CONTEXTUAL ISSUES CAUSING NEGATIVE SOCIAL IMPACTS

Political instability, deteriorating economic conditions, and natural hazards continue to stretch the coping capacity of many Yemenis.

Yemen’s southern governorates continue to witness civil unrest and protests driven by economic problems, dismal service provision, and political instability. The military and security part of the Riyadh Agreement remains unimplemented (FEWS NET 13/07/2021). Diplomatic efforts in support of a nationwide ceasefire between the Internationally Recognized Government of Yemen (IRG) and the de-facto authority (DFA) in the north of Yemen (also known as the Houthis) continue. The Houthis, however, continue to reject peace negotiations until their long-lasting demands for lifting the Saudi blockage of ports and Sana’a airport are met (Security Council Report 30/06/2021).

Economic conditions continue to worsen. The depreciation of the Yemeni rial (YER) and the exchange rate difference between DFA and IRG areas have led to price increases and reduced people’s purchasing power. In IRG governorates, the exchange rate reached YER 991 to 1 USD by the end of July, while in DFA-controlled areas it remained stable, trending at YER 596 to 1 USD. Food and fuel prices simultaneously increased, mainly in IRG-controlled areas (FAO accessed 08/09/2021).

Between April–June, the forcible transfer of migrants from northern to southern governorates continued. Over 23,000 migrants were pushed across active front lines, and over 10,000 moved to southern governorates (IOM 09/08/2021).

Yemen is still experiencing the second wave of COVID-19. Although the number of new cases reported daily has been declining, monitoring mechanisms remain extremely limited in IRG areas and are nonexistent in DFA-controlled areas, so the COVID-19 situation is unclear. As at 27 June, over 270,601 people in southern Yemen have received the first vaccine dose. In DFA-controlled areas, the vaccination of healthcare workers began on 20 June (OCHA 11/07/2021).

Methodology
The analysis presented in this report is based on:
- The daily monitoring of relevant indicators which are logged in ACAPS’ qualitative database
- Analysis of data from ACAPS’ core dataset (ACAPS 17/08/2021)
- Secondary data review of documents published in and on Yemen
- Joint analysis sessions involving the YAH team and partners to test and refine assumptions.

Limitations
There is limited information specifically related to the impacts on vulnerable groups. The nature of the information, which is largely qualitative nature, makes it difficult to compare and aggregate, especially on a continuous and country-wide basis. In the light of these limitations, ACAPS has confidence that the approach being used, both to monitor the indicators and to analyse their meaning through integrated analysis, helps understand vulnerability.
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<th>VULNERABLE GROUPS PARTICULARLY IMPACTED</th>
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<td>Prisoners and detained people</td>
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This table is based on qualitative monitoring. Key information:

<table>
<thead>
<tr>
<th>Impact</th>
<th>Very negative</th>
<th>Negative</th>
<th>Somewhat negative</th>
<th>No impact</th>
<th>Somewhat positive</th>
<th>Positive</th>
<th>Very positive</th>
<th>Information gap</th>
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Women’s access to healthcare is deteriorating

Women’s access to healthcare is generally more limited than it is for men, and recent reports indicate that the situation is worsening. Women often arrive at health facilities with life-threatening complications, including obstructed or prolonged labour, too late for any positive outcome. This is caused by an overall lack of finances, the expensive cost of medical care and operations (between USD 160–400), fuel shortage leading to increased transportation costs, physical barriers such as closed or destroyed roads, and the prioritisation of other necessities over women’s health because of their standing in the family and in society. Delays in seeking healthcare put women at risk of complications and other adverse health consequences. In the case of complications in pregnancy and childbirth, the risks are not limited to women; they extend to their babies, who might be born with a weak immune system or other conditions impacting their health and wellbeing. This will have financial implications on the family (MSF 11/05/2021; MSF 24/04/2019).

Falling behind in access to healthcare is not exclusive to maternal health. Anecdotal observations shared with ACAPS indicate that there are far fewer women getting COVID-19 vaccinations than men. Reasons include timing and the availability of vaccination centres. The centres are only open for three to four hours a day because of high temperatures and electricity shortages. This leads to long queues and waiting times, making the process more difficult for women unaccustomed to spending long periods outside the home. Women’s vaccination areas are also underused. Because of this, the resources supposedly dedicated to women are being used to vaccinate men. While this is a practical solution to the increasing numbers of men arriving for vaccinations to work in Saudi Arabia, it causes concerns for women who do turn up to be vaccinated (ACAPS’ discussions with operational actors).

Overall, the number of vaccinated people in Yemen is extremely low. Being the primary caregivers at the household level, women are likely to be the most exposed to the virus if it penetrates a household and the most likely to spread it within. The absence of the caregiving role provided by women, as in the event of a death or illness, is felt acutely.

Source: ACAPS, see full illustration on page 9.
Remittances into Yemen from Saudi Arabia are likely to decrease further

New vaccination requirements for entry into Saudi Arabia since June 2021 have prevented or delayed Yemeni migrant workers from returning. Exit and re-entry visas to Saudi Arabia last 30 days and can only be extended by an employer. Migrant workers who do not return within that period are banned from working there again. To return for work, they need at least the first COVID-19 vaccine dose. To get inoculated, they have to go to a location with a vaccination centre within 30 days of their exit from Saudi Arabia. Vaccination points are only located in major centres, which causes additional travel expenses. Among those who travelled to Yemen for the Eid holiday in May, it is likely that many did not meet these vaccination requirements.

Between June–July, Yemeni migrants faced deportation from Saudi Arabia or were imprisoned while attempting illegal entry. The reasons for deportation were violations of identity and labour law, as well as violations of the border security system by unlawful entry. Such incidents are not new. Combined with other factors, such as contract issues being faced by Yemeni academics in Saudi Arabia (which were reported in this period), they increase overall concerns about the status of the 1.8 million Yemeni migrant workers in the country, the potential for further reductions in that number, and the impact the deportations will have on households in Yemen. The loss of income will place a significant strain on remittance recipients – particularly those without any other source of income (Samir Salama 13/07/2021; SCSS 5/08/2021; M&R Section 03/2021).

An estimated 10% of Yemeni households rely fully on remittances for income, while 20% rely on the same source as a partial income channel. Saving is not common in the Yemeni culture, largely because expenses exceed income over recent years, and there are always extended family and community members to support with spare resources. The families of migrant workers are very unlikely to have any buffer against the sudden loss of income (GIZ promoting peace in Yemen through the economy 03/2020).

The situation in Marib governorate is causing tensions, exhausting coping strategies, and depleting resources

The displacement trends for Marib governorate decreased between April–June compared to the first three months of 2021, with less movement recorded to, within, and from the governorate. This does not imply an improvement in the situation of the people, which is reflected in the reported incidents. Shelling attacks towards Marib city have increased, leading to more civilian casualties. Over 110 people were injured or killed between April–June, the highest number recorded in the governorate since 2018 (CIMP 07/2021, IOM accessed 10/08/2021).

The overcrowding of IDP sites poses safety risks. Over 17 fire incidents were reported in displacement sites, mainly in Marib city and Marib Al Wadi. These are attributed to overcrowded displacement sites, inadequate equipment, and the different ways people adapt to the situation, such as using wood fires to cook in densely populated spaces or batteries to generate electricity.

Between January–July 2021, over 52% of IDPs in Marib governorate moved within the district. Some moved closer to front lines, which exposes them to multiple displacements and increases their vulnerability levels (IOM accessed 10/08/2021). While the number of times households have moved during the conflict is unspecified, the process of relocation exhausts household resources. People in Marib are now moving the shortest distances they can to safer places. This trend was not observed earlier in the conflict, which raises concerns over the limited resources households have at their disposal, the cost of displacement, and increasing vulnerability as people end up staying close to active conflict. Although there is minimal information on this, it may be more accurate to describe a growing number of people in Marib as ‘on the move’ than as IDPs.

Tensions between IDPs and their host communities are increasing. Around 774 IDPs fled from the Al Rakzah area in Marib Al Wadi to Al Jubah district because of threatening messages from tribal groups (OCHA 09/06/2021). There were also reports of community members blocking the establishment of water networks that provide water to IDPs and migrants (IOM 22/07/2021). This reflects the increasing risk and experience of social tension and highlights the strain on individual, household, and community resources. The commitment to community interconnectedness was a critical coping mechanism for Yemenis before the conflict. In the context of weak and deteriorating state institutions and services, individuals helped those they were connected to through family, kinship, tribal, geographic, or other ties. This interconnectedness resulted in the sharing of financial support, shelter, fuel, food, water, and companionship. The conflict and all the associated impacts have seen needs increase and resources strained. This has altered the capacity of Yemenis to share resources and has affected social networks, which appear to be much narrower and more selective. While IDPs would have once been considered guests deserving of support, they are now seen as a threat to available resources. This is likely the situation across Yemen, but Marib is particularly affected because it has been the destination of many IDPs and is now a conflict hotspot.
The fuel crisis negatively affects people’s mobility, increases prices, and reduces livelihoods. As a result, people are less able to meet their needs. This is most severe in DFA-controlled areas.

Fuel imports to Al Hodeidah have continued to decline in 2021, leading to the rationing of affordable fuel. Fuel is readily available in the parallel market but at inflated prices. Across the country, the increase of fuel prices has increased the costs of local food production (such as fruits and vegetables, including importation from one governorate to another), transportation, water trucking, and service provision, including medical services. Access to affordable clean water is increasingly limited, especially for people with low incomes and IDPs in displacement sites. This increases the risk of hygiene issues and the spread of diseases such as cholera and COVID-19. Higher transportation costs affect people’s access to markets and medical centres, particularly for those living in villages an hour of travel away from access to these services. This is critical when lifesaving assistance is required. Health providers report struggles with operating medical equipment and facilities, which require high wattages of electricity that only generators can produce. The fuel shortage has forced some health agencies to reduce their activities or suspend their work. Livelihood activities, including fisheries, agriculture, and other small businesses, are expected to continue facing reduced production given the increased transportation costs. Humanitarian workers also face increasing costs of delivering assistance and its impact on the scale of their response.

ON THE WATCHLIST

Continuous decline of exchange rate

The rial continues to drop in value (reaching YER 991 to USD 1 by the end of July in areas under IRG control). There are indications that the continuous decline of the rial, combined with increased prices in the coming 12 months, will result in a 39% reduction in purchasing power.

Recurrence of rain

Heavy rain and flash floods since March have affected IDP sites, public infrastructure, and people in general. Although not as severe as the rains of 2020 so far, repeated flash floods have severely impacted IDPs, especially those living in tents. IDPs are repeatedly facing the loss of shelter and assets.

Oppression of civic freedom

Arbitrary detention and forced virginity tests in Sana’a city for the public figure Intisar Al Hammadi raise concerns over civic freedom, protection, and human rights. ACAPS is monitoring protection incidents. Currently, there is insufficient information to define a clear trend (we are unable to determine if this is from a lack of reporting or low numbers of such incidents).

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Ma‘rib internal displacement – IDP HH movement to (January to July 2021)

The boundaries and names and designations used on this map do not imply official endorsement or acceptance by ACAPS.
Source: IOM DTM, OpenStreetMap
Fuel continues to negatively affect livelihoods and put pressure on prices of food, water, and other essential goods across the country.

Key issues in Marib:
- Increased civilian casualties
- 17 fire incidents in displacement sites
- Growing tensions between IDPs and host communities

Exchange rate depreciated in IRG areas, reaching YER 991 by the end of July

38,400 people impacted by flooding
IDPs living in displacement settlements are most affected (Marib, Hajjah, Aden, Lahj, Abyan and Dhamar most affected governorates)

Sources: CIMP, OCHA, IOM, FAO
Reduced income

- Irregular salaries
- Unemployment
- Food dependency
- Reduced remittances

Healthcare costs

Concems about shortages & functionality at health centres

Fuel & transport costs

Factors impacting women's access to healthcare

Women's caring role in families
Societal norms & values

Physical barriers

Other priorities

Aces keep increasing

Source: ACAPS
FUEL CRISIS: ISSUES & IMPLICATIONS

- Hospitals rely on fuel to power generators
- Increased costs of local food production
- Increased price of water trucking
- Access to healthcare
- Access to markets
- Limited movement of people
- Reduced humanitarian activities
- Increased cost of delivering assistance
- Delays in distributing supplies

Source: ACAPS