplementary budget, introduced a threemonth tax holiday on some specific basic commodities (including rice) and a 50 per cent reduction in consumption tax on basic goods, and lifted restrictions on rice imports. The newly revived Central Bank is releasing funding for lending support for SMEs and is working with international partners to ease the inflow of current transfers, including remittances.

Combined with erratic rains and infestation by desert locusts, COVID-19 has exacerbated

food insecurity. Poor urban and IDP households as well as pastoralists, particularly in northern Somalia, are likely to experience heightened food insecurity in coming months due to an estimated 30-50 per cent decline in annual external remittances, a 25–35 per cent decline in annual livestock exports, lower labour demand, and a steep increase in the price of staple foods. Furthermore, it is expected that women and girls are likely to face a greater risk of violence, including gender-based violence, as economic constraints related to the COVID-19 pandemic lead them to seek livelihood opportunities in locations further away from their homes.¹¹⁵ UNICEF and WHO have reported a reduction in vaccination coverage due to COVID-19 whereby approximately 108,000 children under one year of age did not receive a first dose of the measles vaccine between January and June 2020, because of the reduced outreach of health care providers and decreased willingness on the part of parents and caregivers to bring children to health clinics.

IMF has adjusted growth forecasts for Somalia in 2020 from 3.2 per cent before the pandemic to 2.3 per cent afterwards. 116 Somalia has launched a substantial fiscal stimulus plan to boost the economy including debt relief under the Heavily Indebted Poor Countries (HIPC) initiative, which would reduce the country's debt from \$5.2 billion at the end of 2018 to \$557 million in net present value terms once it reaches the HIPC Completion Point in three years. 117 Rural and

Table 27. Economic and health impacts of COVID-19 on Arab LDCs

	Public expenditure on health (percentage of GDP)	External support per capita (dollars)	Projected growth (percentage)	Health security ranking (out of 195)
Mauritania	4.4	3.24	1.2	157
Sudan	6.3	3.50	-7.2	163
Somalia		40.40	1.0	194
Yemen	4.2	12.30		190
Sources: ESCWA calculations.				

urban safety nets are assisting the most vulnerable to address food insecurity and loss of income. With support of United Nations agencies, the Government aims to maintain its infrastructure development plans to ensure continued employment. AfDB has approved the allocation of \$25 million to Somalia to support the national budget for the health system, safeguard livelihoods, provide social protection, support labour force productivity and prop up economic activity. The ILO is planning short-term job creation and cash injection programmes.

In the Sudan, the economic impact of the pandemic combined with nearly six months of containment measures has resulted in inflation in basic food prices, rising unemployment and falling exports, with inflation reaching 167 per cent by August 2020. 2020 growth projections for the country have been adjusted from 4.9 per cent prior to the pandemic to -7.2 per cent. The Government revised its budget in August 2020 to include the removal of subsidies on gasoline and diesel, exchange rate reforms and increased domestic revenue collection (which has declined by 40 per cent due to the pandemic). The international community pledged \$1.8 billion for macroeconomic reforms, humanitarian assistance and a 12-month Sudan Family Support Program to provide direct cash transfers to 80 per cent of the population. ILO in the Sudan is conducting a rapid assessment of the impact and risks associated with COVID-19 and is supporting the rehabilitation of healthcare facilities and national health protection counterparts in developing knowledge products. Debt distress continues to hamper the ability of the Sudan to respond sufficiently to the pandemic, provide the required social safety nets and protect the most vulnerable.

Given the disfunction of basic infrastructure in Yemen, such as running water and electricity, the pandemic is expected to further devastate the country's already vulnerable population. With only half of health centres in the country fully functional after years of conflict, preparedness for the pandemic was extremely poor. Given the extent of the country's conflict-induced humanitarian emergency and the fragmentation of administrative authorities, lockdown was intermittently but brutally enforced. The Ministry of Health received additional supplies of medical equipment from the World Bank and the WHO, with the government allocating limited budget resources to respond to the crisis. In late April 2020, the privately initiated and funded International Initiative on COVID-19 in Yemen (IICY) announced the shipping of virus collection kits, rapid test kits and other equipment. A European Union Humanitarian Air Bridge was created to address the logistical challenges and restrictions in the wake of the COVID-19 pandemic given the disruptions to the usual supply lines. The European Union is also allocating an additional 70 million euros to scale up assistance across Yemen, bringing its humanitarian support in 2020 to 115 million euros. UNDP has developed a socioeconomic framework for the next 18 months with five pillars with health being the first.

However, enforcing isolation and prevention policies is not feasible in LDCs where large segments of the population are employed in the informal sector, and where social distancing measures cannot be followed due to the living conditions of a large portion of society. The impaired ability of these States to provide assistance to their people, their weak economies and overcrowded housing of poor communities have all meant that medically recommended restrictions on people's movement and contact have been ineffective. Among the recommendations, frequent hand washing is not an option when no water or soap are available. Due to their poverty, people in the informal sector have been compelled to continue attempting to earn an income regardless of medical precautions or Government instructions. Households dependent on remittances from

Table 28. COVID-19 cases and deaths within Arab LDCs (as of 18 October 2020)

	Confirmed COVID-19 cases	Deaths		
Sudan	13 691	836		
Mauritania	7 603	163		
Somalia	3 864	99		
Yemen	Yemen 2 059 597			
Sources: WHO, "The Sudan", "Mauritania", "Somalia" and "Yemen", WHO Coronavirus Disease (COVID-19) Dashboard, 2020.				

abroad suffer from their reduction due to closure of economies elsewhere, particularly in Saudi Arabia. Women and young people are expected to be particularly affected as they constitute the bulk of labour in informal economies and lack access to savings. In addition, women are at additional risk in the aftermath of the COVID-19 crisis given their care burdens, their prominence in frontline health work and their reduced access to reproductive health facilities.

Tables 27 and 28 give an indication of the impact of COVID-19 on the populations of the four Arab LDCs.

Table 28 presents the number of confirmed cases and deaths in Arab LDCs. However, it is important to note that this table may not represent the full scale of the outbreak in light of Arab LDCs' poor transmission monitoring and limited testing. For instance, in Yemen, "those with severe symptoms are being turned away from health facilities that are full or unable to provide safe treatment." Moreover, national measures to contain the virus have affected access to certain areas.

Focus on the pandemic response has driven attention and resources away from accountability and effective service delivery. The overall economic slowdown and the subsequent reduced public expenditure will likely worsen existing inequalities and grievances. Loss of livelihood and increased food insecurity can fuel further tensions and civil unrest among communities.

To address the long-term impact of the pandemic, additional funding and assistance are essential to help populations emerge from this additional strain on their survival, and to support the reconstruction of their economies and social services, particularly the medical sector. This has implications well beyond the supply of vaccines to all, an element which must be provided for a few years, possibly longer, depending on the duration of effectiveness of the vaccines. It will also be important to include the development of mitigation measures against similar diseases in the future. International aid needs to support health systems while strengthening local capacities' resilience and ability to provide adequate socioeconomic responses through increased access to international liquidity and debt relief. COVID-19 has highlighted the need for preparedness, early warning and early response and a disaster risk reduction framework at the country level, as well as the need to ensure the resilience and functioning of the whole food system, from production to consumption. The pandemic has also reinforced the need for structural transformation to build resilience, generate employment and establish or strengthen social protection programmes. The pandemic has illustrated gaps in institutional capacities, hence, addressing the long-term impacts of the COVID-19 pandemic must be rooted in capacity-building and financing for all related needs. This will help ensure preparedness for any emerging crisis, not just health-related ones.

C. Climate change

Climate change, specifically global warming, has unarguably become a major contributor to the numerous crises affecting the four countries and will remain a structural challenge to development for the foreseeable future. While, alongside other developing countries, the four Arab LDCs' responsibility for causing this crisis is relatively low, given their very low carbon emissions, they are suffering the consequences of irresponsible action in the wealthy Northern countries, who consequently have a duty to assist in mitigating the consequences of their actions.

The World Risk Index¹²⁰ is an index assessing the global risk natural disasters including droughts and floods, as well as earthquakes, storms and rises in sea levels, in 181 countries (table 29).121 The index "aims to assess the general risk of countries to face a disaster in the wake of extreme natural events" by looking at "social factors, political conditions and economic structures" as well as "the occurrence, intensity and duration of extreme natural events." Out of 181 countries, the index ranks the Sudan 61st, Mauritania 67th and Yemen 109th. The index does not calculate Somalia's ranking due to data availability limitations, which entails weak administrative structures

unable to collect sufficient data. The index demonstrates that the Sudan and Mauritania are at high risk while Yemen is at medium risk to face a disaster in instance of extreme natural events. Moreover, the three Arab LDCs also have high scores in the lack of coping and adaptive capacities, which refer to capacities to respond and mitigate a disaster in the immediate and long term.

There is no longer any doubt that climate change is a major crisis affecting economic development, political instability and living standards in all four countries. Each has been affected by increasing desertification, as three of them (Mauritania, Somalia and the Sudan) border the Sahel region whose areas suitable for pastoralism have reduced significantly in recent years while Yemen is on the same latitude and suffers from the same problems. It is worth noting that the Sahel region is the area where AQAP Al-Qaeda in the Arabian Peninsula and ISIS have spread most actively in the past decade.

Droughts emerge as a result of consecutive seasons of poor rainfall. In Somalia, a severe drought caused by poor rainy seasons in 2016 and 2017 has increased food insecurity and water shortages, and has threatened

Table 29. Arab LDCs' scores in the World Risk Index 2020

		Sudan	Mauritania	Yemen
Rank		61	67	109
World Risk Indicator		8.45	7.85	5.68
Exposure		13.13	12.55	8.13
Vulnerability		64.39	62.51	69.87
Susceptibility		45.14	38.87	46.10
Lack of coping capacities		56.21	61.51	69.72
Lack of adaptive capacities		91.82	87.15	93.80
Key:				
Very low: 0.3-3.29 Low: 3.30	-5.67 Medium: 5.68-7.	58 High: 7.59-10.75	Very high: 10.76-49.74	

Source: Behlert et. al, World Risk Report 2020, (n.p., Bündnis Entwicklung Hilft and Ruhr University Bochum – Institute for International Law of Peace and Armed Conflict, 2020).

Table 30. Climate-related disasters in Arab LDCs in the twenty-first century

	Years of floods	Years of drought		
Mauritania	2002, 2003, 2005, 2006, 2007, 2010, 2013, 2019	2001, 2010, 2011, 2017, 2020		
Somalia	2000, 2001, 2003, 2006, 2007, 2008, 2009, 2013, 2015, 2016, 2018, 2019, 2020	2004, 2005, 2008, 2010, 2011, 2014, 2015, 2016		
Sudan	2002, 2003, 2005, 2006, 2009, 2010, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020	2009, 2011, 2012, 2015		
Yemen	2001, 2002, 2003, 2005, 2006, 2007, 2008, 2009, 2010, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020			
Source: EM Da	Source: EM Data Bank.			

livelihoods, agriculture and livestock. 122
Drought in Mauritania led to natural resource degradation and affected the population's food security and livelihood, and the agricultural sector in 2020. 123 The Sudan is prone to droughts and has experienced mild and short droughts in 2009, 2012 and 2015, as well as severe droughts between the 1960s and 1980s. 124 Moreover, drought conditions in Yemen have exacerbated the country's import dependence and food insecurity. 125

Droughts have caused major shortfalls in agricultural production and water availability for all purposes on numerous occasions in the past decade, while devastating floods have also been more intense, more widespread, more frequent and more destructive than in earlier decades. According to the records of the EM Data Bank, they suffered an unusual frequency of floods and droughts in the first two decades of this century (table 29).

The Sudan also suffers increased drought and rainfall fluctuations, leading to desertification. In North Darfur, for example, this is one of the causes of the long-term conflicts between pastoralists and cultivators competing for access to the limited natural resources; in Kordofan, this includes the frequent conflicts over the large-scale rain-fed contracted mechanised farms impinging on traditional pastoralist routes. Contractors on these farms have

suffered lower yields than predicted due to unsuitable agricultural practices.

Mauritania has also suffered considerable environmental degradation with both coastal erosion in the west and worsening desertification in the east, while Somalia suffers drought, desertification and poor agricultural and pastoral customs combined with decades of civil conflict. Other than the Nile Basin in the Sudan, the four Arab LDCs are countries suffering severe overall water scarcity, which has significant impact on their agricultural potential as well as on people's access to clean potable water.

In all four countries, the 2020 floods were unprecedented in their severity and the extent of damage caused, beating historic records in the Arab LDCs. Since August 2020, the south eastern region of Mauritania has been facing torrential rains resulting in flooding that has damaged infrastructure and food stocks in affected areas, affecting around 9,282 people and causing three deaths. 126 As a result of the floods and destruction, the affected populations are faced with food insecurity, loss of shelter, threatened livelihoods, and the need for assistance in meeting basic needs, as well as in the health, water and sanitation sectors. 127 As for Somalia, extreme floods have displaced more than 650,000 people in 2020 and have increased the need for shelter, food security, sanitary, and

livelihood programmes. 128 In the Sudan, flash floods affected over 875,000 people as of October 2020 with dire implications on shelter, hygiene and sanitation, water supply, income, and infrastructure. 129 The 2020 floods have beaten the records set earlier in 1946 and 1988 with respect to destruction and damage, particularly in the capital Khartoum.

Following the heavy rains that hit in April, and again in August, flooding in Yemen has affected around 95,599 households throughout the country. It is worth noting that, in 2015, two major cyclones, Chapala and Meg, hit Yemen within a single week, causing massive damage and this trend continued with cyclones Sagar and Mekunu in 2018 and the devastating storms causing floods in 2020, in both cases exceptional as normally the country does not suffer more than one cyclone or major flood event a year.

For all these countries, the problem is not only the severity of current disasters but also their increased frequency. Neither drought

nor floods are out of the ordinary, but they used to take place at regularly distant intervals, leaving many intermediary years without major problems, years during which communities and individuals could build up food and other reserves in anticipation of the next disaster, thus having greater resilience. In the last two decades, the increased frequency of these events has meant there was no time to prepare and therefore their resilience, whether physical, financial or economic, has diminished.

In this situation, as in many others, within countries the poorest and weakest are most vulnerable: they have the flimsiest housing, the greatest physical weakness and lack of resistance to disease, and the smallest financial reserves. Prospects for coming years remain dire with respect to all environmentally related stresses and must be taken into consideration in planning any developmental short- or long-term programmes. Overall, the vulnerability of the Arab LDCs to climate change is higher than other LDCs, with a rank of 49 compared to 42.



D. Desert locust invasion

The desert locust is referred to as "the most destructive migratory pest in the world" as it feeds on green vegetation and travels through wind. 130 A locust swarm constitutes around 150 million locusts per km², where a 1km² size swarm feeds on the equivalent of around 35,000 people's daily food. As an outcome of floods and favourable conditions for breeding since 2018, a desert locust upsurge has severely threatened livelihoods and food security in the Arab LDCs in 2020, on an unprecedented scale and scope. The Food and Agriculture Organization (FAO) of the United Nations mobilized \$184.9 million in response to the locust upsurge in ten countries including Somalia, the Sudan and Yemen, killing 515 billion desert locusts and controlling over

760,000 hectares by August 2020, as well as addressing food security, livelihoods and surveillance.¹³¹

Throughout September 2020, the general situation in Mauritania was reported as calm with small-scale breeding in the north-western region; however, the situation in Somalia, the Sudan, and Yemen was categorized as threatening. Yemen faces widespread hatching, band and swarm formation, while Somalia experiences immature swarms in the north, and swarms laid eggs in the Sudan. The situation is not expected to improve in the foreseeable future due to continuing weather conditions encouraging the spread of locusts. 132