Yemen

Escalation of Conflict

Since 23 March, more 150,000 people have been displaced, over 1,000 were killed and 4,350 injured. Access conditions are severely restricted while urgent humanitarian needs are increasing. This adds to the already dire situation of 16 million people in need of assistance over a total population of 26 million. This represents 60% of the population.

Access has deteriorated and led to significant shortages of fuel and electricity. These have affected the functioning of hospitals, the availability of drinking water and food.

19 out of 22 governorates are affected by the conflict, which has escalated since 23 March. Alliances are complex, at times transitory. Several local militias have supported the Government. Armed Sunni tribesmen and Al Qaeda in the Arabian Peninsula (AQAP) have been fighting the Houthi advance, although AQAP continues to oppose the Government as well.

On 26 March, a Saudi Arabia-led coalition launched air attacks. Nonetheless, Houthis continued advancing south. Airstrikes and fighting have continued unabated, particularly in the southern governorates, with no reported progress on a political settlement in the short term.

Key Findings

Anticipated scope and scale

Almost the entire population could be affected by the conflict. If the conflict continues it could entail more displacement, an increasing number of casualties, and the collapse of humanitarian services. Access obstructions and fuel shortages could exacerbate humanitarian needs even further.

Priorities for humanitarian intervention

- Protection, particularly in conflict-affected areas.
- Health, particularly emergency health. Mass casualty management.
- Food and water delivery to affected populations.
- WASH.
- Emergency shelter and NFIs.

Humanitarian constraints

Fuel shortages: humanitarian partners only have fuel left for two more weeks of lifesaving operations. Hospitals will shut down in one week unless additional fuel becomes available.

Access constraints due to active fighting, airport closures and restricted access to ports.
Crisis Impact

Escalating conflict has spread to 19 out of 22 governorates. Over the past month, at least 1,080 people have been killed and more than 4,350 injured. Critical civilian infrastructure has been destroyed and an estimated 150,000 people have fled their homes. Insecurity is constraining humanitarian access and hampering response efforts (OCHA 25/04/2015). The most affected governorates include Aden, Al Dhale’e, Lahj, Sa’ada, Sanaa, Sanaa City, Taizz (OCHA 26/04/2015).

15.9 million people were in need of humanitarian aid before the recent escalation of the conflict (HNO 22/12/2014). Needs are expected to increase, particularly in the protection, health, WASH, and shelter sectors.

Access to Essential Services

Protection

Between 26 March and 22 April, an estimated 551 civilians were killed, including 115 children. Another 1,185 civilians, including 67 children, were injured. This represents roughly half of the total casualties in the period (OCHA 23/04/2015). All parties to the conflict have been targeting indiscriminately civilians and civilian infrastructure. Reported indiscriminate shelling of houses is restricting civilian movements (OCHA 19/04/2015). On 20 April the coalition targeted a weapons storage facility in Faj Attan area, Sanaa city, which caused kilometres around it, killed at least 46 people, and injured 398 (ECHO 21/04/2015).

In Aden, concerns have grown that refugees and migrants could be susceptible to forced recruitment (OCHA 31/03/2015).

Children: One-third of all fighters in armed groups are children, according to UNICEF (UNICEF in The Guardian 09/04/2015). In January, 48 cases of recruitment and use of under-18s were recorded (UNICEF 31/01/2015). On 29 March, 17 fighters under age 18 were reportedly captured by an opposing party in Aden (OCHA 31/03/2015).

Mines: In Lahj, local partners report that AQAP has placed land mines in Al Hamra area of Al Hawta District in order to guard against any Houthi advance (OCHA 31/03/2015).

Health

- Health facilities are struggling to function as they face increasing shortages of life-saving medicines and vital health supplies. Due to lack fuel, there are frequent disruptions in power supply and generators. Lack of fuel has also disrupted ambulance operations and the delivery of health supplies across the country. Power cuts and fuel shortages also threaten to disrupt the vaccine cold chain, leaving millions of children below the age of five unvaccinated (WHO 21/04/2015).

- Market prices of essential medicines have increased by more than 300% (OCHA 26/04/2015)

- 95% of the foreign medical workforce has left the country since 26 March, according to the Ministry of Health (OCHA 23/04/2015).

- Hospitals in all affected governorates are in urgent need of medicines and equipment, including oxygen supplies, supplies for treating trauma wounds, equipment, health staff and bed capacity (WHO 01/04/2015).

- The only oxygen generating plant in Yemen has ceased to function due to lack of fuel, according to the Ministry of Public Health and Population on 18 April. The plant is located in Sana’a City and the main source of oxygen for Yemeni hospitals (OCHA 19/04/2015).

- As of 23 April, the main hospital in Aden had no water after storage tanks were damaged during fighting and repairs failed due to insecurity (OCHA 23/04/2015).

- In Marib, health services have very limited functionality.

- In Aden, the presence of dead bodies in the streets has raised serious health concerns.

- Malnutrition treatment services have been suspended in Lahj (OCHA 31/03/2015).

WASH

The lack of power combined with damaged water pumps in the south has forced people to resort to water collection from unprotected and abandoned wells.

With the increasing temperatures and deteriorating hygiene, cases of waterborne diseases are on the rise, with unverified reports of acute diarrhoea resulting in a number of child deaths in Mualla as of 22 April (UNICEF 22/04/2015). Over April, national disease surveillance reports show a doubling in the number of cases of bloody diarrhoea in children below the age of five, as well as an increase in the number of cases of measles and suspected malaria. High rates of malnutrition among women and children under five have also been reported (WHO 21/04/2015).

The absence of latrines and open defecation is a serious problem in communities, as reported in a rapid assessment of IDPs by the Norwegian Refugee Council in mid-April, causing diseases and creating a generally unhealthy environment. Building or rehabilitating latrines or septic tanks is a priority (Norwegian Refugee Council 16/04/2015).
Shelter
NRC’s rapid assessment in Abyan, Hajjah, and Al Hudaydah found that more than 47% of IDPs are living with host families. However, NRC also found, a large proportion of the IDPs in Abs, Hajjah, and Al Zohra, Al Hudaydah, living in open spaces (1,930 families) or in tents and other improvised shelters (1,455 families) (Norwegian Refugee Council 16/04/2015).

A large number of IDPs lost everything, including kitchen items, beddings, blankets and items of clothing. Respondents considered that an overwhelming part of their communities was lacking the basic essentials. Distribution of basic packages are needed in most communities (Norwegian Refugee Council 16/04/2015).

Parties to conflict have reportedly forcibly taken shelter in private residences in the south (OCHA 31/03/2015).

Reports indicate that about 700 people are staying in five schools in Khanfir district, Abyan governorate (OCHA 31/03/2015).

In Lahj, mud houses in Al Hawta district have been destroyed by indiscriminate shelling. Many families have been displaced to live with relatives and are in need of NFIs (OCHA 31/03/2015).

Food Security
Food prices have rocketed and are out of reach for the most vulnerable (ECHO 01/04/2015). Rising fuel prices and difficulties transporting fuel and other imports – including the 90% of food that is imported – greatly reduce access to food and water. Where available, retail prices of wheat grain and wheat flour rose by 42% and 44%, respectively, in April compared with February (OCHA 26/04/2015).

Areas of particular concern include Sa’ada, Hajjah, Abyan, Al Dhalee, Lahj, and Shabwah governorates, as well as the city of Aden. Most areas of Yemen are expected to be in Crisis (IPC Phase 3), with increasing populations in need of humanitarian assistance as the conflict continues. If conflict and market disruption continue, and humanitarian access is limited, the worst affected areas could fall into Emergency (IPC Phase 4) over the coming months (FEWSNET 17/04/2015).

Most IDPs have lost their livelihoods in their place of origin and have little access to cash (Norwegian Refugee Council 16/04/2015).

Prior to the escalation of the crisis, more than five million people were severely food insecure (WFP 28/02/2015).

Impact on Critical Infrastructure
There are reports of widespread targeting of civilian infrastructure, including water supply networks, electricity stations, and food supply stores. The Marib central electricity network has been damaged, causing total disruption of the electricity supply to the city of Sana’a and most neighbouring governorates (WHO 13/04/2015). Random shelling is damaging schools (ECHO 01/04/2015). Communications networks are increasingly cut off for long periods of time. Millions of people are receiving less than an hour of uninterrupted water supply per day, while others face electricity cuts that last many days (UNICEF 22/04/2015).

Displacement
IDPs: Recent conflict has displaced at least 150,000 people. Reports indicate that thousands of people have been leaving Sana’a daily, heading for rural areas. Secondary displacement is occurring, as people relocate from other major cities (prime targets for the air campaign) to surrounding villages (ECHO 01/04/2015). As of early April, the most affected governorates are Al Dhalee, where at least 63,000 people (9,000 families) have been displaced; Sa’ada, where at least 15,700 people have moved to neighbouring governorates; Hajjah, where IDPs have fled to surrounding areas; and Sanaa, where large numbers have reportedly left the city. Abyan has reportedly received 21,000 people from neighbouring governorates (ECHO 01/04/2015).

Refugees: As of 24 April, 10,263 people had fled for the Horn of Africa since mid-March. Most have fled to Djibouti, others to Somailand and Puntland. Over 60% are third-country nationals who need assistance to return home (OCHA 24/04/2015).

Vulnerable Groups Affected
- 150,000 newly displaced people and 334,000 existing IDPs (HNO 22/12/2014). Most are in five governorates: Sa’ada (103,014); Hajjah (88,603); Amran (71,548); Sanaa (46,228); and Al Jawf (24,700) (OCHA, 11/2014). 90% are estimated to live outside camps (OCHA, 03/09/2014). Over 2014, localised conflicts displaced approximately 100,000 Yemenis, mostly for days (USAID, 13/02/2015).
- In 2015, an estimated 915,000 refugees and migrants require multi-sector humanitarian assistance – an increase of 16% on 2014’s estimate (HNO 22/12/2014).
- Urban populations, where conflict is concentrated.
Humanitarian and Operational Constraints

- Humanitarian partners only have fuel for two more weeks of lifesaving operations. Hospitals will shut down in one week unless additional fuel becomes available. Fuel shortages and restrictions on imports mean that any available can cost as much as USD 10 per litre (OCHA 27/04/2015).
- The ongoing naval blockade heavily restricts port access (MSF 31/03/2015). Al Hudaydah and Al Salifah ports in Al Hudaydah governorate are functional, although shipping activity remains restricted.
- Clashes in Aden governorate have limited humanitarian access to some areas in the district (OCHA 27/04/2015).

Aggravating Factors

Economic Crisis

Oil production represents over 70% of total government revenue (Extractive Industries Transparency Initiative, 19/07/2013). Production was suspended in January in the major oil-producing governorates of Shabwah and Hadramaut, and is likely to be disrupted in Marib. Oil revenues had already declined almost 30% between January 2013 and January 2014 (Al Arabiya 16/10/2014; IRIN 01/12/2014).

Saudi Arabia and other regional partners have suspended much of their assistance to Yemen, due to the country’s political instability, placing further pressure on government revenue (FEWSNET, 18/02/2015).

Malaria

The malaria transmission season will begin in early July. Community-level malaria control activities are needed now, but insecurity makes this largely impossible (OCHA 31/03/2015).

Contextual Information

Drivers of the Current Conflict

Shi‘ite Houthi forces from northern Yemen, based in Sa‘ada governorate, took over the capital city Sanaa in September, having expanded their territory southward since February 2014 (BBC 27/09/2014). Cuts to fuel subsidies in July 2014, and subsequent price increases, are believed to have increased popular support for the Houthis (Al Jazeera 01/08/2015). Despite a peace agreement in September, violence persisted (Al Jazeera, 22/09/2014). UN negotiations to end the crisis did not yield results. On 6 February 2015, the Houthis dissolved Parliament and replaced the Government with a presidential council (Reuters 06/02/2015). President Hadi, who had resigned, escaped house arrest and flew to the southern city of Aden, where he rescinded his resignation on 21 February.

Following the Houthis advance southward and President Hadi’s call for international intervention, on 26 March, Saudi Arabia, backed by a coalition of ten countries, began airstrikes on Houthi positions (Washington Post 26/03/2015). Reported, the strikes debilitated the Houthis’ air force (Washington Post 26/03/2015). Fighting on the ground intensified (ECHO 01/04/2015).

As of 24 April, street battles persist in Abyan, Dhale, Aden and Lahj, between groups supporting members of the popular committees affiliated with the Houthis and local armed groups (OHCHR, 24/04/2015). On 21 April Saudi Arabia announced the replacement of Operation Decisive Storm with Operation Renewal of Hope, which involves the revival of talks on a political settlement, protection of civilians and delivery of aid (OCHA 22/04/2015). Airstrikes and fighting have continued unabated however, with no reported progress regarding a peaceful settlement of the conflict in the short term.

Relevant Stakeholders

Houthis (Ansarullah): The Houthis, also referred to as Ansarullah, are based in Sa‘ada governorate. Houthi insurgents have de facto control over Sa‘ada, Hajjah, Amran, Al Hudaydah, Al Mahwit, Raymah and Sanaa (Yemen Times, 01/01/2015). The forces allied with the Houthis include members of the former central security force, a unit seen as loyal to ousted president Ali Abdullah Saleh (ABC, 23/03/2015). Saleh has since distanced himself from the Houthis and on 24 April he urged the movement to withdraw from territory they had seized (Deutsche Welle 24/04/2015).

Yemeni armed forces: Certain factions in the deeply divided Yemeni army have allied themselves with the Houthis against President Hadi (Reuters, 12/03/2015). On 14 March, Hadi called for the recruitment of 20,000 southerners into the army. Hundreds of young men have since been recruited (Yemen Times, 16/03/2015).

Southern Movement: Rally in the south calling for secession gained momentum from October as tensions increased in the capital and the north (Yemen Times, 19/10/2014; AFP, 01/01/2015). The two councils of the Southern Movement merged in October and called for the south’s full independence (Yemen Times, 28/10/2014). In Aden, southern secessionist movement Al Hirak and local militias have reportedly agreed to form a common front to oppose the Houthis. However, signs have emerged of tensions among southern groups (ICG 27/03/2015). Armed militias professing loyalty to President Hadi have clashed several
times with official security forces in apparent attempts to control Aden and government institutions (OCHA 10/03/2015).

**Al Qaeda in the Arabian Peninsula:** AQAP, based in the south and east of the country, has expanded its presence in Hadramaut. According to analysts, the Houthi advance has bolstered support for AQAP and Salafi extremist group Ansar al Sharia: tribes in Ibb and Al Bayda, for example, have allied themselves with Ansar al Sharia (Reuters, 09/11/2014). According to the national security service, around 1,000 AQAP militants from 11 Arab and non-Arab countries are in Yemen (AFP, 17/01/2015). On 20 March, AQAP briefly took control of Lahj's capital, Al Hawta, from government forces, killing 20 soldiers (Yemen Times 22/03/2015; Guardian 21/03/2015).

**Islamic State:** On 20 March, three suicide attacks on mosques in Sanaa, targeting Shi’ite worshippers, killed 142 people and wounded at least 351. Islamic State claimed responsibility (AFP, 21/03/2015). IS also claimed responsibility for an attack in Lahj on the same day, which killed 29 police (ABC, 24/03/2015).

**International and Neighbouring Countries’ Relationship to the Conflict**

The conflict between Houthi forces and the Yemeni Government is largely regarded as a proxy war between Saudi Arabia and Iran. Saudi Arabia and the GCC have so far promoted confrontation rather than compromise, adding pressure to possible negotiations. The Houthis are less dependent on Tehran than Hadi is on Riyadh, but this relative self-sufficiency is unlikely to last long (ICG 27/03/2015).

**Saudi Arabia-led coalition:** Saudi Arabia firmly backs President Hadi. Saudi Arabia has demanded the Houthis step down and President Hadi be reinstated (IRIN 26/03/2015). Bahrain, Egypt, Jordan, Kuwait, Morocco, Qatar, Sudan, and the United Arab Emirates are also in the coalition (Human Rights Watch 23/04/2015). UAE, Bahrain, Kuwait and Qatar are providing fighter jets. Egypt is providing support for the naval blockade. Pakistan refused Saudi Arabia’s request for military support (The Diplomat 28/04/2015). Turkey expressed its support (Reuters 27/03/2015). The air campaign includes over 100 jets (Washington Post 26/03/2015). Saudi Arabia has mobilised 150,000 troops near the Yemeni border (NBC 26/03/2015; IRIN 26/03/2015).

**Iran** has been accused of backing Houthi militants financially and with material support, a claim the Iranian Government denies. Iran condemned the Saudi Arabian intervention. The US has authorised the provision of logistical and intelligence support to the Saudi Arabian coalition’s military intervention (Amnesty 26/03/2015). Yemen has been an important ally to the US in the fight against Al Qaeda. The US has waged a longstanding drone campaign against AQAP in Yemen (AFP 25/03/2015).

**Past Conflicts**

- Saudi Arabia launched a military offensive against the Houthis between 2004 and 2010, fearing Shi’ite control over states on its borders (Yemen Times 10/07/2014).
- Since 2009, there have been protests and attacks on government forces by the southern secessionist movement.
- The Yemeni Government, in alliance with the United States, has been fighting Al Qaeda since 1998.
- Yemen witnessed civil war in 1994, between the north and south. Yemen has little history of sectarian strife.

**Key Characteristics of Yemen**

**Demographic profile:** The population is estimated to be 25.9 million in 2015 (WFP 28/02/2015). An estimated 73% live in rural areas (UNFPA country profile 2015). 15.9 million are in need of humanitarian assistance (WFP 28/02/2015).

**WASH:** An estimated 13.4 million people do not have access to safe water and sanitation (OCHA, 10/03/2015). 55% of the population has access to improved sources of drinking water (47% rural and 72% urban). Access to improved sanitation is 53% (93% urban and 34% rural). (UNICEF/WHO JMP 2012). Every year, 14,700 people die of diarrhoea (Global Alliance for Clean Cookstoves 2015).

**Health:** Infant mortality rate: 40.4 per 1,000 live births; under-five mortality rate: 51.3 per 1,000 live births; maternal mortality ratio: estimated 270 per 100,000 live births (World Bank 2013); Life expectancy: 64 years (OCHA, 10/03/2015).

**Nutrition:** In early February, 61 out of 333 districts in Yemen were reported to have critical levels of GAM (over 15%) and another 105 serious levels (10–14.9%) (OCHA, 12/02/2015). 840,000 children are acutely malnourished, including 170,000 severely malnourished (OCHA, 10/03/2015).

**Food security:** Prior to the escalation of the crisis, more than five million people were severely food insecure (WFP 28/02/2015); Nearly half the rural population and over one-quarter of the urban population are food insecure (Comprehensive Food Security Survey, 11/2014). More than 40% of Sa’ada governorate’s population is severely food insecure (Comprehensive Food Security Survey, 11/2014).

**Livelihoods:** (2010) GDP per capita: USD 1,209; child labour rate (5–17 years): 17%; population living under poverty line: 54% (OCHA 10/03/2015).
**Education**: 1.87 million children are out of school due to insecurity and conflict. 3.526 schools are affected. Reportedly, many schools are being used as IDP shelters or occupied by armed groups (UNICEF 22/04/2015).

**Cooking sources**: Gas is the most commonly used cooking fuel (58.9%). In rural areas, 52.7% of the population uses solid fuel against less than 5% in urban areas (Global alliance for clean cookstoves 2015).

**Literacy**: 66.4% adults (World Bank 2012).

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**Response Capacity**

About 90 national and international humanitarian agencies continue efforts to deliver life-saving humanitarian assistance and protection inside the country, mostly through national staff (OCHA 25/04/2015). Several organisations had to suspend activities or move to remote operations due to fighting (OCHA 31/03/2015).

WHO and the Ministry of Health pre-positioned additional supplies of emergency health provisions as well as basic medicines in February 2015. Both the International Committee of the Red Cross (ICRC) and Médecins Sans Frontières provided additional medicines and medical supplies (WHO 26/03/2015).

Local authorities in Aden, Lahj, Abyan and Ad Dhale'e governorates have formed a committee to support, facilitate and coordinate the delivery of assistance. The committee aims to work with humanitarian partners and all other stakeholders (OCHA 27/04/2015).

Capacity of national NGOs and authorities varies widely. Concerns also persist about the independence and neutrality of some local organizations and their ability to deliver principled humanitarian aid, especially those perceived to be partial to parties to conflict (HNO 22/12/2014).

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**Population Coping Mechanisms**

- People flee from urban to rural areas to escape shelling, airstrikes, and fighting (Reuters 31/03/2015).

- Yemeni refugees and Somali returnees have arrived in Somalia, after fleeing violence (Daily Star 01/04/2015). Djibouti has also received Yemeni refugees. Other East African countries are anticipating refugee influxes from Yemen (ACT Alliance 30/03/2015). This reversal of migration flows indicates total depletion of mechanisms to cope with the deteriorated situation locally.

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**Information Gaps and Needs**

- Updated information on IDPs, including number of IDPs per governorate
- Impact of the conflict on infrastructure.

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**Lessons Learned**

- Assistance strategies have to take into account not only the consequences of armed conflict but also Yemen’s chronic state of humanitarian emergency and structural vulnerabilities.
- Resilience has been exhausted by protracted conflict and chronic humanitarian needs.
Map of Conflict in Yemen

Conflict in Yemen
As of 28 April 2015

Data Sources: OCHA, OCHA COD, Our Airports, GADM, Government of Yemen, WHO