Yemen: Attacks on Health
May 2018

Summary
Feb – May 2018

Despite efforts to renew peace talks, the Yemen conflict reached its third anniversary in March 2018 and has left 22 million people in need of humanitarian aid, nearly 9,500 dead, 55,000 injured, and two million displaced over the past three years. As fighting intensified in al-Hudaydah and Taiz Governorates, humanitarian agencies expressed increasing concern about the safety of civilians. Since December 2017, military operations have displaced another 130,000 people, exacerbating health and humanitarian concerns. There are few formal camps for internally displaced persons (IDPs), and makeshift tent shelters are rapidly creating health risks due to lack of adequate shelter, sanitation, and clean water. Flooding and cyclones on the southern coast have created shortages of medicines that, coupled with poor housing and sanitation, may increase the risk of new infections. This fact sheet draws upon data from the UN Office for the Coordination of Humanitarian Affairs (OCHA), World Health Organization (WHO), UN Children’s Emergency Fund (UNICEF), media reports, and original reporting on attacks on health care facilities.

What is an “attack” on health care?

PHR defines attacks on health care and personnel as any 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. These include:

- 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;
- Pressure, intimidation, or punishment of personnel for treating all wounded and sick without discrimination.

Since February 2018, PHR has received reports of 11 armed attacks against health care facilities and personnel, including two attacks on ambulances, and independently verified eight attacks through field sources and publicly available information.

Attacks on health infrastructure

PHR confirmed four attacks on health care facilities and personnel with field sources, totaling 12 verified attacks out of the 23 attacks reported in the past eight months. Previous reports stated that 39 hospitals were hit from March to October 2015, and that 50 percent of health care infrastructure was destroyed as of Dec 2017. Despite a decrease in airstrikes, armed attacks still strike hospitals and disrupt service.

- February 24: Al-Thawra Hospital in Taizz closed in protest after masked gunmen kidnapped a doctor at its front gate. On April 23, an explosion at a nearby security station severely damaged the hospital. On May 6, dozens of armed fighters invaded the emergency and operating rooms, threatening doctors and shooting a patient.
- March 15: A mortar shell hit the Military Hospital (al-Askari Hospital) in Taizz, damaging the building, destroying medical equipment, and injuring 11 outpatients.
- March 25: A mortar shell hit al-Hais Hospital in al-Hudaydah, killing a doctor and injuring four others. On April 27, mortar shells hit the hospital again, causing major damage.
- April 27: A missile hit the National Blood Transfusion Center at al-Sabeen Maternal Hospital in Sana’a, damaging devices and putting the center out of service.
- May 21: Al-Jumhuri Hospital in Taizz suspended services after it was hit by shells during intensive armed clashes. As of May 30, it remains closed due to security conditions.

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.
22 million people in Yemen are in need of humanitarian assistance.

Health consequences

Most of Yemen’s health care infrastructure is non-functioning. Assessments show that only four out of 10 facilities in Taizz Governorate currently function. In May 2018, Haydan Hospital reopened, two and a half years after being damaged in October 2015. It expects to serve 7,000 people. However, outbreaks and rates of infectious diseases continue in Yemen:

- 66,261 new suspected cholera cases and 33 deaths were reported from Jan to May 2018.
- 1,100,720 cumulative suspected cases of cholera and 2,291 associated deaths (28 percent of children under the age of five) were reported as of May 2018. Rates of new infections have decreased, but recent cyclones and flooding may reverse the trend.
- A 25 percent increase in diphtheria cases (1,217 to 1,522), and a 10 percent increase in deaths (77 to 85) were reported in March 2018.

Access to humanitarian aid

Reports indicated that humanitarian access has improved in some regions, yet 22 million people still depend on aid and 90 percent of IDPs lack access to clean water, sanitation, shelter, and food as of May 2018. Humanitarian access also decreased in areas where frontlines are shifting, particularly in Taizz Governorate.

A spike in IDPs has strained humanitarian groups. As of April 2018, the UN Verification and Inspection Mechanism stepped up inspections of aid shipments, increasing delivery delays and costs. Ongoing bureaucratic hurdles to deliver aid into Yemen also continued, despite Saudi Arabia’s lifting of the blockade in January.

The following incidents have been reported:

- April 11: The road from Sana’a to Hadramaut governorate was cut off due to clashes.
- April 16: Local authorities blocked humanitarian groups from reaching districts in Sana’a governorate and Marib governorate.
- April 17-23: Increased displacement due to intense fighting in Taizz Governorate closed dialysis departments in two main hospitals in Taizz city due to lack of supplies.
- May 7: Food distribution to 28,000 families in Taizz city was halted after an ICRC worker was killed on April 21. Other groups still work in Taizz and Ibb governorates.

Recommendations

France and Saudi Arabia’s international conference in June 2018 on humanitarian needs must evaluate the conflict’s impact on the right to health, particularly for IDPs, and violations of humanitarian law, such as attacks on health facilities and aid blockage.

The Group of Eminent International and Regional Experts on Yemen, created by Human Rights Council resolution A/HRC/RES/36/31, should evaluate the conflict’s impact on the right to health, particularly for IDPs, in its Sept 2018 Council report.

The UN Security Council must:

- Act to ensure accountability for violations of international humanitarian law and call on parties to adhere to legal obligations to prevent attacks on civilians/civilian objects;
- Prioritize the health and survival needs of the civilian population, especially as IDP numbers grow due to renewed clashes in several provinces.

All countries providing arms to any party to the conflict should ensure these are not used to attack civilian objects, including hospitals and other health infrastructure.

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