

Social impact monitoring project report: April–June 2023

OVERVIEW

In monitoring the information landscape in Yemen from April–June 2023, several themes that had or could potentially have a social impact emerged. These were:

- increasing barriers to healthcare access across the country
- increased humanitarian access constraints because of the spread of misinformation across the country
- protection concerns for migrants from the Horn of Africa
- summer school camps in areas under the control of the de-facto authority (DFA) in the north of Yemen (also known as the Houthis)
- the impact of climate change on agricultural livelihoods
- implications of the prisoner exchange.

These factors are not completely new, and some affect all Yemenis to some degree, particularly deteriorating health conditions and increasing access constraints. These themes particularly affect some categories of people, including migrant workers, children engaged in summer camps, agricultural workers, and prisoners of conflict. Because of societal norms, women are also more frequently affected than men when access to the means to meet needs becomes more difficult.

This edition of the social impact monitoring project (SIMP) report elaborates on three of these themes: increasing barriers to healthcare access across the country, social control and misinformation leading to reduced trust in humanitarian organisations and impeding humanitarian access, and protection concerns for migrants in Yemen. The other themes are explained in less detail and remain on the watchlist.

The project benefited from support by the IMEDA programme, which is supported by UK aid from the UK government.

About the report

This SIMP report identifies the events and themes that emerged from April–June 2023 via the Yemeni information landscape on trends that had or were likely to have a social impact during that period. Social impact is broadly defined as the effect on people and communities of a specific action or event or the lack of action to intervene in a situation. The choice of themes for this report was based on the considered significance of their current impact (or potential impact) on people. The report aims to enrich the understanding of the social groups in Yemen facing the greatest challenges in meeting needs and those most vulnerable to protection concerns.

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METHODOLOGY

The analysis presented in this report is based on the monitoring of information sources across the period of interest (April–June 2023), including:

- the daily monitoring of relevant indicators logged in the ACAPS qualitative database for Yemen
- data from ACAPS' core dataset for Yemen
- the secondary data review of documents published within and outside Yemen.

To ground-truth findings and deepen the understanding of the themes identified, in July, findings from the data were supplemented with:

- six key informant interviews and discussions with context experts
- a joint analysis session that included the extended ACAPS team and experts from other organisations
- an online focus group discussion with Yemenis.

LIMITATIONS

The information available does not allow for the impact of key drivers to be directly linked to specific groups or categories of people who might be more exposed to certain risks than others. Most publicly available information on social impacts is qualitative, making it difficult to compare and aggregate data across time and different areas of the country. ACAPS accounted for this constraint by structuring the available information and following up on or confirming the collected data through interviews with Yemenis, consultations with experts, and joint analysis.

DRIVERS OF HUMANITARIAN NEEDS WITH POTENTIAL SOCIAL IMPACT BETWEEN APRIL–JUNE 2023

Theme 1: increasing barriers to healthcare

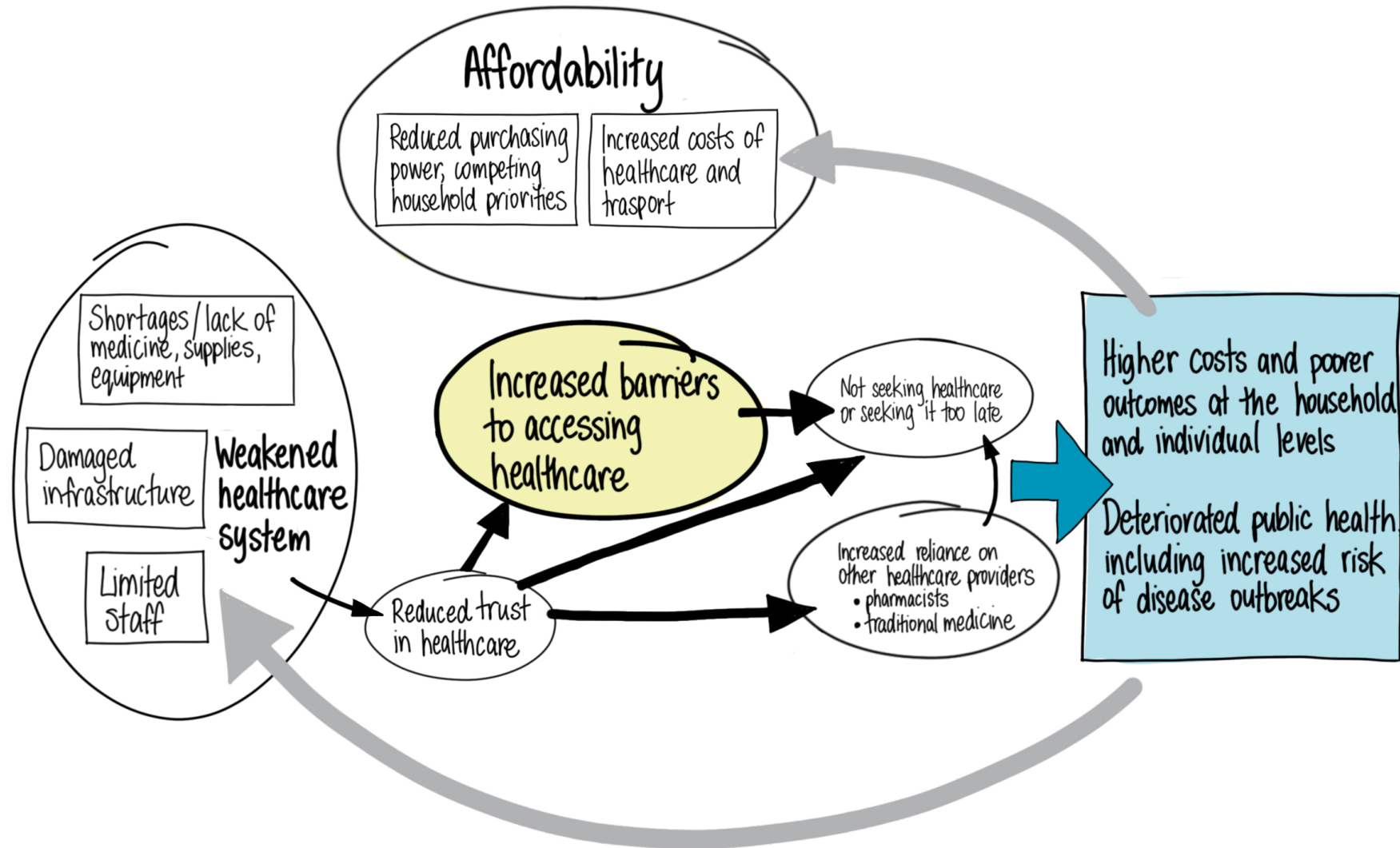
Almost nine years of conflict and economic deterioration have weakened the health system in Yemen. Over 20 million people need health assistance, including 13 million with acute needs (OCHA 20/12/2022). Conversations with households and experts revealed that healthcare needs are increasing, mainly because of challenges with accessing health services and medication. Increased healthcare and transportation costs combine with reduced purchasing power to make the situation increasingly difficult for households grappling with multiple needs and challenges. These challenges force households to make choices and adopt a range of coping strategies that can have detrimental consequences at the household level and affect society more broadly.

Factors contributing to the inadequacy of available healthcare include damaged infrastructure, limited staff, and shortages (or in some cases a complete lack) of funding, electricity, medicine, supplies, and equipment.

Damaged or destroyed health facilities: according to the Health Resources and Services Availability Monitoring System (HeRAMS), Yemen still has approximately the same number of health facilities as it did prior to the war (4,966 health facilities in 2022 compared to 4,972 in 2014, before the war). That said, the conflict has resulted in only 50% of health facilities being fully functional and 35% partially functional (IASC 14/07/2022). The destruction of health infrastructure has had a severe impact on service delivery, with over 89 destroyed or damaged health facilities across the country between 2018–2023 (Protection Cluster Yemen accessed 09/08/2023). Data on the destruction of health facilities from earlier in the war is not available. Even when a health facility is considered fully or partially functioning, the inadequacy of equipment and supplies hampers the quality of healthcare provided (Elnakib et al. 06/02/2021).

Shortage of health workers: Yemen has a severe shortfall of medical professionals, with only 10 health workers available per 10,000 people. This ratio is much lower than the WHO minimum standard of 22 health workers per 10,000 people (Mwatana/PHR 18/03/2020). Many factors contribute to the limited number of health workers, including the closure or destruction of health facilities in some areas shrinking the spaces where they could work, the death or injury of health workers, their displacement or migration outside the country, and inconsistent salary payments (Elnakib et al. 06/02/2021). These factors have left health facilities with few health workers, leading to high demand for the staff available. The resulting exhaustion from being overworked and under-resourced further affects the quality of healthcare provided.

BARRIERS TO HEALTHCARE ACCESS



Source: ACAPS

Shortage and reduced quality of medical supplies: Yemen imports 80–90% of the medicine in its health facilities and pharmacies (Mohamed Ibrahim et al. 29/12/2020). Import restrictions and bureaucratic impediments by parties to the conflict lead to delays in supply delivery. Most of the medication available in the hospitals or pharmacies is also either close to or past the expiry date (KII 25/07/2023; IASC 14/07/2022). Sometimes, technical support is not available to maintain or repair medical equipment (IASC 14/07/2022). Electricity shortages also

affect the storage of medication by disrupting cold chains, further impeding the provision of effective health services. Conversations with humanitarians in the health sector suggest that a large proportion of medication in pharmacies is sourced through the black market or smuggled into the country, raising concerns over their origins, quality, and handling during transport (KII 25/07/2023). On 14 October 2022, ten children being treated for leukaemia died after being administered expired chemotherapy drugs in Sana'a city (Al Jazeera 14/10/2022).

Prohibitively expensive transportation is among the challenges people encounter when accessing healthcare. Accessing anything other than basic healthcare has always required people in rural areas of the country to travel to the larger urban centres. With the destruction and closure of health facilities and increased risks involved in travel, journeys have become even longer. High travel costs and weak purchasing power prevent many households from accessing healthcare without going into debt.

Privatisation of public hospitals and facilities: before the war, public hospitals provided services for free or at very low prices. War-related factors, such as depleting government funding and inconsistent staff salary payments, mean that public hospitals and health facilities could no longer afford to provide free or cheap services (KII 26/07/2023; MEE 29/03/2022). To cope and remain operational, hospitals have effectively resorted to privatisation, providing healthcare services for a fee. This ensures the availability of services only for those who can pay, and the associated costs make it difficult for many to access health services. A similar pattern has been observed in other sectors, such as education, where public schools used to be free but many now charge for education access (KII 26/07/2023).

Social impact and coping strategies

The challenges of accessing healthcare and the overall economic situation prevent many households from seeking healthcare unless for an emergency. Reports and observations indicate that many seek healthcare only when the situation has turned critical, often too late to save the patient (KII 25/07/2023).

In the face of unaffordable mainstream healthcare, households and communities have changed how they seek healthcare.

Pharmacists without medical qualifications are taking on the role of giving medical advice: observations indicate that with many people avoiding hospitals because of the high costs competing with other household priorities and expenses, they instead seek medical advice directly from pharmacies. Not all people working in pharmacies have qualifications, and even those with degrees in pharmaceutical science are not qualified to be prescribing physicians. This presents the risk of pharmacists recommending medication that may not be appropriate for the presenting health condition, possibly leading to dangerous consequences and ultimately even increasing healthcare costs for the patient if further treatment is required.

“Our neighbour Asma living in Ta’iz city was very sick, and like many of us in the area, she went to the pharmacist and consulted him. He gave her medicine that was not appropriate. A few hours later, her family had to admit her to the hospital.”

(KII 25/07/2023)

Increased reliance on alternative medicine: traditional medicine by healers continues to play an important role in Yemen, especially in rural areas where medical assistance is insufficient or unavailable. With increased medical care and transportation costs, strained financial resources, and a lack of trust in the health system, people are considering traditional medicine more as a viable alternative (KII 26/07/2023). In Yemeni culture, illnesses are traditionally believed to result from personal actions, environmental factors, or evil spirits and require different types of expertise and treatment. Common procedures include cupping to draw off blood, bone setting, minor surgical techniques, and changes in dietary habits (WHO 2006). Quranic healers are especially favoured for mental health conditions and serious diseases, such as cancer (SCSS 30/11/2017; KII 26/07/2023). According to a 2006 WHO study, the use of traditional healing techniques was more common among people with limited resources, with 84% of users being of low socioeconomic status and almost half (51%) being illiterate. 58% of the healers were illiterate themselves and lacked relevant qualifications (WHO 2006). There are no recent studies on the topic, but conversations with community members and health workers in Yemen suggest that the number of people seeking traditional healers has increased, as it costs less than formal healthcare (KII 25/07/2023).

Increased tensions and a lack of trust between community members and health workers: a 2021 study revealed that the strained healthcare system has resulted in tensions and disagreements between community members and health workers. Sometimes, community members blame health workers for medication shortages and the deteriorated quality of healthcare. Others accuse health workers of stealing medication or hiding medical supplies. Healthcare providers have reported several confrontations with pregnant women blaming health workers for not having sufficient contraception (Elnakib et al. 06/02/2021).

The lack of trust in the healthcare system, which became increasingly evident from early 2023, and was noted in the previous SIMP report, in areas where the spread of misinformation was linked to the reduced vaccination of children. Misinformation not only misleads the community, escalates social panic, and threatens public health but also opens the door to the spread of viruses and diseases and increases the risk of illness, leading to low immune systems and possibly death. For example, by June 2023, there were 25,900 suspected measles cases, 1,406 laboratory-confirmed cases, and 259 related deaths across Yemen within the year. The number of reported cases in just half of 2023 already represents over 96% of those reported in the whole of 2022 (OCHA 21/07/2023; ACAPS 20/06/2023).

Theme 2: social control and misinformation impeding humanitarian access and reducing trust in humanitarian organisations

The humanitarian operating environment in Yemen remains severely restricted. Bureaucratic impediments, which have been a challenge throughout the conflict, continue to delay, hinder, and even prevent the delivery of humanitarian assistance. The security environment has also fluctuated throughout the war. There is currently an increasing trend in security incidents, including carjackings, kidnappings, and attacks on humanitarian personnel and infrastructure (UN 16/08/2023). The latest information on the Mahram (male guardian) requirement for women aid workers inside the country indicates its particular implementation for international organisations, making movements within the country more difficult (KII 28/07/2023). At the same time, increased misinformation and rumours spreading through a range of means, including social media, deliberately fuel suspicion and negativity towards international organisations (CARE in Yemen Twitter 18/04/2022). These factors increase the risks for humanitarians and limit their ability to understand and address people's needs.

Social control through the conditionality of women's movement

The strict enforcement and implications of the requirement for women to be accompanied by a Mahram have been noted in previous SIMP and other reports (ACAPS 05/05/2023). Over recent years, while the Houthis have increased the enforcement of the Mahram rule, they have rarely put these policies in writing except through the notice given to public transport providers (ACAPS 03/03/2023). Observations and informal reports passed on to ACAPS indicate that the Mahram requirement appears to have changed again (KII 13/08/2023).

In some cases, the requirement to travel with a male guardian has eased for women travellers. Women travelling within and between DFA-controlled governorates face fewer restrictions and, in many cases, are no longer required a Mahram or officially recognised written permission to travel (KII 28/07/2023; KII 24/07/2023). An exception may be for women using public transport, as there have been no reports of the written guidelines for transport operators being rescinded (ACAPS 03/03/2023). The easing of restrictions on women's movement has only been observed within governorates under the control of the DFA. For travel from DFA-controlled areas towards those under the control of the Internationally Recognized Government of Yemen (IRG), the Mahram requirement stands. Conversations with experts suggest that this change in the application of the requirement likely indicates that the DFA already feels sufficient social control within the areas it administers and has turned its focus to border areas, possibly to move closer towards creating a separate state in the north of Yemen (KII 14/08/2023).

Critically, when considering the delivery of humanitarian assistance, this new development does not apply to Yemeni women working in international humanitarian or national civil society organisations, where they are still required to be accompanied to work by a Mahram. This applies to all women travelling for work within DFA areas and outside the country. At the same time, a new requirement in DFA areas stipulates that men and women attending a conference, training, or workshop outside the country must have a permit from the Secretary-General of the Supreme Council for the Management and Coordination of Humanitarian Affairs and International Cooperation (SCMCHA). The approval process takes between five to ten days (KII 28/07/2023).

The Mahram rule has been reported mostly in DFA areas but is also being applied to Yemeni humanitarians in some IRG areas, such as Abyan, Ad Dali', and Lahj.

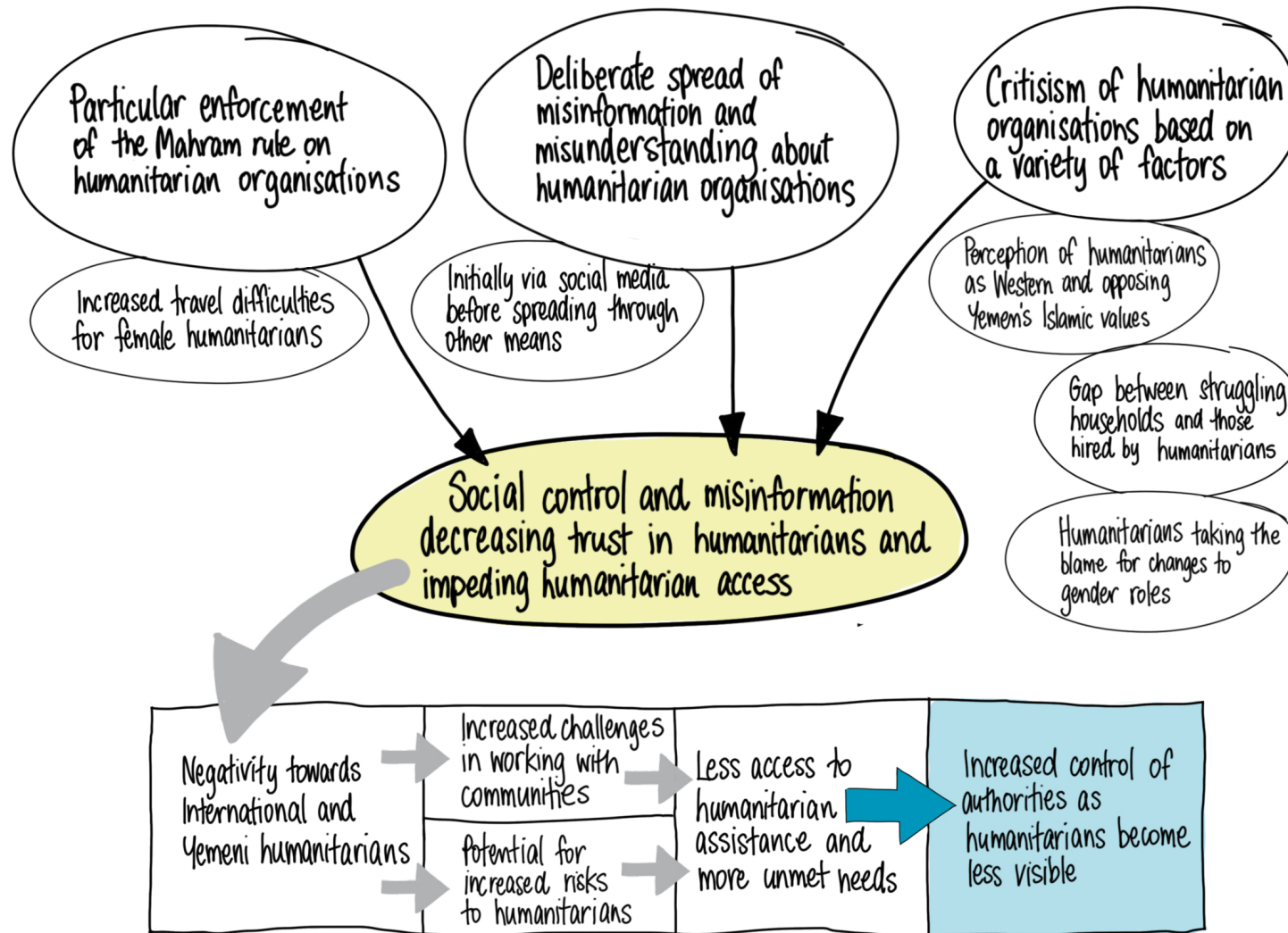
Misinformation against humanitarian organisations

A social media campaign targeting humanitarian organisations started in April 2022 on Facebook, with posts linked to accounts in the south of the country, quickly spreading to successfully generate misconceptions and rumours throughout the country (ACAPS 22/11/2022; CARE in Yemen Twitter 18/04/2022). The use of fake names on social media accounts makes the root of the campaign difficult to trace, but information shared with ACAPS indicates possible linkages to the different governing authorities across the country: the DFA in the north and the IRG and Southern Transitional Council (STC) in the south. The campaign has successfully damaged the reputations of and trust in humanitarian organisations. Those behind the campaign appear to have decreased their direct involvement because, perhaps by design, the rumours and misconceptions have developed a life of their own, increasing as they spread through communities (KII 24/07/2023).

Recent observations from Sana'a report banners being erected in the streets claiming that humanitarian organisations are harmful to women and to Islam. There has also been street art on walls in the city promoting the role of women as the caregiver of the family, as well as anti-international sentiments (KII 28/07/2023).

Media misinformation campaigns against international organisations are not new in Yemen. In 2017, the official Yemeni TV channel under DFA control aired several programmes alleging that international organisations aim to destroy Yemeni society (MCD 16/12/2022). In 2019, an anti-humanitarian campaign called Where's the Money (وين الفلوس) was launched around allegations of financial corruption among these organisations (Almasdar Online 21/04/2019; Emad Al-Naqeeb YouTube 13/04/2019; SCMCHA 25/11/2019). The campaigns had a significant impact, diminishing community trust in international organisations. Rebuilding this trust has been challenging, and the allegations from 2017 and 2019 remain fresh in people's minds, making it easier for new allegations to take hold and for trust to deteriorate rapidly.

SOCIAL CONTROL AND MISINFORMATION



Source: ACAPS

Spreading misinformation using both new and traditional tools

All over the world, social media enable the fast and effective spread of misinformation, including fake news. While Yemen has poorer internet connectivity and consequently a lower proportion of social media users than other countries, misinformation trends in the country exhibit the same pattern seen elsewhere: WhatsApp provides an easy way to circulate pre-written messages, and influencers use their popularity on Facebook, X (formerly Twitter), and Instagram to promote the messages of the authorities they are affiliated with, including misinformation.

An estimated 2.3 million active users are on social media in Yemen, approximately 8% of the population, mostly in the main centres as internet access is difficult or non-existent in many parts of the country (SCSS 19/01/2022). Even in the cities, internet access is prohibitive for many because of the cost. Although uptake of the internet is growing and the way people use it is changing fast, sharing messages on social media platforms alone will not reach everyone (Wilson Center 08/08/2022). This means word of mouth from trusted sources, as well as Friday sermons from imams at mosques, remains a key way for the spread of information and misinformation (KII 24/07/2023; Al-Aslami Shamir Twitter 22/07/2023; MCD 16/12/2022).

Reasons behind the spread of misinformation

Discussions and analysis with experts indicate that strongly held religious ideologies and sociocultural norms are behind the anti-international sentiment and are being used to mobilise misinformation (KII 26/07/2023; KII 14/08/2023; KII 24/07/2023). That said, as with other activities in Yemen's sociocultural space, the overarching ambition for the spread of misinformation is unclear. The aim appears to be to discredit the international community to increase community reliance on and trust in the governing authorities alone (the DFA in the north and the IRG and STC in the south). Through this, the respective authorities would increase their control over the population.

Islamic ideology perceived as under threat from Western influence: several Islamic groups, particularly the Houthis, Salafi, and Wahabi, have significant influence and power in Yemen. These groups spread and promote their particular religious beliefs through campaigns and during Friday prayer sermons. Lately, many imams from these groups have been preaching about the negative role of international organisations in Yemen and how they corrupt the moral values of women and society in general (MCD 16/12/2022).

With the current spread of misinformation, these different Islamic groups seem united in their willingness to discredit humanitarian responders. They are in consensus that women's freedom and changes in cultural norms should be restricted, and they consider the international humanitarian response as a potential aggravator of these norms. This is despite the groups' differences in their interpretation and practice of Islam and their being engaged in power struggles within the country for control over territory. While this does not imply that the different groups are unified in any other way, it indicates the perceived importance of asserting their Islamic ideology in the face of what they deem a Western challenge backed by humanitarian resources.

Resistance to changed social and cultural norms: Yemen is a traditional and patriarchal society. Cultural norms and beliefs are rooted in a combination of religious, tribal, and social traditions, which translate into how people interact and behave. There is a common belief that women should be the primary caregivers at the household level (ACAPS 11/04/2023). Women are primarily responsible for cooking, cleaning, and collecting water and firewood for their homes. They are also tasked with caring for children, the elderly, the sick, and people with disabilities. Men on the other hand work outside the home and are responsible for providing financial income. These gender roles are strongly defined and were largely adhered to prior to the war (SCSS 15/12/2019).

The current conflict, associated economic decline, and lack of livelihood opportunities have led to some shifts in these gender roles. Women's contribution differs considerably between households, and broad generalisations are difficult to prove, but there are signs that women in Yemen have expanded their presence in economic activities, including outside the home. This also means changes in their role within the household, both in terms of livelihood activities and decision-making involvement (SCSS 15/12/2019; ACAPS 11/04/2023). These changes are fragile and have not been accepted across society, giving conservative groups room to question and challenge them.

Changes in behaviours and gender roles have emerged as a practical household necessity, with families finding new ways to meet their needs and cope with challenges in the face of economic decline. Those who spread misinformation consider humanitarian organisations as facilitators of these changes in society as they directly employ women and implement programmes that promote women's economic empowerment (KII 13/08/2023).

Conditions that allow misinformation to flourish

Limited information and lack of transparency: despite years of humanitarian presence in Yemen, it appears that the work of INGOs and UN agencies is not well understood, particularly regarding the rationales behind the processes involved in providing humanitarian assistance. This is highlighted by some of the rumours that Yemenis and Yemen experts shared with ACAPS.



RUMOUR	REALITY
Organisations require registration and ID cards for women or their presence at distribution points for assistance to recruit them to participate in 'immoral' behaviour.	Registration is necessary to keep logistical track of assistance, and the requirement for ID cards to receive assistance is to ensure that those entitled to it receive it.
When an organisation covered their office windows so people could not see what was happening from the outside, the community perceived it as an indication that 'immoral' activities were taking place inside.	The organisation covered their windows to prevent people on the streets from peering inside and watching their female staff, increasing their privacy and making them feel safe and secure.

Source: (KII 26/07/2023; KII 14/08/2023; KII 24/07/2023)

Social tensions around different financial gains paving the way for negativity towards international organisations: the war has increased the gap in incomes and living conditions between social classes, which was already stark prior to the conflict. Those among the affluent able to receive better education are also the ones getting jobs at the UN and INGOs, allowing them to earn good, regular salaries often paid in stable currencies, such as US dollars. This perpetuates the perception of the humanitarian sector as a driver of inequality – resulting in feelings of resentment from those not benefiting from the influx of jobs from humanitarian organisations, community tensions as purchasing power becomes increasingly strained for many households, and general negativity towards the organisations themselves. This negativity has likely contributed to people believing misinformation and rumours about the sector (KII 02/08/2023; KII 26/07/2023).

Social impact

Given pre-existing negative perceptions surrounding international humanitarian organisations and strongly held religious and cultural norms, it appears to have been easy for many Yemenis to be convinced of additional reasons to mistrust the sector without much basis. This negativity towards international humanitarian organisations has also carried over to Yemeni NGOs and civil society groups, making it increasingly difficult to gain the acceptance needed to work with communities and respond to needs. Yemeni humanitarian workers report being exposed to the criticism of people in the communities they are trying to work with. If this continues, the mistrust of humanitarian efforts will affect humanitarian access, increase unmet needs, and increase safety risks for aid workers.

Increased community consultation and explanation of humanitarian organisations' ways of working may demystify rumours and increase community goodwill. This may in turn reduce the degree to which negative rumours flourish.

Theme 3: protection concerns for migrants from the Horn of Africa

Since December 2022, there has been an overall spike in the arrival of migrants from the Horn of Africa. Despite a decrease in the monthly arrivals of these migrants between May–June 2023, the number of arrivals has nonetheless been higher in the first half of 2023 than the whole of 2022. Between January–June 2023, over 77,130 migrants arrived, compared to 73,233 in all of 2022. The vast majority of arrivals (98%) are from Ethiopia (IOM 14/08/2023).

The increased number of arrivals is linked to the lack of livelihood opportunities and income sources in migrants' areas of origin and incidents of localised violence. The Horn of Africa is experiencing its worst drought in 40 years. This contributes to a deterioration of the humanitarian environment in contexts where humanitarian access is already challenging for a range of factors, including conflict and complete blockages to aid, such as in northern Ethiopia (AP 09/06/2023). These factors push increased numbers of people to migrate and look for better opportunities abroad (OCHA accessed 15/08/2023; AI accessed 15/08/2023).

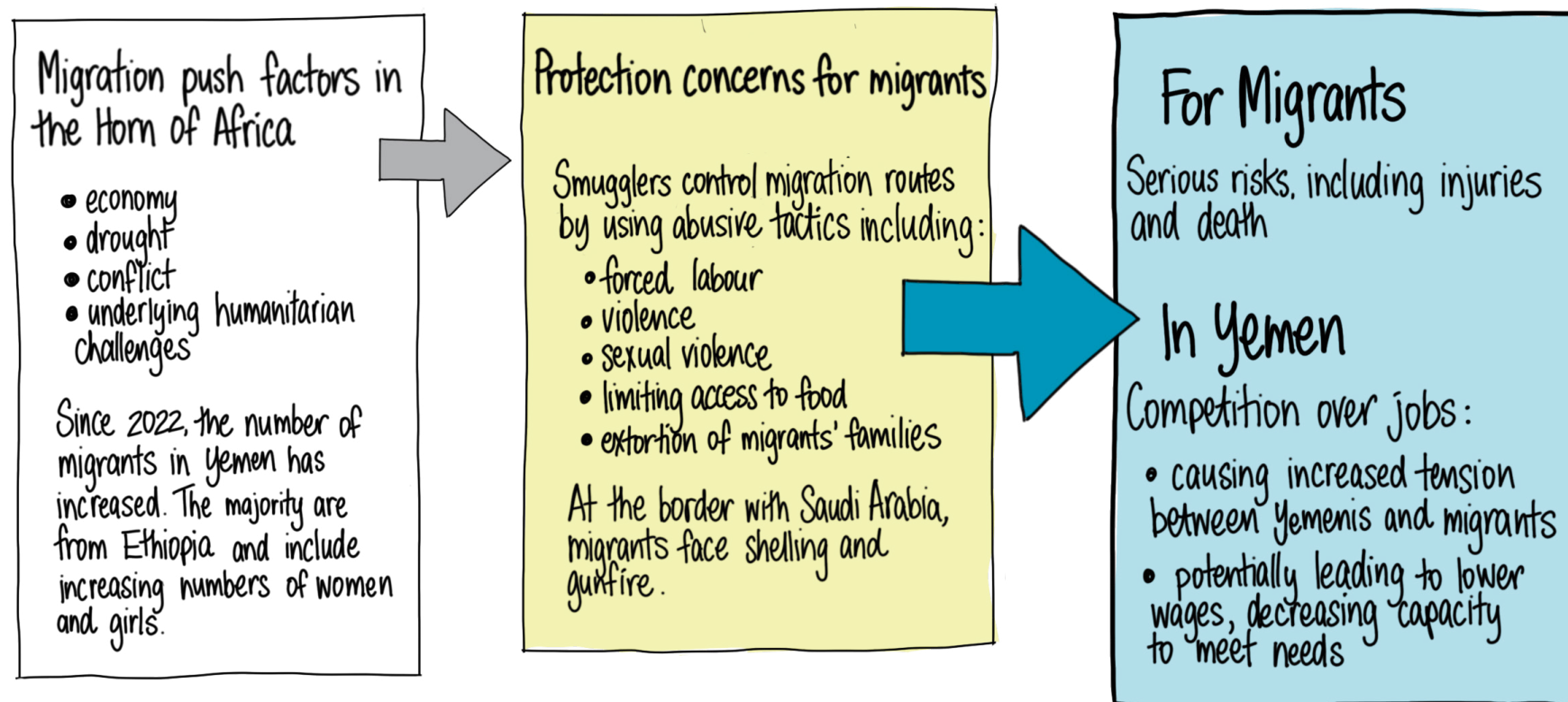
Migrants facing abuse and exploitation from the smuggling networks facilitating their passage

Migrants encounter different complications, both along their journey to Yemen and once inside the country. Smugglers and traffickers control the primary migration routes from departure to arrival. Upon their arrival in Yemen, migrants are taken to smuggling dens throughout the country, including in Al Maharah, Ma'rib, Sa'dah, and Shabwah governorates (IOM 14/06/2023).

Once in the system, migrants become powerless against the smuggling networks, which use tactics such as abduction, violence, abuse, and exploitation to control every step of the journey. Some reports indicate an increasing number of women and girls on the route who routinely experience abuse and exploitation, including rape (HRW 21/08/2023). These result in cases of pregnancy and other sexual and reproductive health complications (IOM 14/06/2023; KII 30/07/2023).

Interviews with individuals studying people smuggling into Yemen indicate that groups and individuals within the smugglers' network are connected, making it very difficult for migrants to escape once they start their journey. Payment for passage into the Middle East is made by the migrant in full at the point of deportation, and subpayments from this are made from smuggler to smuggler along the route when migrants cross borders. Increased challenges in crossing the border into Saudi Arabia mean many migrants who fail to cross remain in the control of smugglers. At this point the conditions and circumstances become even worse for migrants, their access to food is limited, they are used for forced labour, and pressure is put on their families to pay ransoms to secure their safety (KII 30/07/2023; KII 26/07/2023).

PROTECTION CONCERNS FOR MIGRANTS FROM THE HORN OF AFRICA IN YEMEN



Source: ACAPS

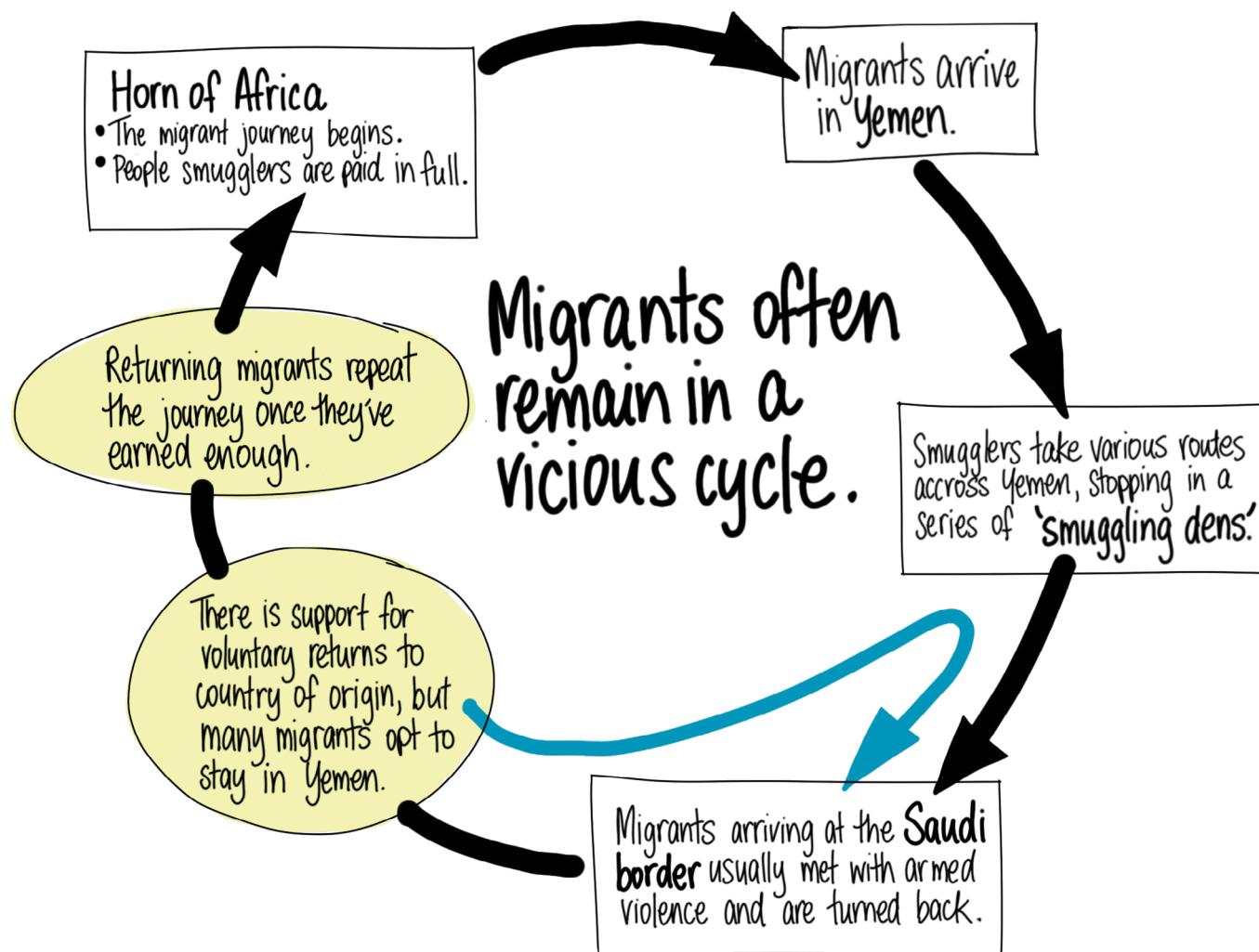
Migrants facing the risk of death while crossing the border into Saudi Arabia

Recent reports indicate that Saudi border guards using shelling or gunfire directly target migrants trying to cross the border from Yemen to Saudi Arabia. Migrants usually make multiple attempts to cross the border from Sa'dah governorate towards Saudi Arabia, frequently resulting in injury or death. Those who do not die witness the death of others around them. Stories from migrants include that of a 28-year-old returnee who shared that 40 out of 70 migrants died on his initial attempt to cross the border after being fired on by security forces. On his next attempt, a further 20 migrants died in a similar manner (MMC 05/07/2023; HRW 21/08/2023).

Between January–March 2023, over 17,200 migrants returned home through the IOM voluntary humanitarian return programme. Many migrants request to go home, but some choose to stay in Yemen, acknowledging that although they face many challenges in Yemen, they have a chance to find work while waiting for another opportunity to cross into Saudi Arabia (KII 30/07/2023).

Despite the significant risks, ACAPS' conversations with those studying the issue indicate that migrants are engaged in a vicious cycle where they take the route through Yemen in an attempt to enter Saudi Arabia, are turned back, and then work in Yemen or return to their home country to earn money to take the route again towards Saudi Arabia (KII 30/07/2023).

MIGRANTS OFTEN REMAIN IN A VICIOUS CYCLE



Source: ACAPS

Conversations with Yemenis indicate that the increase in the number of people from the Horn of Africa is evident in cities such as Sana'a, where they compete for jobs with Yemenis (KII 26/07/2023).

Social impact of the increased numbers of migrant workers in Yemen

Expert observations indicate that migrants from the Horn of Africa are willing to work for less money than Yemeni workers and receive jobs that would otherwise have been available to Yemenis. Migrants take less than the local daily wage for service work in restaurants, farms, and hospitals. These jobs have long been associated with migrant workers, but with the current situation of war and a steep decline in household purchasing power, these roles have become more acceptable to increased numbers of Yemenis (ACAPS 05/11/2021). There are concerns that this competition for jobs could lead to even lower wages, affecting the most vulnerable among both migrants and Yemenis and further decreasing their capacity to meet basic needs. Observations also indicate growing suspicion that migrants are benefiting more from the humanitarian assistance that should be directed to the Yemeni community (KII 30/07/2023; KII 26/07/2023). In the face of continually increasing economic challenges, all these factors result in tensions between Yemenis and migrants, which increasingly flare up and pose risks to social cohesion (KII 26/07/2023).

ON THE WATCH LIST

The watch list includes themes that have emerged from the overall data and information monitoring that is part of the SIMP review process or that have been highlighted in previous SIMP editions, which ACAPS continues to monitor. These themes did not receive an in-depth focus in this report but remain areas that we watch closely and may become a focus of future reports.

Summer camps enforcing Houthi ideology and potentially leading to child recruitment

Between May–June 2023, the Houthis once again organised summer camps across the country. In DFA-controlled areas, they launched the annual summer camp programme in April (Arab News 01/05/2023). Summer camps are usually designed for children ages 7–17. Boys are more likely to attend than girls, although girls are increasingly being encouraged to attend camps specifically designed for them. The Houthi authorities indicated that they expected to enrol 1.5 million children in the 2023 summer camps (SCSS 15/05/2023). Monitoring and observations indicate that the trends and patterns of summer camps remain the same as in 2022, covered in our earlier report [here](#).

Climate change and its impact on Yemen compound the negative effects of the conflict on lives and livelihoods

Yemen is among the fifteen countries most vulnerable to climate change, showing high vulnerability and low readiness scores (ND-GAIN accessed 02/06/2023). Besides the impact of conflict, extreme weather events have destroyed, damaged, and made agricultural infrastructure, including irrigation, and land inaccessible. These conditions have led to the loss of agricultural livelihoods and increased food and livelihood insecurity (NUPI 14/06/2023). Reports indicate that droughts and a lack of rainfall in certain areas of the country have forced many people to internally displace to look for livelihood opportunities (REACH 11/08/2023). Climate-related stressors could also worsen existing tensions in communities. Smallholder and irrigated farming using groundwater are the main forms of agriculture in Yemen, so the destruction of irrigation facilities by natural hazards and conditions can affect social cohesion as competition over arable land and water increases (NUPI 14/06/2023).

Challenges for individuals freed in the prisoner exchange and their families

Between 14–16 April, the International Committee of the Red Cross facilitated the exchange of over 887 prisoners among parties to the conflict (SCSS 15/05/2023). Besides benefiting the people freed, their release is also a positive sign that parties to the conflict are participating in negotiations.

After the exchange, several areas of concern emerged. The freed prisoners were sent to areas under the control of the party they were affiliated with, which were often not where the individual originated from or where their family and support networks were located. For example, people affiliated with the IRG captured and detained in Sana'a were sent to Ma'rib upon release, and people affiliated with the DFA captured and detained in Ma'rib were sent to Sana'a (SCSS 15/05/2023).

Anecdotal information also indicates that some male prisoners returning home have found it difficult to cope with the changes in the household dynamics that occurred during their absence, such as women working to generate income. These concerns risk triggering domestic violence. There are also reports that most of the prisoners freed are in very poor health, putting financial pressure on the families to pay for healthcare (KII 12/07/2023).