

YEMEN

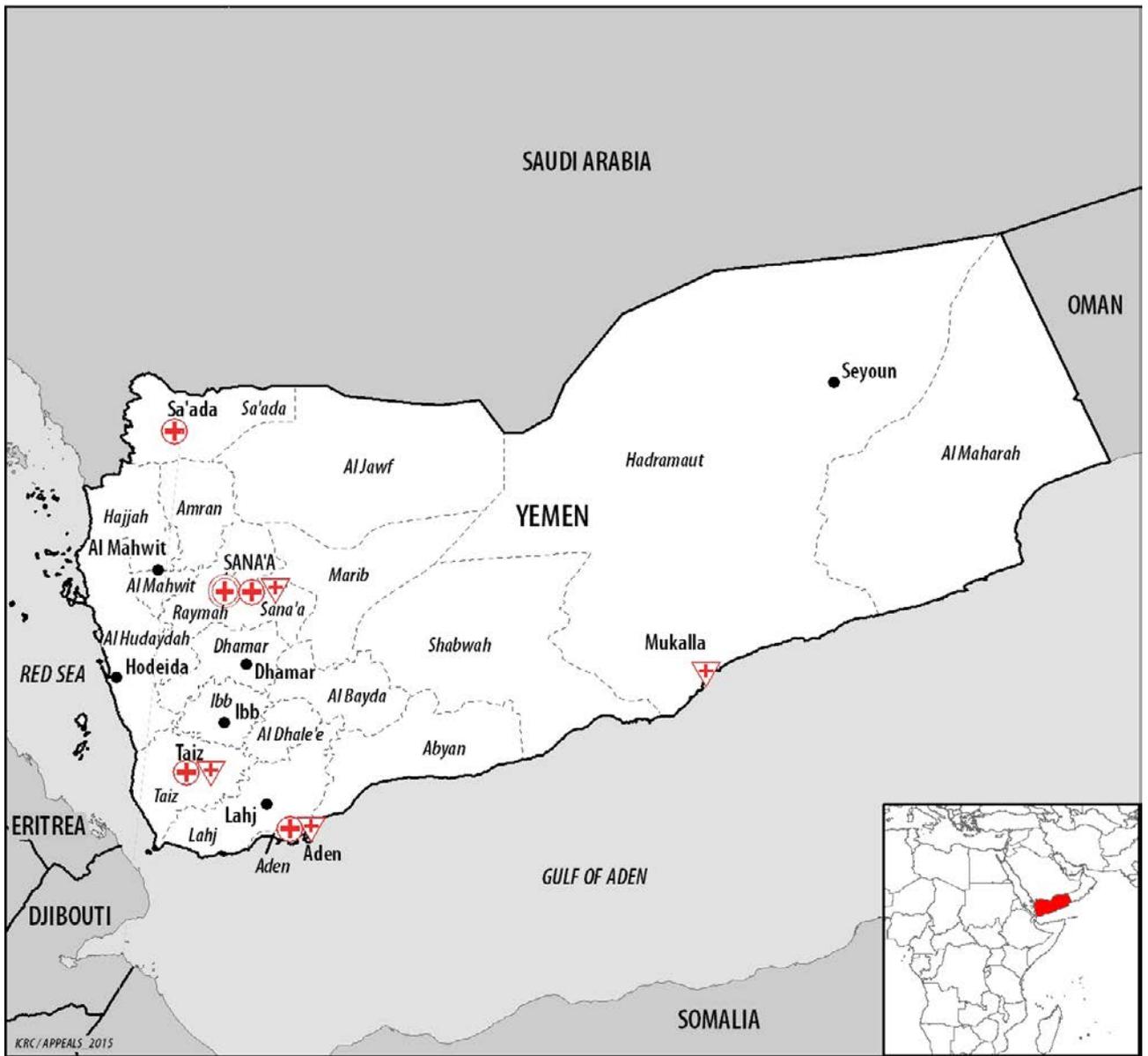
The ICRC has been working in Yemen since the civil war in 1962. It responds to the humanitarian consequences of armed conflicts and other situations of violence in the country by: helping secure the water supply; providing emergency relief, livelihood support and medical assistance to those in need; monitoring the treatment and living conditions of people held in relation to the situation; and enabling them, other nationals and refugees to restore contact with their relatives, including those abroad. The ICRC promotes respect for humanitarian principles and IHL, primarily among weapon bearers. The ICRC works with the Yemen Red Crescent Society.

BUDGET IN KCHF

Protection	3,874
Assistance	21,115
Prevention	2,876
Cooperation with National Societies	812
General	221
Total	28,898
<i>Of which: Overheads</i>	<i>1,764</i>

PERSONNEL

Mobile staff	52
Resident staff (daily workers not included)	231



⊕ ICRC delegation
 ⊕ ICRC sub-delegation
 + ICRC office
 ⊕ ICRC-supported prosthetic/orthotic project

MAIN TARGETS FOR 2015

- ▶ encouraged by dialogue and other acceptance-building initiatives, the authorities, weapon bearers, tribal/religious leaders and beneficiary communities facilitate ICRC operations and access to people in need
- ▶ actors of influence in Yemen take measures to safeguard the delivery of health care, first aid and medical services during fighting and to address alleged violations of people's rights to safely provide/obtain such treatment
- ▶ emergency responders and nurses/doctors hone their skills in first aid and in emergency-room trauma management, respectively, enabling them to provide emergency care and handle patient influxes independently
- ▶ local actors – particularly the water authorities – build their capacities to maintain community infrastructure through their involvement in ongoing rehabilitation/construction projects and other training initiatives
- ▶ the government grants the ICRC comprehensive access to detainees in the country and takes on board its recommendations on creating a system to ensure that detainees are able to contact their families
- ▶ detaining authorities and the ICRC begin dialogue on the action the former can take to improve respect for detainees' judicial guarantees, particularly with regard to pre-trial detention limits

ASSISTANCE		Targets (up to)
CIVILIANS (RESIDENTS, IDPs, RETURNEES, ETC.)		
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)		
Food commodities	Beneficiaries	28,000
Essential household items	Beneficiaries	28,000
Productive inputs	Beneficiaries	70,000
Cash	Beneficiaries	31,200
Water and habitat activities	Beneficiaries	1,054,000
Health		
Health centres supported	Structures	13
WOUNDED AND SICK		
Hospitals		
Hospitals supported	Structures	1
Physical rehabilitation		
Projects supported	Structures	4
Patients receiving services	Patients	60,000

CONTEXT

The political situation in Yemen continues to be precarious; in September, the president dismissed the government following protests led by Houthi supporters over the removal of oil subsidies, among other issues. The final appointment of new ministers is pending discussions with the various political parties. The Houthis continue to consolidate their presence in Sana'a.

Likewise, the security situation is deteriorating: the multiple armed conflicts and other situations of violence throughout the country persist and, in some cases, are intensifying. Fighting takes place between the Houthis and the Al-Qaeda in the Arab Peninsula (AQAP), and tensions between the Houthis and Salafi supporters remain high. In the south, Ansar al-Sharia (AaS) and AQAP carry out targeted killings in urban and rural areas, while State measures and US-backed air strikes reportedly against the two groups continue. Despite a ceasefire with the Al-Hirak movement, sporadic clashes occur between the group and the Yemeni Armed Forces, particularly in Al-Dale.

The lack of basic goods and services, such as water and electricity, and the alleged mismanagement of national resources, trigger protests countrywide.

HUMANITARIAN RESPONSE

In 2015, the ICRC will work to address the humanitarian consequences of the armed conflicts and other situations of violence affecting Yemen. Bearing in mind the prevailing insecurity, it will continuously adapt its activities to people's needs and the constraints to its action. It will engage in dialogue with all actors of influence – the authorities and the

de facto authorities, armed forces and other weapon bearers, and religious/community leaders – to impress upon them the urgency of addressing humanitarian concerns and of fulfilling their obligations under IHL and other applicable norms. It will emphasize the importance of protecting civilians, ensuring safe provision of health care, and respecting the standards governing the conduct of hostilities and the use of force. It will also build awareness of its distinct mandate and neutral, impartial and independent stance, aiming to gain or expand access to people in need, while ensuring the safety of its staff. Complementing these, its public and targeted communication activities will help foster support for its activities.

The ICRC will be prepared to respond to emergencies; crisis-affected people will receive assistance to meet their needs for food, water, household essentials and adequate living/sanitary conditions. Health facilities will receive additional support for maintaining service delivery during emergencies.

Where the fighting has abated, the ICRC will focus on assisting communities in recovering from the effects of violence. Whenever possible, it will work with local partners, including the authorities, to encourage community ownership over projects and the development of local capacities to maintain them. It will partner water authorities/community members to repair/construct supply and distribution points, thereby improving access for rural and urban communities to water for their household needs and agricultural activities.

Thousands of vulnerable households, including those headed by women or disabled people, will benefit from assistance to help them regain their self-sufficiency: cash grants to pursue income-generating activities, productive inputs,

improved veterinary services and training to maximize their agricultural/food production.

Helping strengthen the availability of primary health care, first aid, hospital-level treatment and physical rehabilitation services will also be a priority. Women and children within reach of ICRC-supported primary health centres will, in particular, benefit from quality services delivered with the help of ICRC donations of supplies/consumables, training initiatives for the staff, and upgraded infrastructure. Patients in need of urgent care will be likelier to receive first aid promptly, owing to the presence of ICRC-trained/equipped emergency responders, including Yemen Red Crescent Society volunteers. Doctors and nurses will undergo emergency room management courses to help them handle patient influxes; the Al-Razi hospital in Abyan will receive material assistance, while staff will build their expertise through ICRC training. Disabled patients will have access to quality services at four ICRC-supported physical rehabilitation centres.

The ICRC will visit, according to its standard procedures, detainees in the country, including those held by armed groups. In parallel, it will continue to seek comprehensive access to detainees. It will also engage the different detaining and government authorities in discussions on improving detainees' treatment and living conditions, particularly in relation to respect for judicial guarantees and facilitating detainees' family contact and health-care access.

Yemeni families, detainees, refugees, asylum seekers and other migrants will be offered family-links services to contact relatives, including those living or detained/interned abroad. Work will continue with the authorities to improve the management of human remains, to enable more families to be informed of their relatives' fate.

National Society branches will receive support for strengthening their emergency preparedness and for applying the Safer Access Framework. The ICRC will pursue coordination with Movement partners, so as to promote humanitarian action according to the Fundamental Principles.

HUMANITARIAN ISSUES AND ICRC OBJECTIVES

CIVILIANS

People are subjected to various abuses; reportedly, these include: indiscriminate attacks that affect health services, excessive use of force during law enforcement operations, and use of anti-personnel mines.

IDPs and residents, particularly in rural, fighting-affected areas, struggle to meet their basic needs. Access to essential goods and services – food, water, livelihood opportunities and health care – is inadequate, owing to insecurity and poorly maintained or understaffed facilities.

Families, including refugees, asylum seekers and other migrants, have difficulty contacting relatives abroad or locating relatives allegedly arrested or missing because of the prevailing situation. Human remains are often handled improperly, leaving families unaware of their relatives' fates.

Objective

People affected by the armed conflicts and other situations of violence are respected and protected in accordance with IHL and other applicable norms and standards. Their basic

needs are met. They are able to exchange news with relatives in Yemen or abroad and receive information on the fate of missing relatives.

Plan of action and indicators

Protection

- ▶ through dialogue, dissemination sessions and written/oral representations, remind the authorities, weapon bearers and other influential actors of their obligations under IHL and other relevant norms/principles; in particular:
 - emphasize the protection due to people not or no longer participating in hostilities – including humanitarian workers and those seeking/providing medical care – and to medical facilities; organize events on this subject (see *Actors of influence*)
 - engage the parties concerned in dialogue on the conduct of hostilities, including counter-terrorism efforts, the use of force during law enforcement operations, anti-personnel mines, and remotely piloted aircraft
- ▶ assess the humanitarian situation of vulnerable migrants and of people affected by sexual violence, to develop specific responses to their needs

Restoring family links

- ▶ through family-links services, enable separated family members, including IDPs, refugees, asylum seekers and other migrants, to contact relatives living or detained/interned in Yemen or abroad; facilitate phone calls between families in Yemen and their relatives at the US internment facility at Guantanamo Bay Naval Station in Cuba or the Parwan detention facility in Afghanistan
- ▶ offer tracing services to the families of missing persons to help them learn of their relatives' fates, while urging all parties concerned to address enquiries/allegations of arrest
- ▶ to increase the effectiveness of these services, promote them among potential beneficiaries, coordinate with Movement partners along migratory routes and provide material support for National Society and other staff involved in restoring family links

Assistance

- ▶ during emergencies, provide:
 - up to 28,000 people (4,000 households) with one-month food rations, along with household essentials
 - up to 2,500 people with water access and adequate sanitary conditions, including through water-trucking
 - clinics in the affected areas with ad hoc support so that their catchment population maintains health-care access
- ▶ to preserve regular access to essential services for the population, encourage the authorities, community leaders and other local partners, including the National Society, to ensure proper management/maintenance of community facilities, particularly those supported/constructed/rehabilitated by the ICRC; offer training opportunities for those conducting assistance activities, especially in the areas of water and habitat, economic security and health

Water and habitat

- ▶ repair/construct water infrastructure serving 40,000 persons in 11 rural and peri-urban areas and 1,000,000 in urban areas of Aden, Amran and Sa'ada

- ▶ work with farming communities to help them boost their agricultural/food production through improved irrigation systems, water points for livestock use and coping mechanisms to optimize the use of their water and other resources
- ▶ rehabilitate 9 health-care facilities (with a total catchment population of some 160,000 people)

Economic security

- ▶ support up to 10,000 households (70,000 people) in restoring their food production to 60% of its pre-crisis levels, including through agricultural inputs, veterinary services, animal husbandry training for farmers, and assistance to the Ministry of Agriculture
- ▶ help up to 4,500 households (31,200 persons), including those headed by women or disabled people, raise their earnings to 60% of pre-crisis levels through: cash for rehabilitating community infrastructure, productive inputs or, if possible, cash grants to kick-start businesses

Health

- ▶ facilitate access for civilians, particularly women and children, in the catchment areas of 13 ICRC-supported primary health care centres in Aden, Amran, Saada and Sana'a to preventive, diagnostic, curative and ante/post-natal care and treatment; notably:
 - support vaccination campaigns and distribute mosquito nets
 - supply the centres with equipment, drugs and consumables, including for treating malnutrition and communicable diseases
 - provide staff training and performance incentives
 - refer patients, including victims of sexual violence, for higher-level/specialized treatment

Weapon contamination

- ▶ help local actors conduct weapon clearance activities safely by extending technical and training support in this regard; complement these efforts with a course on first aid

Forensics

- ▶ provide equipment and training to help the actors concerned manage human remains properly, to facilitate the identification of these remains

PEOPLE DEPRIVED OF THEIR FREEDOM

People, including foreigners, are detained in Yemen in connection with the armed conflicts or other situations of violence. Migrants are held in deportation centres or central prisons prior to deportation. Armed groups also take people into custody.

Lack of funding and other management deficiencies mean that detainees must often rely on their families to meet their basic needs. Their living conditions and treatment, including respect for judicial guarantees, their ability to inform their families of their whereabouts and access to health care, are causes of concern.

Objective

All people deprived of their freedom are afforded living conditions and treatment, including respect for judicial guarantees, that comply with international law and internationally recognized standards. They are able to contact their families.

Plan of action and indicators

Protection

- ▶ while seeking the authorities' approval of a detention framework agreement granting the ICRC comprehensive access to detainees in the country, engage the authorities and other detaining actors in dialogue to:
 - build understanding of the ICRC's work for people deprived of their freedom, and respect for its standard procedures
 - encourage them to create an action plan for improving detainees' treatment and living conditions, particularly with regard to curbing: disregard for judicial guarantees; prolonged confinement and pre-trial detention; and overcrowding
 - urge detaining actors to facilitate family contact for those in their custody
- ▶ whenever possible, visit detainees, including those held at deportation centres or by armed groups; monitor their treatment and living conditions, and make confidential recommendations for improvement to the detaining authorities
- ▶ discuss with the authorities concerned the transfer, return and reintegration of released/repatriated Yemenis, particularly those formerly held at the Guantanamo Bay internment facility; monitor the situation of individuals detained abroad and repatriated to Yemen, and provide them ad hoc assistance

Restoring family links

- ▶ enable detainees, including migrants and foreigners, to contact their families, diplomatic representatives or UN-HCR

Assistance

Health

- ▶ work with the authorities to encourage detainees' improved access to preventive, curative and/or mental health services, particularly the timely/ethical diagnosis and treatment of detainees' illnesses/injuries, including those incurred from ill-treatment; notably:
 - offer advice for drafting budgets/action plans to ensure that prison clinics are adequately staffed and supplied with medical equipment; provide materials (e.g. medical consumables/equipment) and training for the staff
 - support malnutrition screening in selected facilities; initiate ad hoc supplementary feeding programmes
 - encourage interministerial coordination aimed at ensuring the integration of detainees' health concerns into national health programmes, including disease-control activities
 - enable detaining authorities and prison staff to participate in local/regional courses on such subjects as medical ethics, health-record management and budget allocation
- ▶ offer medical check-ups/treatment to vulnerable security detainees upon their release, including from detention/internment abroad
- ▶ raise awareness of good health and hygiene practices in places of detention by distributing informational materials
- ▶ during health emergencies, such as scabies outbreaks, implement disease-control activities

Water and habitat

- ▶ rehabilitate/construct water, sanitation and cooking facilities for some 2,750 detainees in 6 places of detention

Economic security

- ▶ help ease living conditions for up to 1,000 detainees who do not receive family visits by donating clothing and other essentials; provide detention facilities with bedding and hygiene/recreational items for some 1,000 detainees

WOUNDED AND SICK

Direct attacks against medical personnel/facilities and ambulances, checkpoint delays and other obstructions hinder the timely delivery of medical care.

First-aid providers, hospitals and physical rehabilitation centres, especially in rural areas, are not equipped to provide the services and treatment necessary, mainly owing to structural, supply, technical and funding deficiencies. Security, financial and socio-cultural constraints limit access, particularly for women, to hospital-level care and physical rehabilitation services.

Objective

The wounded and sick receive appropriate medical and surgical treatment. Disabled people have access to physical rehabilitation services.

Plan of action and indicators

Assistance

Medical

- ▶ train and equip first-aid personnel, including members of armed groups, to increase the chances of wounded/injured people receiving emergency treatment
- ▶ help enhance the availability/quality of hospital care by conducting courses for nurses and doctors in emergency-room trauma management; continue providing material and training support to the Al-Razi hospital to boost service delivery in and near Abyan
- ▶ stand ready to provide ad hoc assistance to medical facilities during emergencies, including by reinforcing stocks and staff

Physical rehabilitation

- ▶ support 4 physical rehabilitation centres (one each in Aden, Mukalla, Taiz and Sana'a) so patients can receive quality treatment, rehabilitation services and devices; specifically:
 - supply materials, equipment and technical assistance for producing assistive devices/mobility aids
 - provide staff – among them women – with on-the-job training and other capacity-building initiatives, including local refresher and instructors' courses and/or advanced studies abroad
 - raise awareness among potential beneficiaries of the availability of services, their rights, and projects to facilitate their social reintegration
 - rehabilitate these centres to ensure their safe, long-term functioning
- ▶ support the implementation of policies/guidelines to enhance physical rehabilitation services nationally; seek the authorities' support for opening a centre in Sa'ada
- ▶ encourage the authorities to provide materials/equipment and to train staff; co-organize yearly coordination

meetings; mobilize other actors to address needs not covered by the authorities or the ICRC

ACTORS OF INFLUENCE

Yemen is governed by several authorities and *de facto* authorities. The Yemeni armed forces are active throughout the country, including in operations against different armed groups.

IHL has yet to become an integral part of military training; other weapon bearers have limited knowledge of IHL and other applicable norms. There have been allegations of excessive use of force during law enforcement operations.

Domestic IHL implementation has stalled amid the prevailing instability.

Certain public universities offer limited IHL instruction; private and Islamic universities have expressed interest in adding IHL to their curricula. Public opinion is shaped mainly by tribal and religious leaders and the media.

The aforementioned actors are crucial to facilitating humanitarian access; however, neutral, impartial and independent humanitarian action is not always understood or accepted by these actors and by beneficiaries.

Objective

The authorities, tribal/religious leaders, the armed forces and other weapon bearers know and respect IHL and other fundamental rules protecting people in armed conflicts and other situations of violence, and incorporate these into their decision-making processes. The media, academia and other influential circles help foster awareness of humanitarian issues and relevant norms among all those involved in such situations and the wider public, thus achieving greater respect for human dignity. All actors understand the ICRC's mandate and support neutral, impartial and independent humanitarian action.

Plan of action and indicators

Prevention

- ▶ build respect of and support for humanitarian principles, IHL and neutral, impartial and independent humanitarian action – particularly of the ICRC – by raising awareness of these themes; specifically:
 - pursue increased contact with the different authorities and *de facto* authorities, tribal/religious leaders, the armed forces and other weapon bearers; during meetings and dissemination sessions, clarify the ICRC's distinct mandate and activities and these actors' role in ensuring the protection due to the population and in allowing/facilitating humanitarian access to people in areas under their control
 - emphasize the importance of safeguarding people seeking/providing health services; work with the security sector and the medical community to follow up on the recommendations formulated during previous related workshops/round-tables (see *Civilians*)
 - engage in dialogue with religious leaders and other representatives of Islamic circles/charities; organize discussions and sponsor the participation of 2 representatives in regional workshops on humanitarian action
 - encourage public awareness, particularly among potential beneficiaries, by running media campaigns and producing materials on IHL, the Health Care in

Danger project and Movement activities; promote accurate coverage of humanitarian issues by maintaining links with journalists/media outlets and enabling them to participate in local/regional events

- through training and joint activities, help the Yemen Red Crescent Society boost its capacity to familiarize communities with humanitarian principles and the Movement
- ▶ support the armed/security forces and police in incorporating IHL and other applicable norms, such as those relating to law enforcement, in their training and doctrine, and in observing these norms during their operations by:
 - enabling officers to participate in local/regional workshops, including courses for future trainers
 - donating training manuals, sample exercises and other reference materials
 - contributing IHL-related articles to the army's monthly magazine, as per an official agreement with their guidance department
- ▶ work with the national IHL committee to encourage the authorities, including parliamentarians and representatives of the Ministry of Foreign Affairs, to implement IHL; sponsor their participation in national and regional courses; further relations with the judiciary and organize refresher, train-the-trainer and advanced courses for judges and teaching staff at the judicial institute
- ▶ foster understanding of and support for IHL among future decision-makers by backing universities in offering courses and through other awareness-raising initiatives; hold sessions for students, particularly of law and jour-

nalism, on humanitarian principles and on the ICRC's activities in Yemen and elsewhere

RED CROSS AND RED CRESCENT MOVEMENT

A partnership framework agreement for 2014 was not signed with the Yemen Red Crescent Society, but certain branches work with the ICRC to carry out emergency response activities – in particular, by serving as first-aid personnel and helping to evacuate the wounded.

The National Society draws on Movement support to improve the conduct of its operations and to bring them in line with the Fundamental Principles.

Objective

The National Society has a strong legal basis for independent action. It is able to carry out its core activities effectively. The activities of all components of the Movement are coordinated.

Plan of action and indicators

Cooperation

- ▶ work with the National Society and other Movement partners in the country to define specific areas of partnership/cooperation, and each actor's roles and responsibilities; promote Movement coordination through regular meetings/contact
- ▶ provide technical, training and material support to help National Society branches enhance their emergency preparedness, their application of the Safer Access Framework and their ability to carry out income-generating activities