YEMEN

Coastine Major road

Conflict escalation in Hajjah, Yemen



Anticipatory Briefing note - 14 April 2019

Government forces advance South Houthi forces fall back to the mountainous East **Conflict in Abs** Displacement to the East High rates of cholera Displacement High rates of food insecurity to the South High risk of future conflict and onward displacement High levels of pre-existing poverty and food insecurity Legend

Escalation of conflict in Hajjah governorate, particularly in Abs district, risks displacing up to 400,000 people

IDPs are likely to move in two directions: 1) South along the Tihama plain into northern Al Hudaydah, an area heavily impacted by the conflict-related displacement 2) To eastern districts of Hajjah, which have the highest cholera rates in the governorate and poor food security. IDPs are likely to present acute needs, exceeding the capacities of the current response.

Abs district, in the direct path of the offensive, hosts up to 210,000 IDPs in over 160 settlements. Most have already been displaced multiple times and have acute shelter, WASH, food, and health needs.

Conflict in Abs is likely to disrupt vital WASH and health services. Abs hosts the main water source and the district hospital. With the ongoing rainy season, and cholera cases already on the rise, these services are particularly important and should be protected.

Key risks and anticipated impact



+400,000

new IDPs from south of Hajjah



+120,000

without a primary water source



Map created by ACAPS Yemen Analysis Hub

+50.000

facing IPC 5 food insecurity

Conflict developments: main dynamics

Conflict in Hajjah escalated in February 2019, with tribal conflicts in the east and pro-Hadi forces advancing down the western half of the governorate. The number of reported fatalities in Q1 of 2019 increased by 300% compared to Q1 2018 (379 fatalities reported in Q1 2018, 1,143 fatalities reported in Q1 2019) (ACLED access 9/04/2019).

Fighting between Houthi forces and the internationally recognised government (IRG), backed by the Saudi-led coalition, has been escalating since December 2018. In 2019, armed confrontations, airstrikes, and shelling intensified in Haradh, Havran, Midi, Mustaba and Abs, triggering large displacement of an estimated 15,000 households across the governorate as of 7 April. About 90,000 people have been newly displaced across Hajjah since January (this number includes people displaced by tribal fighting in Kushar) (DTM New Displacement Rapid Tracking Operational Dataset). Most of these people had already been displaced multiple times. They present acute WASH, food, and health needs (MSF 9/04/2019). The majority of people displaced by the conflict between the Houthis and the IRG have fled to Abs district. Abs currently hosts up to 50,000 new IDPs (on top of almost 160,000 IDPs registered in November 2018) in approximately 167 IDP hosting sites (out of 300 hosting sites across the entire governorate) (MSF 9/04/2018, IOM 11/03/2019). Since late March, IRG forces have been advancing south into Abs district along the major M2 road, threatening further damage to vital infrastructure and displacement. Active or approaching conflict have forced the displacement of approximately 4,700 and 2,874 households from Bani Hassan and Matwalah areas in Abs district respectively since March (more than 28,000 and 17,000 people) (WASH Cluster).

Tribal conflict between the Houthis and Hajour tribesman from Kushar district (eastern Hajjah) started in late January and triggered displacement and civilian casualties. Over 5,600 families (est. over 33,000 people) have been displaced from Kushar since the beginning of the year, mostly within the governorate and to neighbouring Amran. The fighting resulted in the highest number of civilian casualties reported in Hajjah governorate in 2019, with over 20 deaths, and over 80 civilian structures, predominantly houses, damaged (CIMP 2019). Fighting on the ground was aggravated by airstrikes conducted by the Saudi-led coalition in support of the Hajour tribe. In late March, the Houthis managed to impose their control and active conflict subsided. However, violent treatment of several tribal leaders is likely to antagonise the relationship with the tribe even further and the Houthis continue to face tribal discontent and opposition in Amran and Al Jawf governorates, which could escalate and reignite tensions in Hajjah.

Anticipated crisis impact

Escalation of violence leads to displacement and damage to vital infrastructure

Frontlines between the Houthi and the IRG forces currently run through Midi, Abs, Hayran, Mustaba, Haradh, and Bakil Al Mir, with IRG forces advancing south into Abs since March. Humanitarian workers in Yemen believe there is a strong likelihood that the frontline will gradually move further south towards Al Hudaydah.

The impact of a military offensive in Abs and other southern governorates on humanitarian needs is likely to be high. There is a moderate likelihood of mass displacement of up to 400,000 people, including vulnerable IDPs, most of whom have suffered repeated displacement. Based on an analysis of past displacement trends and tribal allegiances, IDPs are likely to move in two directions. Some will move south, along the Tihama plains to northern Al Hudaydah. Others will likely take the winding mountainous road to east Hajjah and Hajjah city. Both areas pose risks for newly displaced people and host populations. Northern Al Hudaydah has been heavily affected by the conflict-related displacement and food insecurity, whereas eastern Hajjah has the highest caseloads of cholera in the governorate (WHO 14/04/2019). IDPs are likely to have acute multi-sectoral needs around shelter, food, drinking water, health services and basic NFIs, especially as most have been displaced multiple times. The needs are highly likely to exceed the existing response capacity.

Further fighting in Hajjah poses a severe risk to critical WASH, transport, health, and market infrastructure in the governorate. Airstrikes and shelling have already targeted IDP camps, water infrastructure, health centres, roads, and markets. The main water source in Abs district, serving both vulnerable IDPs and Abs city population is now located 5-7 km from the frontline. Over 120,000 people are likely to be cut off from their main water source if this facility is affected. With the ongoing rainy season and cholera cases already rising, damage to this facility would present a risk of increased waterborne diseases, including cholera. First cholera cases have been already reported in the district. Abs also hosts a major hospital. Damage or destruction to the facility would cut off secondary health services for about 1.2 million people (MSF 9/04/2019).

Important roads connecting Hajjah to Al Hudaydah governorates (through Abs) and to Sana'a (through Hajjah city) are likely to be targeted. As of March, most of the main roads in the governorate were closed apart from the roads in Abs and southern Hajjah. Limited access as well as security concerns due to the moving frontline are likely to affect these roads and severely restrict access and movements within the governorate, both for humanitarian workers and the affected population (Logistics Cluster 5/03/2019).

Increase in tribal conflicts leading to displacement and access constraints

Fighting in Kushar subsided in March, but there is a risk it could escalate again in the coming months. Kushar, a mountainous area described by some sources as a 'natural fortress', is of particular importance to both sides of the conflict. Kushar is a stronghold of the Hajour tribe, which has always been in opposition to the Houthis. It is located on the supply road to the Ahem front on one side, and the Amran road connecting Sana'a and Sa'ada on the other.

The Saudi-led Coalition and IRG forces have regularly announced statements of support for the tribes in the area, conducted airstrikes, and provided supplies in support of the tribal forces. Violent treatment and shows of force by the Houthis, including reported executions of tribal leaders in March, is likely to further antagonise the tribe (Al Jazeera 11/03/2019). In a similar dynamic, tribes in neighbouring Amran governorate threatened to withdraw their fighters from Houthi forces and close vital supply routes after Houthis reportedly killed an elder of the Bakil Confederation (the largest tribal federation in Yemen) in the beginning of April (Critical Threats 5/04/2019). Tribal resistance to Houthis increased in 2019, particularly in Hajjah. If this dynamic continues, tribal-Houthi conflicts pose a high risk of civilian casualties, displacement, damage, and increased access constraints in the governorate. Fighting between Houthi and tribal forces in Kushar between January and March saw that district record the highest levels of civilian casualties and damage to civilian structures in Hajjah governorate in 2019 (CIMP 2019).

Spillover of tensions between governorates is also possible, particularly given the close tribal ties between Hajjah and Amran (ACLED 7/03/2019). Escalation of tribal conflict in Kushar would likely affect not only the local population (est. 114,000 prior to the most recent displacement), but also drive significant displacement to neighbouring districts and Amran.

The fighting in March closed roads connecting villages closed and displaced people trapped in areas of active fighting. Any increase in tribal-Houthi conflict is likely to close the strategic road between Amran and Hajjah, hampering the movement of people and humanitarian supplies (Crisis Group 8/03/2019, OCHA 11/03/2019).

Large increase in cholera caseloads

The cholera caseload in Hajjah for Q1 2019 is over 350% higher than the same period last year. Between 1 January and 7 April 2019, over 13,750 suspected cases of cholera were reported in Hajjah with 22 associated deaths and a Case Fatality Rate (CFR) of 0.16%. In the same period of 2018 only 3,892 cases and four deaths were reported (CFR: 0.10%). With the attack rate in Hajjah increasing month on month in 2019, the number of suspected cases is likely to increase exponentially (WHO 11 April 2019). The most affected districts include the southern districts of Hajjah City, Al Mitfah, and Mabyan. All these

areas could see a rapid influx of IDPs if conflict continues south into Abs (Crisis Group 8/03/2019, OCHA 11/03/2019.

The ongoing cholera outbreak in Yemen has been driven by conflict-related displacement, disruption of water and sanitation facilities, lack of basic services including health services and the general lack of food, water, and medical supplies. Hajjah was one of the most severely affected governorates since 2017. Further anticipated intensification of all drivers (conflict, displacement, WASH disruption) is likely to result in the rapid spread of cholera within vulnerable communities. Up to 50,000 newly displaced people in Abs are already reporting acute WASH and health needs. Furthermore, if the frontline moves further south, people from Abs and southern governorates are likely to rapidly displace into areas with active cholera outbreaks and spread it further. Abs also hosts a major district hospital which provides secondary healthcare and life-saving medical services to 1.2 million people in the western Hajjah region (MSF 10/04/2019).

Aggravated food insecurity

Hajjah governorate has the highest percentage of people affected by food insecurity across the country. 66% of the population were in IPC Phase 3 (Crisis) or higher in early 2019, including 579,000 in IPC 4 (Emergency) and 19,000 in IPC 5 (Catastrophe) despite humanitarian food assistance. The most affected districts include Bakil Al Mir, Haradh, Midi, Hayran, Mustaba, Khayran Al Maharraq, Aslem, and Bani Qa'is, most of which were previously heavily impacted by fighting.

ACAPS identified the main drivers of food insecurity in IPC 5 districts in Hajjah's as pre-existing poverty and conflict frontlines (ACAPS 04/2019). Further escalation of the conflict is likely to aggravate the food insecurity through increasing violence, disruption of trade and lack of access to livelihoods and markets. IDPs (most of whom have been displaced multiple times) and host communities have depleted their coping mechanisms after years of conflict and economic depression. According to IPC analysis, in the event of further conflict escalation and lack of access to humanitarian assistance, up to 78% of people in the governorate are likely to be in the Crisis (IPC 3) phase or higher, including up to 50,000 people facing famine-like (IPC 5) conditions (IPC 20/12/2018).

Other sectoral impact

Shelter/ CCCM: Displacement of up to 400,000 people from Abs and the southern districts of Hajjah would result in acute shelter needs, as most of the newly displaced people live in open spaces and public buildings. Shelter and food have been the most common main needs quoted by IDPs in Hajjah governorate. The majority of IDP hosting sites in the governorate are located in Abs (167 out of around 300) (Operational agencies in Yemen).

Protection: Violence including airstrikes and shelling has heavily affected civilians in Hajjah in 2019. Kushar and Haradh reported the highest numbers of casualties, fatalities, and number of civilian structures damaged within the governorate. Direct targeting of IDP

sites and civilian public gatherings like weddings has been previously reported in Hajjah in 2018 and 2019 (OCHA 27/01/2019).

Children in Hajjah are exposed to significant protection threats as a result of conflict. In February, 62% of cases of recruitment and use of children in conflict and 37% of child casualties verified across the country were from Hajjah (UNICEF 28/02/2019).

Many of the displaced households in Abs are headed by women, which might make them more vulnerable to violence, food insecurity, and movement limitations (NRC 13/03/2019).

Health: In Haradh, one of the most conflict-affected districts in recent years, hospitals and other public service providers have closed due to fighting. Currently, the main hospitals in the governorate are located in Hajjah city and Abs. Abs facility serves around 1.2 million people. Frontlines are moving closer to the facility. Moreover, movement restrictions are limiting people's access to health services. Apart from increasing cholera caseloads, aid agencies report an increase in diarrhoeal diseases and malaria (OCHA 27/01/2018, NRC 13/03/2019).

Contextual information

Hajjah governorate, located in the northwest of Yemen, has an area of over 10,140 km² and an estimated population of around 2.25 million in 2019. The biggest cities are Hajjah, Abs, Haradh, and Al Mahabishah. The climate in Hajjah is hot and arid during summer (June–August) and comfortable and dry during winter (December–February). The typical temperature varies from 11°C to 33°C and is rarely below 9°C or above 35°C (GIZ, 05/2018). Hajjah governorate is divided into the western plains extending to the Red Sea, including Abs, and an eastern mountainous area with difficult terrain, narrow and bumpy roads and high incline deviation. Historically and culturally, the western plains are connected to the broader Tihama region and linked to Al Hudaydah, whereas the eastern regions are closely linked to the mountainous and tribal districts of Amran.

Tribal dynamics: There are numerous tribes located in Hajjah (see map on page 1). Most of them historically and culturally oppose the Houthis. However, due to the Houthi's military power (artillery) and financial incentives provided to some tribal leaders, the Houthis managed to control the governorate and signed ceasefires with the major tribes in the beginning of the conflict. This led to inter-tribal conflicts, particularly following the death of Saleh. Currently, the tribes of Hajour, Qabla, Bani Riban, Jibhan, Maslam and Kudis are united against the Houthis despite internal skirmishes. However, until the conflict between the Houthis and the Hajour tribe in early 2019, Hajjah governorate had only witnessed low intensity tribal skirmishes.

The conflict in Hajjah between the Houthis and the IRG forces began in late 2015 in Midi (on the border with Saudi Arabia). The Houthis began to take control of Hajjah in 2011 and reached the Red Sea port of Midi in 2012. In 2016, IRG forces retook Midi port and

started expanding towards Hayran and Haradh. The IRG secured control over the majority of Hayran and the Ahem triangle in August 2018.

Hostilities in Hajjah have had a major humanitarian impact, particularly in Haradh, which reported the highest number of civilian casualties in the governorate since 2015. In November 2018, the highest number of IDPs in Hajjah were in Abs, with up to 159,000 IDPs registered. This equalled the IDP population of the next nine most-affected districts in Hajjah combined (DTM November 2018).

Water vulnerability: There are currently 104 working and 38 non-functioning water sources in Hajjah governorate, most of them located in the south around Hajjah city and district and in the north around Haradh. The majority of the damaged water sources are located between Abs and Al Mahabishah districts. As the majority of districts in Hajjah have been affected by the cholera outbreak in early 2019, safe ground water is generally scarce and using it comes with a considerable health and source depletion risks (WASH Cluster).

Abs, which is in the path of a predicted IRG southward offensive, has severe water vulnerability. Ground water in the coastal districts of Midi and Abs has high levels of salinity. The aquifers in this area are also vulnerable to over-extraction, with 13 of 24 wells located within 16km of Abs city already non-functioning (WASH actors, April 2019). This makes it very challenging to meet demand for the IDPs spread across the plains around Abs. If parties to the conflict damage or destroy the Abs water network, it will be extremely challenging for the humanitarian actors to meet the gap for more than 120,000 people who rely on this network to meet their daily water needs.

Predicted sites for onward displacement also have serious water vulnerabilities. The mountainous areas of east Hajjah have limited ground water resources. It is difficult to dig new wells. The roads in eastern Hajjah are steep and poor quality. The onset of the rainy season (April to May), or road closures due to fighting or unexploded ordnance, would make WASH activities in this area very challenging. Hajjah city is also a cholera hotspot in the governorate. New displacements would increase the risk of infection and transmission.

The coastal plains of northern Al Hudaydah have comparatively better access to fresh water aquifers as the area receives discharge from wadis. However, the area faces the risk of flooding in the April to June rainy season. IDP settlements in this area need to be carefully planned and supported to avoid placing people in the path of floodwater discharge routes from wadis.

Aggravating factors

Possible failure of the Stockholm Agreement would radically aggravate the situation in the country, leading to an increase in violence, disrupted trade routes and imports, and new

waves of displacement. This would likely push an increasing number of people into IPC 5 famine-like conditions. The ceasefire in Al Hudaydah decreased conflict in that governorate. However, there was an escalation of violence in Hajjah and Taizz over the same period. In the event of a breakdown in the ceasefire, IRG forces are likely to scale up their offensive in the south of Hajjah in an attempt to consolidate their control over areas around the strategic Al Hudaydah port.

IDPs displaced from southern Hajjah into Al Hudaydah may find themselves facing ongoing conflict and repeated displacement.

The lean season, which lasts from April to June, could aggravate the already poor food insecurity situation (FEWSNET 23/02/2019).

The rainy season, which lasts from March to mid-June and again from July to mid-October, is associated with a possible increase in cholera caseloads. However, in Yemen, which is usually dry and arid, the connection between the rainy season and cholera is not clear. Dry conditions in the presence of water scarcity and lack of access to basic needs might be a more powerful aggravating factor than the rainy season. Nevertheless, the bigger second wave of the cholera outbreak began during the rainy season of 2017 and this suggests the rainy season could further compound the ongoing outbreak.

Vulnerabilities and vulnerable groups affected

Poverty: Hajjah was historically one of the governorates with highest poverty levels in Yemen, with 63.9% of the population leaving under the poverty line in 2014. This translated to over 1.25 million people considered as poor according to the World Bank (World Bank 1/06/2017).

Poverty interlinks with internal displacement. On average, IDPs suffer from significantly more stress and more financial struggles. **Populations displaced multiple times** are more likely to have acute needs and be vulnerable. However, people affected by high levels of pre-existing poverty prior to the conflict often have no means to displace from conflict-affected areas, which exposes them to escalating violence, access constraints, and no means to cover their basic needs.

Disabled and elderly people are particularly at risk of facing violence, as they are likely to struggle to displace to safer areas.

Response capacity

The scale of displacement is overwhelming local response capacity. Local agencies need support to quickly register newly displaced people and accurately track onwards movement. Multiple problems are being reported by humanitarians around registration and displacement tracking mechanisms and significant gaps in response to the basic needs.

The international community is scaling up its response. 11 actors are providing multisector support, including: enhanced emergency shelter kits; cash; non-food items; water trucking; latrines construction; mobile clinics and support to the major district hospitals in Abs and Hajjah. Agencies are also pre-positioning cholera response supplies.

Agencies are taking a needs based approach, providing support to both newly displaced, long-term displaced and host communities, based on need.

Response actors need rapid approvals to access populations in need, including cross-line assistance to affected people in IRG areas, where humanitarian actors did not have an access as of early April (Operational agencies in Yemen).

All parties to the conflict need to respect humanitarian deconfliction mechanisms. If the Abs water treatment facility and hospital are destroyed, humanitarians will struggle to fill the gap in water for 120,000 people and secondary health services for almost 1.2 million people.

Access to mountainous communities in Eastern Hajjah could become more challenging with the onset of the rainy season (April to June). Active conflict and unexploded ordnance could also impede access to people in need, especially along the major north-south M2 road through Abs. Kushar district in Eastern Hajjah has been largely inaccessible since the start of Houthi-tribal conflict in early 2019.

Timeline: Important conflict developments around Hajjah governorate since 2011

