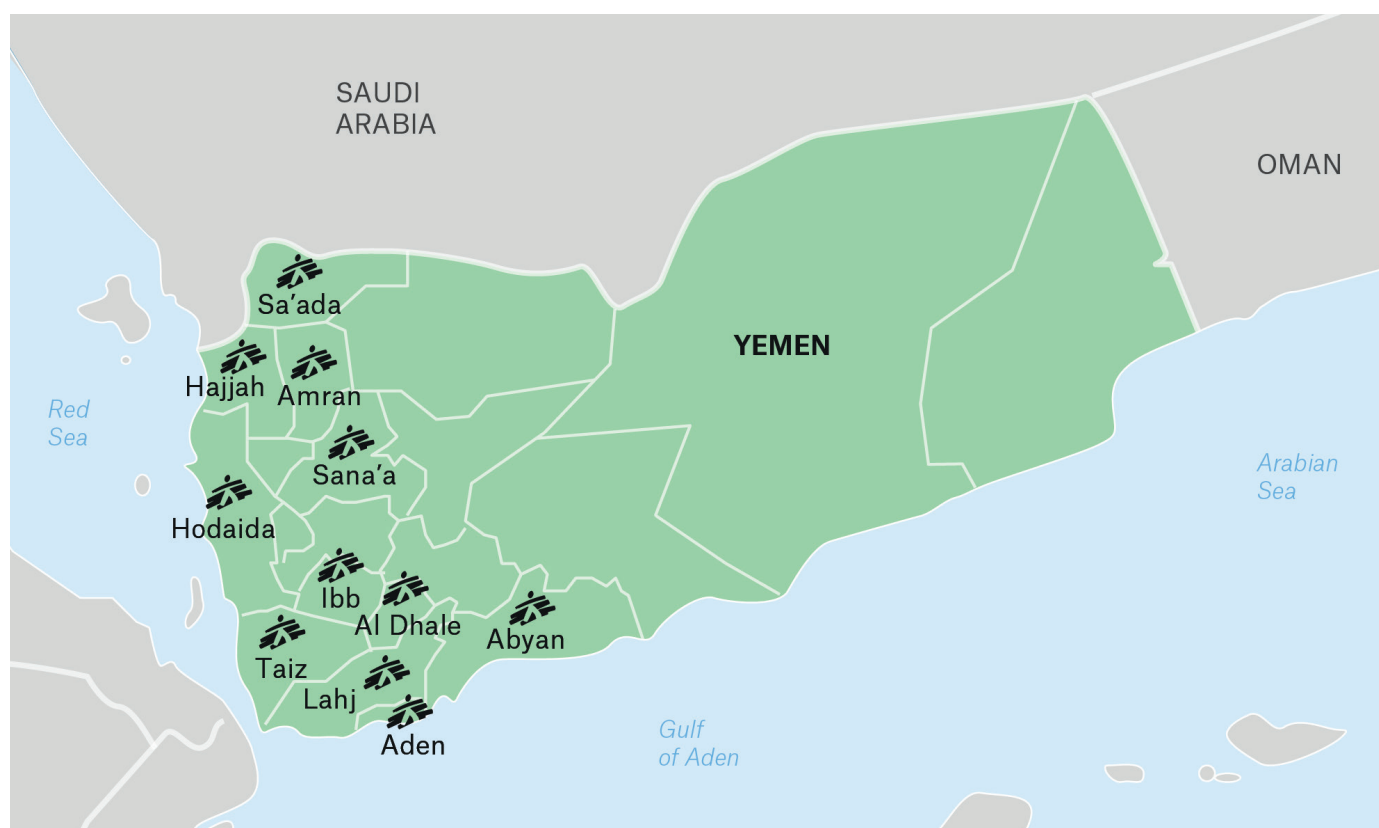


Yemen crisis

Obstructed aid and crumbling healthcare system

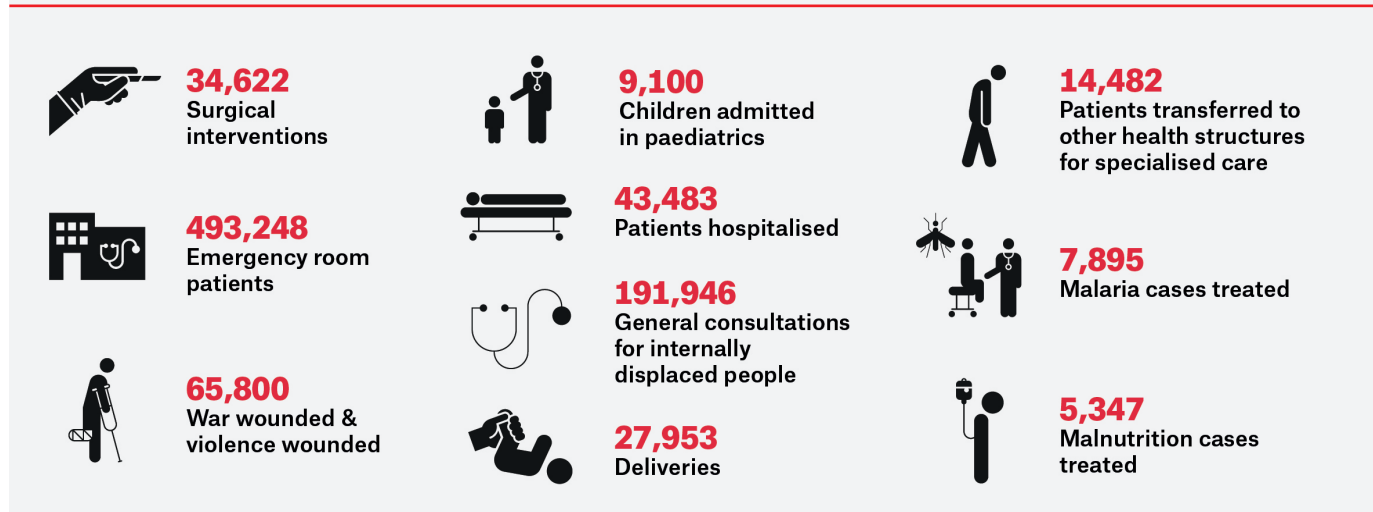


Médecins Sans Frontières / Doctors Without Borders (MSF) has been working in Yemen since 1986. When the conflict escalated in March 2015, the organisation significantly expanded its activities. Today, Yemen is one of MSF's largest projects in the world. Teams are working in 12 hospitals and health centres, in addition to providing support to more than 18 health structures across 11 governorates.

MSF offers assistance to people based on need, irrespective of race, religion, gender or political affiliation and is working on both sides of the conflict. MSF relies exclusively on private donations for its activities in the country.

MSF operations in Yemen from March 2015 to March 2017 – Overall data

Type	Total
Staff	1,600 national and expatriate personnel
Medical equipment, materials and drugs shipped (in tons)	2,656
Budget for 2015 and 2016	More than 110 million Euro



Intro

More than two years of intense conflict have left an ever-growing trail of destruction, suffering and trauma for Yemenis. United Nations (UN) estimates speak of at least 10,000 killed and 42,000 injured since the fighting intensified in March 2015. As the war rages on, each day brings its new share of casualties. People are directly targeted, so-called “collateral damage,” or are unable to reach health facilities in time. Those in need are too often prevented from or are too late in reaching the health facilities where our medical teams work.

Aid has so far been largely insufficient to meet the humanitarian needs. According to UN figures, 18,8 million people require assistance, including two million displaced. However, aid alone cannot reverse the country’s humanitarian crisis. Donor states and parties to the conflict must address the factors aggravating it further, including the collapse of the health system and other basic social services, a crumbling economy forcing people into negative coping mechanisms, attacks by the belligerents on medical facilities, staff and patients and administrative and security barriers to the provision of humanitarian assistance.

A health system on the verge of collapse

“It’s palpable how the situation has changed for the worse. The war heavily affected the country as a whole and now we’re facing not just the immediate needs related to it, for example the wounded in the fighting, but also the needs of all the people who are suffering from the complete collapse of the health system.”

MSF Medical activity manager, Haydan city, 04/04/2017

Yemen’s health system is in tatters. According to the World Health Organization (WHO), less than half of all facilities are currently functional. The others are either damaged or have insufficient personnel, drugs, equipment and basic facilities such as water and electricity to offer even the minimum of care. Most civil servants, including nurses, doctors and other public health workers have not received their salaries in over six months, further compromising the provision of care. Many health facilities have resorted to charging patients, rendering their services inaccessible for the most vulnerable.

This situation impacts all Yemenis: children who are now more at risk of dying from preventable diseases, pregnant women unable to give birth safely, people suffering from chronic conditions such as renal failure and HIV requiring regular and long-term treatment, the growing number of war-wounded in need of immediate and long-term specialised care, and the elderly. Displaced people and the communities hosting them are particularly vulnerable. Endemic diseases such as malaria and non-endemic ones like cholera are taking their toll on the population.

In addition, food insecurity, malnutrition, insufficient water and lack of decent sanitation represent major threats to people's health.

People in need of care often reach our health facilities at the very last minute, to the extent that sometimes there is little our teams can do to save them. They face many obstacles when travelling to seek care including checkpoints, mines and snipers. They have limited resources, they are afraid of health facilities being targeted or there are simply no functioning clinics close to where they live. Amidst shortages and rising prices, many Yemenis today are faced with the unacceptable dilemma of either seeking treatment or keeping the money to secure enough food for their loved ones to survive.

- **Increasing support to the health system: a priority.** Bilateral and institutional donors must prioritise assistance to the country's health facilities to prevent their total collapse. This includes fuel, drugs, medical materials and equipment. Public health workers must be urgently subsidised.
- **"Silent deaths" must be prevented.** Strengthening primary healthcare and outreach activities is key, so those in need do not die at home because they cannot afford care, or are too afraid to travel to a health facility.

Yemen © MSF



Shiara hospital

- **Ensure unhindered access to healthcare.** Any person in need of medical care must be granted unhindered access to health facilities by all parties involved, be it across frontlines or state borders.

Medical services under fire

"Do I feel safe working in the hospital? I never feel safe, not even one percent. Our hospital has been targeted and shelled many times: they shelled the roof, the fuel tank, the maternity department and the western section. The shelling is causing a lot of distress, both among the staff and the patients."

— Emergency Room Supervisor, Taiz city, 22/10/2016

Belligerents and their allies in the region and beyond continue to violate international human rights and humanitarian law. Civilians are deliberately targeted; protected structures such as schools and health facilities have been repeatedly hit; and medical personnel are often attacked, threatened and harassed inside health facilities. According to the WHO, at least 274 health facilities have been totally or partially destroyed. Dozens of health workers, patients and those accompanying them have been killed or injured. Between October 2015 and August 2016, four MSF-supported facilities and one ambulance were hit by airstrikes or missiles.

- **"Stop bombing hospitals.** Stop bombing health workers. Stop bombing patients." Warring parties must abide by international humanitarian law. Silence and inaction have deadly consequences. Violations must be denounced and addressed on a systematic basis by belligerents and their allies.
- **Civilians must be protected at all times.** The principles of distinction, proportionality and precaution must be upheld by all belligerents.

Date	Facility	Governorate	Casualties
15 August 2016	Abs hospital	Hajjah	19 killed, 24 injured
10 January 2016	Shiara hospital	Sa'ada	6 killed, 7 wounded
2 December 2015	Al-Hoban clinic	Taiz	1 killed, 8 wounded
26 October 2015	Haydan hospital	Sa'ada	1 wounded

Continuing access constraints and inadequate humanitarian assistance

Among the main challenges MSF faces today in Yemen is the obstruction to the provision of humanitarian assistance, ranging from bureaucratic to logistical and operational hindrances. Restrictions in bringing in vital goods, diversion of shipments, customs delays, confiscation of vital supplies, rejections of international visas and internal travel authorizations for personnel are just some of the obstacles our teams encounter.

Running activities from afar and sub-contracted programming has shown its limits: international organisations and agencies must increase their presence in the field for their activities to better respond to the needs within the communities. It is possible for humanitarians to work in active conflict zones as close as possible to people in need, by relying on strong security assessments, risk mitigation strategies and community acceptance through principled and quality operations. Hurdles should not be seen as barriers: it is possible to stay, work and deliver.

- **Humanitarian principles must be respected.** Warring parties should allow aid organisations to conduct their assessments and operations in a neutral and impartial manner in order to ensure aid reaches those most in need.
- **Timely delivery of humanitarian assistance is key and must be facilitated.** Vital infrastructure should be kept intact and functional in order to allow food, medical supplies and other basic items to reach the country. Diversions, blocks and delays on imports and transport of aid must cease immediately.
- **Aid organisations must work closely with the communities they seek to assist.** With proper security management, negotiated access and quality programmes, access to active conflict zones is possible and essential.



Yemen © Florian Serix



Yemen © Mohammed Sarabani

Conclusion

Yemenis have been plunged into a large-scale emergency, their needs remaining vastly unmet and their access to healthcare is extremely poor. After two years of war the humanitarian assistance is still far from what it should be.

Aid must be urgently scaled up with programmes based on needs identified on the ground. Support to Yemen's health sector is of the utmost priority. Funding alone is not enough: as long as current limitations imposed by the belligerents on access and operations continue and inefficiencies within the aid system are not addressed, humanitarian organisations will remain unable to reach those most in need.

Warring parties and the international community today hold all the cards to protect civilian infrastructure and the medical mission, to ensure access for humanitarians and to minimise the impact of the fighting on people.