

Yemen: Attacks on Health

August 2019

Summary Jan – July 2019

In early April 2019, a bipartisan resolution to end American military involvement in Saudi Arabia’s four-year war in Yemen passed in both houses of Congress. However, the hope that the bill would change the course of the civil war was thwarted when President Trump vetoed the historic measure, citing the importance of maintaining close ties with Saudi Arabia.

Meanwhile, the brutal civil war in Yemen continues to rage. The December 2018 ceasefire in Hodeida, although effectively curbing violence in the contested port area, did little to remedy the conflict at large. The displacement of Yemenis continues unabated, and the daily rate of civilian casualties has increased by a third. With the start of spring and the rainy season, floods have ravaged areas across the country, transporting sewage and facilitating the spread of cholera and other waterborne diseases. Data from the World Health Organization (WHO) highlights the increased incidence of cholera, recording approximately 500,000 suspected cases since January 2019, with 12-15 percent of them severe. As the medical situation in Yemen deteriorates, humanitarian response has become increasingly difficult. The Saudi-Emirati-led coalition has tightened restrictions on medical imports, depriving the Houthi-run public health sector of life-saving medicines. At the same time, the 20 million Yemenis facing food insecurity are increasingly hard to reach. Following months of food aid diversion by the Houthi government, the World Food Program (WFP) has suspended deliveries to Sana’a city, a decision that could affect up to 850,000 people.

This fact sheet draws upon data from the UN Office for the Coordination of Humanitarian Affairs, WHO, WFP, UNICEF, the media, and independent reporting.

What is an “attack” on health care?

Physicians for Human Rights (PHR) defines an attack on health care and personnel as an action by a state or non-state party to a conflict that disrupts the indiscriminate delivery of care to all wounded and sick, regardless of combatant status. This includes:

- Attacks on hospitals, health clinics, ambulances, or other facilities via air/ground strikes;
- Shelling or any military activity causing physical damage to facilities or service disruption;
- Killing, kidnapping, or other bodily harm inflicted on health care professionals; and
- Pressure, intimidation, or punishment of personnel for treating all wounded and sick without discrimination.

Attacks on health infrastructure and personnel

Around 50 percent of hospitals and health facilities in Yemen continue to be out of service or functioning partially. As attacks on health care continue, many organizations are forced to withdraw from unsafe locations, suspending services to populations that need crucial medical attention. From January to July 2019, PHR verified 10 attacks on medical facilities.

- January 3: A Russian orthopedic doctor died in a Houthi detention center in Yareem town in Ibb governorate. The doctor was kidnapped by an armed group from his residence at the hospital.
- February 26: After an altercation with al-Thawra hospital security guards, Islah militias stormed the facility, looking for potential hostages. The group harassed patients and medical staff.
- March 10: A fleet of ambulances was bombed while attempting to respond to a series of Saudi-UAE coalition airstrikes in the town of Hajjah. One of the ambulances, belonging to Yemen’s health ministry, was destroyed.
- March 23: Armed clashes in Taez impacted al-Mouthafar Hospital’s generator and fuel storage, resulting in a massive fire. The fire severely damaged the operating room, radiology department, and male inpatient facility and forced the hospital to suspend services.
- March 26: A Saudi-Emirati coalition jet carried out an attack on a gas station outside a Save the Children-funded hospital in Kitaf. Seven people were killed, and the hospital was forced out of service.
- April 2: An MSF emergency trauma hospital in Aden was stormed by gunmen, who threatened guards and staff and kidnapped a patient. The patient was later found dead in a separate area of the city. The hospital had to temporarily suspend its services until better security measures are put in place.

This fact sheet is part of a PHR series designed to consolidate information about attacks on health care infrastructure, the blocking of humanitarian aid, and the health consequences of the ongoing conflict in Yemen. PHR researchers use a mixture of publicly available information and field sources to summarize the latest information about attacks, aid, and health indicators.

92-95 percent of medical equipment in Yemeni hospitals and health facilities is expired or no longer working.

Attacks on health infrastructure and personnel *continued*

- April 10: Dr. Ahmed al-Alafi, a dentist, was attacked and beaten in public by members of an unknown armed group. He was then kidnapped and held for a month before being released.
- April 25: A mortar shell was dropped on al-Jumhori public hospital, and shots were fired throughout the facility in a clash between security forces and armed groups. The hospital's obstetrics and gynecology departments were shut down as a result. A security guard was injured in cross-fire.
- May 2: Armed group started a series of attacks on al-Thawra hospital, its management team, and staff. The repeated attacks and harassment of doctors, nurses, and patients prompted the staff to go on a partial strike, forcing the hospital to close the general and surgical orthopedic departments, the laboratory, and the male outpatient facility.
- May 19: Armed men, reportedly from the Houthi militia, attacked a nurse in the dialysis department at al-Thawra hospital in Sana'a, beating her with rifle butts and causing her serious injuries.

Health consequences

Beginning in July 2018, Yemen witnessed a surge in cholera cases that continues today. The spread of cholera is augmented by the country's hunger epidemic, with the majority of severe cases occurring in starving children and the elderly. At this moment of intense need, Yemen's crippled economy has limited people's access to health care. Recent fuel shortages across the country have caused a rise in transportation costs, discouraging or prohibiting hospital visits.

- Of the 460,000+ suspected cholera cases reported between January and July 2019, 43 percent were in children. Ongoing fighting in much of the country limits access to food and clean water, and the starvation and cholera epidemics have compounded each other.
- 20.1 million Yemenis are now classified as food insecure, up 13 percent from 2018. Of these, 15.9 million are in imminent danger of starvation. Ongoing disruption of humanitarian aid will likely cause these numbers to grow.
- 80,000 people have been affected by torrential rains and flash flooding, particularly in Hajjah governate. The rains have damaged crucial infrastructure, including health clinics and food stocks, and have destroyed shelters of displaced families.
- The Saudi-Emirati restriction on imports to Yemen has proved deadly for patients who rely on specific, life-saving medical supplies. According to a survey by the Yemen Health Ministry, 92-95 percent of medical devices are nonfunctional in hospitals across the country and require replacement.

Access to humanitarian aid

With the conflict in Yemen escalating, ensuring access to food and medical aid for all Yemenis is ever more crucial. As the violence grows, obstacles to humanitarian aid are becoming more entrenched.

- Restrictions on humanitarian access and freedom of movement continue to be a key challenge. According to UNOCHA, "access constraints prevented or delayed humanitarian assistance for more than 1.5 million people" in April and May of 2019. Within these two months, humanitarian agencies reported at least 375 incidents in which aid was either blocked or delayed. Houthi forces stopped more than 180 humanitarian cargo trucks, and held them for an average of 36 days before allowing them to continue on their route.
- The closure of land routes between Aden and Sana'a in late April has made delivery of aid to these key areas more difficult and expensive.
- Since April, Houthi rebels have actively hindered the WFP's biometric registration system in Sana'a, which is used to confirm that beneficiaries have received their allotted rations. The organization, which feeds 10 million people across Yemen each month, has recently suspended its operations in Sana'a in response to the uncooperative Houthi government.

Recommendations

- PHR calls on all parties to the conflict to immediately cease all diversions and/or blockages of humanitarian aid, and to cooperate with organizations working to deliver crucial supplies to civilians.
- PHR calls on all parties to the conflict to immediately cease acts of violence against civilian people and objects in violation of international human rights and international humanitarian law, and to take all possible measures to protect civilians from the impact of hostilities.
- PHR calls for the continuing support of efforts to document violations of international laws and principles with justice and accountability squarely in mind. Sustainable peace and stability in Yemen must be built on the firm foundation of a sincere accountability process involving all parties to the conflict.
- PHR calls on all allies and supporters of the warring parties in Yemen to assume their share of responsibility for the current crisis and work toward ensuring the compliance of the belligerents with international norms.



Physicians for
Human Rights

phr.org

For more than 30 years, Physicians for Human Rights (PHR) has used science and the uniquely credible voices of medical professionals to document and call attention to severe human rights violations around the world. PHR, which shared in the Nobel Peace Prize for its work to end the scourge of landmines, uses its investigations and expertise to advocate for persecuted health workers and facilities under attack, prevent torture, document mass atrocities, and hold those who violate human rights accountable.