



June 2020

Yemen five years on: Children, conflict and COVID-19

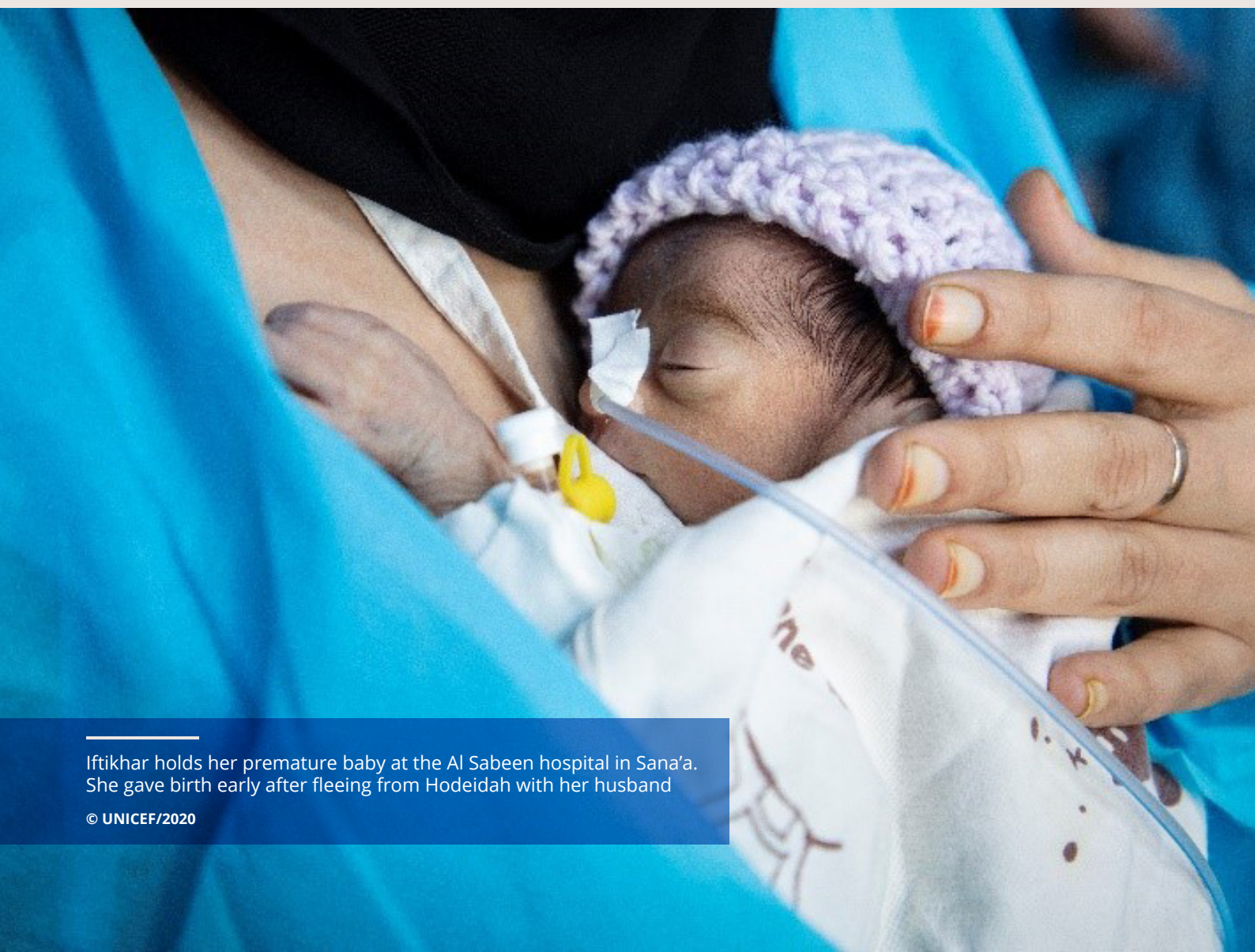
“Countless childhoods have been lost in this five-year war and we fear we will lose many more as COVID-19 spreads. In one day, a child in Yemen will face injustice and hardship on a scale that most people will never experience in a lifetime. Up to this point, their suffering has largely been ignored.

Now as the world’s attention focuses on the COVID-19 pandemic I fear the children of Yemen will be all but forgotten. Despite our own preoccupations right now, we all have a responsibility to act and help the children of Yemen. They have the same rights of any child, anywhere.”

– UNICEF Representative in Yemen, Sara Beysolow Nyanti –

Front cover : Marwa Saeed is 11 years old and was displaced when fighting took over her village in Taiz. She now shelters with her family in a centre for displaced families in Ibb

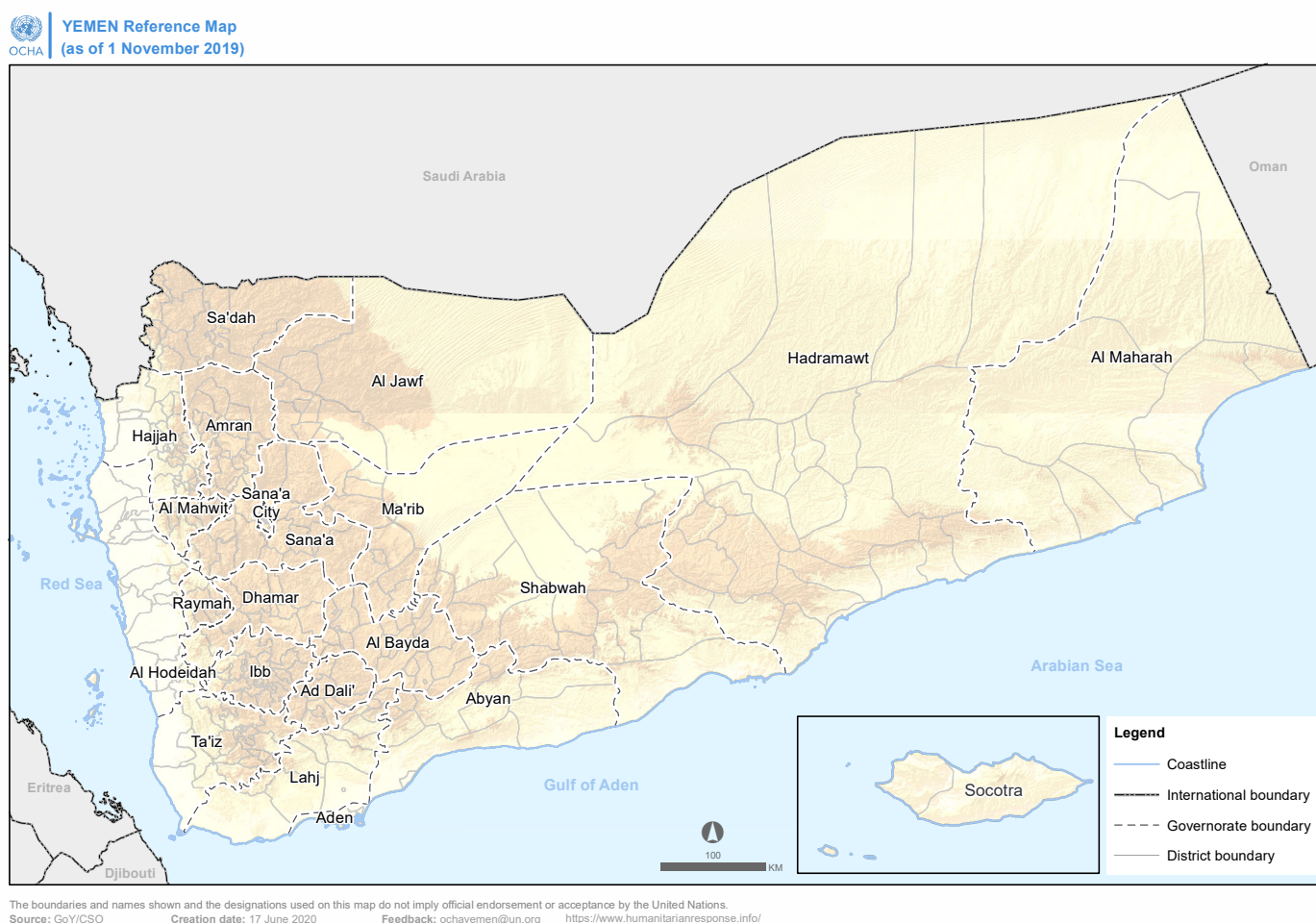
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Iftikhar holds her premature baby at the Al Sabeen hospital in Sana'a. She gave birth early after fleeing from Hodeidah with her husband

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YEMEN



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Five years on

Children in Yemen are facing a daily struggle to survive in what is the world's worst humanitarian crisis. After five years of conflict, around four in five children – 12.3 million – are in desperate need of aid. Tens of thousands of children have died, both as a direct result of the fighting, and from indirect causes like disease and malnutrition. More than 1.7 million children have been forced to flee their homes and are living in camps or improvised settings in other parts of Yemen. Devastating food and cholera crises emerged during the conflict; while violence persistently blights lives, with more than 35 frontlines still active across the country. The nation's health services are on the verge of collapse and the economy has been ravaged. The arrival of COVID-19 in the country layers a new emergency on top of an emergency, leading to fears of how far an already dire humanitarian situation could deteriorate.





Amani and her mother attend a health centre in Abs for treatment for severe acute malnutrition

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Health and sanitation in a crisis

A little boy holds a food package in a camp for the internally displaced in Sana'a

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Yemen's health system is in tatters. Five years since conflict escalated in March 2015, only around half of health facilities are operational and those that are running face severe shortages in medicine, equipment and staff.¹ Until 2019, salaries of health workers had not been paid in almost three years and,

even now, many receive nothing or only a very small allowance. 10.2 million children do not have access to basic healthcare.

Tens of thousands of children a year die from preventable causes, like diarrhoea and respiratory tract infections. Over the past five years, vaccine-preventable diseases - such as diphtheria and measles - have resurged in waves. Health supplies are scarce and insecurity can make vaccination programmes a treacherous endeavour.

¹ United Nations Office for the Coordination of Humanitarian Affairs (OCHA), '2019 Humanitarian Needs Overview in Yemen', OCHA, Sana'a, December 2018, p. 37.

Poor nutrition and hunger are widespread. The country has been plagued by one of the world's worst food crises. In 2019 alone, 15.9 million people needed urgent food and livelihood assistance.² Two million children under the age of five are malnourished, including roughly 325,000 who suffer from life-threatening severe acute malnutrition. Nearly half (45 per cent) of children under the age of five are stunted, meaning chronic malnourishment has left them too short for their age and has caused irreparable damage to their cognitive development. 1.2 million pregnant or breastfeeding mothers are acutely malnourished, risking their own health and that of their children. Reliable access to food remains a major concern going forward and agricultural production is currently under increased threat from swarms of desert locusts that are invading the country in waves, as well as persistent heavy rains.³

Meanwhile, poor availability of clean water and sanitation in Yemen increases the risk of disease. Around 9.58 million children do not have access to safe water, sanitation, or hygiene.⁴ Three quarters of households cannot afford soap.⁵ The 1.7 million children who have been forced to flee their homes in the fighting and move into temporary camps or accommodation elsewhere in Yemen often live in the most unsanitary conditions, leaving them especially vulnerable to infections and illness. In April 2017 the country suffered the world's worst cholera outbreak, which, by June that year, had more than 50,000 new cases within the space of one week.⁶ The disease remains pervasive and, overall, there have been more than 2.39 million suspected cases, with more than 3,795 deaths. A quarter of those affected are children under the age of five. With heavy rains since mid-April that are likely to stretch until July, more than five million children under the age of five are currently facing an increased risk of contracting the potentially deadly condition. So far this year more than 142,000 cases of suspected cholera have been recorded. Another disease linked to poor sanitation, dengue, has also recently re-emerged and was detected in almost half of districts in the country last year.

All of these preconditions are stoking the spread of COVID-19. The fragile nation's health system risks being rapidly overwhelmed, due to a lack of appropriate facilities, staff and equipment. On

average, Yemen has fewer than five hospital beds per 10,000 people, far below international standards and the World Health Organization's minimum requirements of ten beds per 10,000 people.⁷ Some areas like Hodeida and Rayma in the west of the country have only two beds per 10,000 people.⁸ Mobile health teams aiming to reach the most vulnerable communities could grind to a halt as staff are drawn into centralised facilities. Resources could also be diverted from other vital life-saving responses, including to current suspected cholera and dengue outbreaks. Meanwhile prices of medicine and medical supplies are rapidly increasing.

At the same time, measures brought in to tackle COVID-19, like social-distancing and restrictions on movement, as well as public fear of contracting the virus, are fuelling Yemen's existing health crisis. Early response services aimed at reaching mothers and young children play a critical role in identifying problems quickly and reducing death rates. In March and April the number of new mothers and babies receiving healthcare in the community fell by 34.4 per cent compared to the same period in 2019: from 113,724 to 74,631;⁹ while the number of children under the age of five accessing special integrated services in health facilities fell by 30.4 per cent: from 495,803 to 345,011.¹⁰

Current disruptions in global supply chains due to the coronavirus pandemic pose a threat to vital vaccination campaigns, as much-needed vials may never reach the country. Locally, planned immunisations may not be carried out due to restrictions on movement or diversion of health workers. Routine pentavalent immunisation to protect against diphtheria, tetanus, whooping cough, hepatitis B and haemophilus influenzae type b fell by 19 per cent in March and April, compared to the same time period in 2019: from 131,148 children immunised to 106,228.¹¹ If outreach activities do not resume until August, about a quarter of eligible children may miss be vaccinated.¹² UNICEF has already called for critical polio and measles vaccination campaigns to be restarted in Yemen, after they were suspended due to COVID-19. Without consistent vaccination, polio, which was eradicated in the country in 2009, could re-emerge, while a resurgence in measles cases could escalate.

² UNICEF Yemen, 'COVID-19 2020 Response Plan', UNICEF Yemen, Sana'a, April 2020, p. 1.

³ Ministry of Planning, 'Yemen Socio-Economic Update, Issue (47) April, 2020', MoP, Sana'a, August 2019, p.6.

⁴ Office for the Coordination of Humanitarian Affairs (OCHA), 2019 Humanitarian Response Plan, OCHA, Sana'a, February 2019, p.21.

⁵ Ministry of Planning, 'Yemen Socio-Economic Update, Issue (47) April, 2020', p. 14.

⁶ UK Metereological Office, 'World first as UK aid brings together experts to predict where cholera will strike next', Press Release, MET Office, August 2018, www.metoffice.gov.uk/about-us/press-office/news/corporate/2018/yemen-2018, accessed 10 May 2020.

⁷ Ministry of Planning, 'Yemen Socio-Economic Update, Issue (47) April, 2020', p.5.

⁸ Ibid.

⁹ UNICEF Yemen, 'Analysis of Socio-Economic Impacts of COVID-19 on children in Yemen', UNICEF Yemen, Sana'a, June 2020, p.14.

¹⁰ Ibid., p. 17.

¹¹ Ibid., p. 18.

¹² Ibid., p. 15.

The number of children accessing potentially life-saving nutrition services are falling. Compared with the same time period last year, the number of children enrolled in a programme that monitors their growth and flags early signs of under-nutrition fell by 83.5 per cent in March and April: from 95,418 to 15,746;¹³ while screening of acute malnutrition fell by 30.6 per cent: from 754,747 children checked to 523,525.¹⁴ With schools closed, so too are school feeding programmes, putting more children at risk of hunger. UNICEF is warning that an additional 30,000 children could develop life-threatening severe acute malnutrition over the next six months, with the number of malnourished children rising to

up to 2.4 million overall. As more children become malnourished, they will have lower immunity levels and higher susceptibility to death and serious complications from diseases, including COVID-19.¹⁵

Estimates from the Johns Hopkins Bloomberg School of Public Health, published in the Lancet Global Health journal, suggest more than an additional 6,600 children under the age of five in Yemen could die over the next six months from preventable conditions like diarrhoea, malnutrition and respiratory tract infections under the worst of three scenarios, as COVID-19 weakens health systems and disrupts services.¹⁶ This would represent a 28 per cent increase in expected deaths.

¹³ Ibid., p. 22

¹⁴ Ibid., p. 24

¹⁵ Ministry of Planning, 'Yemen Socio-Economic Update, Issue (47) April, 2020', p.7.

¹⁶ Robertson, Timothy, et al., 'Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: a modelling study', The Lancet Global Health, May 2020. <[https://doi.org/10.1016/S2214-109X\(20\)30229-1](https://doi.org/10.1016/S2214-109X(20)30229-1)>, Accessed 26 May 2020.



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