

Yemen's Children Suffering in Silence

Nearly 10 Million Children Caught Up in a Humanitarian and Protection Crisis



On 26 March 2015, at the request of the Government of Yemen, a Saudi Arabia-led coalition launched a military operation in Yemen to dislodge the Houthi forces (also known as Ansar Allah) from territory previously seized during late 2014 and early 2015. As a consequence, an already severe pre-conflict humanitarian situation has been compounded while also prompting a large scale protection crisis. Twenty-one out of Yemen's 22 governorates are affected by the conflict which has seen extensive and sustained aerial bombardments and ground fighting, including the use of explosive weapons with wide area effects in populated areas, and alleged violations of international humanitarian and human rights law by all of the warring parties.

As a direct result of the ongoing and often brutal armed conflict during the past year, children's lives in Yemen have been torn apart. Girls and boys are now facing daily challenges to both survive the conflict and access enough food, safe drinking water, and basic healthcare. And while the fighting continues and the delivery of vital humanitarian aid and commercial supplies to those most in need is obstructed, the lives of thousands more children are at risk. The future for those that survive is also uncertain. The number of children who are not attending school has more than doubled during the past twelve months and now equates to nearly half of the school-age population. Many children have also been psychologically scarred and will need significant support to recover from their experiences and be able to live happy and productive lives in the future.

Despite the magnitude of the humanitarian and protection crisis, the international response has to date been wholly inadequate both in terms of funding the humanitarian response and pushing for a political solution. The UN's Humanitarian Response Plan was only 56% funded in 2015 while this year it currently sits at just 4% of the \$1.8 billion required to provide assistance to 13.6 million people most in need. Relevant UN Security Council Resolutions, including 2216 (2015) and 2266 (2016), have so far failed to persuade the parties to protect civilians and civilian infrastructure in accordance with the laws of war. Furthermore, influential governments, including some permanent members of the UN Security Council, have chosen to support military action, often directly through the approval of arms sales and the provision of other military support, instead of using their influence to help find a sustainable peace. The consequences have been devastating for Yemen's children for whom the situation will only get worse unless meaningful action is taken now to end this devastating conflict.

	Before March 2015	% increase	Currently
People in need of humanitarian assistance	15.9 million	33% 👚	21.2 million, including 9.9 million children
People displaced from their homes	584,000	310%	2.4 million, including approximately 800,000 children
People without enough to eat	10.6 million	35% 👚	14.4 million, including 7.7 million children
Children under the age of five malnourished	850,000	52% 👚	1.3 million, including 320,000 severely acutely malnourished children
People without adequate access to healthcare	8.4 million	67% 👚	14.1 million, including 8.3 million children
People without clean water or sanitation	13.4 million	44% 👚	19.3 million, including approximately 10 million children
Children out of school	1.6 million	112%	3.4 million

Sources: UN OCHA¹, UNICEF²

Save the Children in Yemen

Save the Children has been working in Yemen since 1963. Over 400 staff have been responding to the humanitarian crisis throughout the past twelve months in order to provide often life-saving assistance to vulnerable children and their families across the north, centre and south of Yemen, in nine different governorates; Aden, Amran, Dhamar, Hajjah, Hodeidah, Lahj, Sa'ada, Sana'a and Taiz.

Since March 2015, we have provided humanitarian assistance to more than 775,000 people, including over 440,000 children, through activities such as food distributions, cash transfers, support to health facilities, the provision of mobile health teams, treatment for acute malnutrition, rehabilitation of water and sanitation facilities and psychosocial support to vulnerable and traumatised children.



Since March 2015, Save the Children has reached:

- Over 30,000 children with psychosocial support through our Child Friendly Spaces.
- Over 61,000 vulnerable households with food distributions or cash transfers, reaching a total of 419,922 people.
- Over 5,700 children with treatment for severe and moderate acute malnutrition.
- Over 110,000 people including over 58,000 children with health consultations or treatment through the 77 fixed health facilities which are supported and 24 mobile health facilities which Save the Children operates to reach families and children in both hard to reach areas and areas where hospitals have been forced to close.
- Over 180,000 girls and boys, women and men, with sanitation and hygiene awareness sessions, and the
 distribution of over 4,100 water storage tanks and 2,200 hygiene kits. Save the Children has also worked to
 maintain and rehabilitate community water points, sanitation blocks and latrines in schools and health
 facilities.

Daily threat of death or injury for children

One year on, the continuing attritional nature of the conflict means that a decisive victory by any of the warring parties remains unlikely in the foreseeable future. While the conflict continues to wreak havoc on the lives of Yemen's population, grave violations against children have increased dramatically over the last year and the safety and security of children in Yemen is threatened daily by the on-going hostilities. Of the 3,081 civilians killed since March 2015; nearly a third were children.³ At least 856 children have been killed and a further 1,249 have been injured. This equates to six girls and boys killed or injured each day as a direct consequence of the conflict. Levels of child recruitment by armed actors have escalated and, although verified cases are relatively low at 762, real numbers are believed to be much higher.⁴ Children have also been subjected to abduction and arbitrary detention. Rape and other forms of sexual violence against children have also been reported.⁵ Schools and hospitals have been attacked and humanitarian assistance to children and their families has been denied.⁶ The result is an acute child protection crisis with an estimated 7.4 million children in need of protection assistance.⁷

According to Action on Armed Violence, 6,119 civilian deaths and injuries from explosive weapons were reported in Yemen in 2015 which is more than in any other country around the world last year, with civilians making up 93% of all casualties when explosive weapons were used in populated areas.8 Many attacks are alleged to be in violation of international humanitarian law because they were indiscriminate, disproportionate to the military objective, or

because feasible precautions were not taken to protect the civilian population and civilian objects. All sides are alleged to be responsible for such violations. However, the UN has attributed a disproportionate number of child casualties and damage to civilian infrastructure to coalition airstrikes. Moreover, despite being banned under international law there are reports that cluster munitions have been used.



As well as the risk of living under bombing and bombardment, children's lives are also threatened by the large numbers of landmines that have been laid during the conflict, unexploded ordnance (UXO) which failed to detonate when deployed, and improvised explosive devices (IED). In the four governorates of Abyan, Aden, Lahj and Taiz, several thousand newly laid anti-personnel mines (banned in international law through the 1997 Mine Ban Treaty¹²), anti-tank mines and IEDs were reported during the second half of 2015.¹³ According to the Yemen Explosive Mine Action Committee (YEMAC), an organisation specialising in de-mining that works with Save the Children in providing mine awareness education for children and their families, at current capacity and assuming no further such weapons are used, the clearance operation in these areas could take up to three years to complete. In the meantime, the risk of child fatalities and debilitating injuries from these weapons will remain.

Ali* was ten years old when an explosive weapon changed his life.

Ali was playing outside his home in Aden with his friends and other children from his neighbourhood when his best friend Saif* joined them and was holding an unexploded anti-aircraft bullet. Ali says "He started to hit the bullet on a concrete wall and then suddenly there was a big spark of fire on the wall and it blew up."

Saif and another boy were killed and six children, including Ali were injured. Ali suffered severe injuries to his chest and shoulders, requiring two operations to remove shrapnel from his body. His mother told Save the Children that since the accident, he wakes up in the night crying, sobbing and screaming "All my friends died! Where are they?"

The psychological impact of the conflict has also been devastating for children. Based on a sample study of 150 children attending Save the Children Child Friendly Spaces or participating in our mine risk education sessions in Aden and Lahj governorates, 70% were assessed to have symptoms associated with distress and trauma including anxiety, low-self-esteem, feelings of sadness, lack of concentration and low problem-solving skills. Over 30,000 children are being provided with psychosocial support by Save the Children, but ultimately their recovery requires an environment in which they are not in daily fear for their lives.

Millions of children hungry and malnourished

Children's lives and well-being are also threatened by food shortages and increasing rates of child malnutrition that are a direct consequence of the conflict. Prior to March 2015, over 41% of Yemen's population were unable to meet their basic food needs. ¹⁴ Twelve months of bombing, ground fighting, a de-facto blockade of sea and air ports and obstructions to the delivery of aid has resulted in an estimated 14.4 million people (over 55% of the population), including nearly eight million children, now facing serious food shortages.

Yemen relied on imports to meet its food, fuel and medicine needs, with over 90% of food staples imported before the recent conflict escalation.¹⁵ A de-facto air and naval blockade imposed by coalition forces to prevent arms from being smuggled into the country also cut off supplies of commercial and humanitarian goods into Yemen for much of 2015. Reduced imports of food, fuel and other vital commodities combined with insecurity and restrictions on humanitarian access have resulted in severe shortages of basic goods and highly inflated prices in many areas.

Although the de-facto blockade has now begun to ease with the level of food imports in January 2016 at their highest levels since July 2015, there is still a significant gap between supply and demand and an urgent need for imports to return to pre-crisis levels, particularly as imports again decreased significantly in February. In order to achieve this, the UN sponsored Verification and Inspection Mechanism (UNVIM) must be fully implemented in order to build confidence among importers, reduce bureaucratic delays and ultimately increase import levels. Fuel also remains scarce across all governorates as a result of the challenging security situation. Save the Children staff report that fuel is only sporadically available in areas like Taiz, Hodeidah and Hajjah governorates as a direct result of insecurity and subsequent difficulties in transporting fuel to markets. Severe shortages of other basic commodities have also been reported, particularly in conflict affected areas where populations continue to face severe restrictions on accessing humanitarian aid and basic commercial goods. For instance, items such as barley flour were completely unavailable in late-January in some parts of Taiz city which has been a front-line in the current conflict since August 2015.

Over the past 12 months Yemen's Gross Domestic Product (GDP) is estimated to have contracted by as much as a third while inflation has soared to a rate in excess of 30%.²¹ As a result, many families have lost their livelihoods and without any functioning social safety net in place, rising prices mean that food is increasingly out of reach for millions of poverty stricken children and their families. According to one Save the Children staff member working in Sa'ada, "due to the loss of incomes and the resulting severe poverty, families that we have spoken to are both decreasing the frequency and nutritional value of meals per day with some families surviving on just bread and yogurt due to the inflated costs of staples like vegetables and meat that they routinely consumed before the conflict".

Marwan* is seven years old and lives in Amran governorate with his family. They are among millions of families who are struggling to meet their daily food needs.

"We struggle now with a lack of everything" Marwan tells us. Sometimes he does not have anything to eat. His favourite thing to eat before he goes to school is cheese with eggs but he hasn't had either since the war started. Marwan's father Hussein* lost his job after the escalation in the conflict and he is no longer able to provide for the 19 members of his family, six of whom are children. Hussein tells us "I have lost all hope in the future and I don't know what to do, I'm responsible for all members of my family but cannot feed them. It's really difficult. I am ready to work in any job but can't find any work."



The impact of food insecurity and shortages has contributed to a significant increase in child malnutrition rates compared to pre-conflict levels. One million children under the age of five across Yemen are now estimated to be suffering from moderate acute malnutrition, and a further 320,000 are suffering from severe acute malnutrition – almost double the number of cases reported before the current conflict escalated.²²

Twelve month old Khaled* lives in Amran and is one of the 320,000 children under the age of five suffering from severe acute malnutrition.

According to Khaled's mother Rana* "he was born at the beginning of this war and it was the worse time of my life, nothing was available; no medicine, no food in the market and we had no income. The war has made our lives miserable." When Khaled got sick, Rana became desperate as there were no health facilities or trained medical staff near their village and he weighed only 5.2kg. She added "I was looking for hospitals in Amran and Sana'a to treat my child but because of the war and the airstrikes, I was not able to leave the village."

A Save the Children run mobile health team was able to travel to Rana's village where Khaled was successfully treated. Rana said 'During each and every visit by the team, I saw improvements in Khaled's health.'

In the northern governorate of Sa'ada, for example, months of insecurity resulting from sustained airstrikes has made delivering humanitarian assistance in the area extremely challenging and has led to a reduction in the treatment and prevention of malnutrition across the governorate. An assessment undertaken by Save the Children in six of Sa'ada's 15 districts found critical shortages of ready to use therapeutic foods, which are used to treat children with acute malnutrition. Visible signs of wasting were observed in many children.

"There are growing indications to suggest that malnutrition rates in Sa'ada governorate are rapidly increasing. If current conditions continue the prevalence of both moderate and severe acute malnutrition will soar and result in greater susceptibility of children to disease and ultimately, death" reported Save the Children's manager for the northern area of operations covering Sa'ada and other northern governorates.

There are similar concerns about malnutrition levels elsewhere. In Amran governorate for example, Save the Children staff have reported children with swollen feet (oedema), indicating severe acute malnutrition while a nutrition survey conducted by UNICEF and the Yemen Ministry of Public Health in late 2015 found the prevalence of

global acute malnutrition (GAM), a basic indicator to assess the nutritional status of a population, amongst children under the age of five to exceed the World Health Organisation's critical level of over 15% in Aden (19.2%), Hodeidah (31%), Hajjah (20.9%) and Lahj (20.5%) governorates. There are also serious concerns for the population unable to leave parts of the city of Taiz which had largely been inaccessible to aid agencies as a result of insecurity and denial of access for several months. Although access constraints are beginning to be lifted, over six months of restrictions on food entering the local markets in the city coupled with the disruption to household livelihoods will have further reduced food consumption levels, a factor which will inevitably lead to increased acute malnutrition levels in children.²³

Collapse of health and water services threatening the lives of children

Since March 2015, almost 600 hospitals and health facilities have reportedly closed due to damage, destruction or shortages of critical supplies or staff.²⁴ One such facility, a health centre supported by Save the Children in Lahj governorate, was destroyed in an airstrike in June 2015, leaving the local population of almost 5,000 people without essential health services for two months before an alternative facility could be established. Similar incidents have also been repeated on a regular basis across the country despite the fact that international humanitarian law requires parties to armed conflict to respect and ensure the protection of medical facilities, including civilian hospitals and health centres.

Save the Children has seen huge increases in children attending supported health facilities with diseases that can often prove fatal. Second only to malnutrition, dehydration caused by severe diarrhoea and typhoid are the biggest killers of children being reported in Save the Children supported health facilities across the nine governorates that we operate in. Moreover, the number of children treated for communicable diseases such as diarrhoea and malaria has doubled in most Save the Children supported health facilities. The situation in Sa'ada governorate, for example, is particularly acute where the number of children treated for severe diarrhoea has more than tripled from 382 in August 2015 to 1,217 in January 2016.

Samara'a* is the technical Deputy Manager of Medical Services at Zayed Hospital in Sana'a. Zayed Hospital is one of the health facilities that Save the Children supports.

She tells us that prior to the conflict, the hospital served a population of 200,000 people in Sana'a with specialised services for children and mothers. But as a result of hospital closures in surrounding governorates, Zayed Hospital now also serves populations in Marib, Al Jawf, Shabwah, Amran and Hajjah governorates. Due to the increased pressure of taking on so many new patients, opening a new ward to take in injured patients, and providing free healthcare over the past year because most patients are unable to pay, the hospital is running out of money and lacks space, staff, medical equipment, medicines and also electricity due to a lack of fuel.

Samara'a describes how a few weeks ago a baby died when the power generators cut out for one hour due to a lack of fuel, preventing equipment such as incubators or ventilators from operating. "I was calling everyone I knew who might have had a stock of fuel to provide to the hospital. It is so difficult when you find yourself in a situation in which you can't do anything for the patients, especially children or babies."

She goes on to describe the fear and panic that she experienced when an airstrike hit the area close to the hospital and blew out all of the windows in May last year. She said "the hospital was full of patients and we didn't have enough staff present to help move them quickly enough to the basement of the hospital. It was such a difficult moment. Everyone was scared and crying."



Both primary and secondary healthcare services available to children and families have been severely affected, leaving over eight million children and half a million pregnant women without adequate access to healthcare.²⁵ Medicines and medical supplies, 100% of which are imported²⁶, remain in short supply despite signs that the de-facto blockade is easing.²⁷ In addition to chronic drug shortages, even basic first aid supplies are frequently unavailable. For example, according to a Save the Children staff member, due to a lack of sterile bandages or iodine, a health facility in Sa'ada is unable to sterilise or properly dress wounds.

Vaccines also remain in short supply while the cold chain storage of those supplies that are still available in Yemen is often compromised through a lack of electricity to run storage facilities. Only 2,400 children out of approximately 7,000 children who were targeted for vaccinations in Save the Children's areas of operations in the past year received them. This has left almost 5,000 children at risk of contracting preventable diseases such as tetanus, polio and tuberculosis.

Hani* is seventeen years old. During an airstrike that hit his home in northern Yemen, Hani lost his leg and his brother was killed. He is receiving support from Save the Children's child protection team in order to cope with this traumatic experience. Hani was outside when an airstrike hit the home that he shared with his older brother and his brother's family. He ran into the house to try to find his brother and his family but the building began to collapse on top of him. "When I woke up I found that I had been in a coma for ten days in hospital. I had lost one of my legs and the other was broken. Shortly afterwards, I learned that my brother was dead. It



was a huge shock. I felt so sad; it was like all my dreams were gone. When it happened there wasn't an ambulance to take me to the hospital, which is more than two hours away by car, so they put me on public transport. But I don't remember it at all. [...] There is no health service near here and people injured in the airstrikes like me have to go all the way to the hospital in Hajjah City for our rehabilitation. It is very difficult for me to get to the hospital, especially as there is no fuel available in the market and so transport costs more than I can afford. So I don't go often, which means sometimes I'm in lots of pain with no medicines to help."

Lack of safe water and sanitation is also increasing the risk of the spread of disease. This has been demonstrated recently during outbreaks of dengue fever and cholera reported by the World Health Organisation as well as increased levels of other communicable diseases.²⁸ In a recent assessment of six districts in Sa'ada governorate, Save the Children found that the top two conditions that children are being treated for are diarrhoea and urinary tract infections (UTIs) – both of which can be caused by a lack of access to clean drinking water, and in the case of UTIs, is a primary indicator of prolonged and chronic dehydration.

Fuel to pump safe water remains in short supply in most areas while national water networks serving nearly a million people prior to the conflict have either been damaged or destroyed.²⁹ In total, almost 20 million people, half of whom are children, are currently unable to meet their basic water, hygiene and sanitation needs. Without urgent action, millions of children are at risk of losing all access to clean water, presenting a further risk to life.³⁰



Zaki* is eleven years old. Until Save the Children recently installed a water point near his home in Hajjah governorate Zaki was one of the ten million children in Yemen without access to clean water.

Zaki said that before the new water point was installed, he faced many challenges in collecting clean water, "there was a water source that was very far away and I used to walk for an hour to get there. I used to face many risks from collecting water from the old water source. These included wild dogs and violent boys." Zaki then goes on to tell us that the new water source is very close to his house and he and his family are no longer afraid of getting sick because he says "now we drink clear water".

Children deprived of an education

The conflict in Yemen has affected many aspects of daily life for children, not least the normality of the school routine. In addition to the 1.6 million children that were already not attending school prior to March 2015, a further 1.8 million children are now also being deprived of an education. As a result almost half of all school-aged children in Yemen are now out of school.³¹

Over 1,600 schools remain closed³² largely due to damage or destruction to buildings or their use as shelters by some of the 2.4 million³³ internally displaced people currently in Yemen. Some schools also remain closed as a result of occupation by warring parties to the conflict.³⁴ Between March 2015 and February 2016, 98 attacks on schools have been recorded by the UN, which amounts to over two attacks per week.³⁵ Even where school buildings remain intact children and teachers are often afraid to use them. In Alheshwah district in Sa'ada, for example, Save the Children staff visited schools where lessons were taking place outside away from the school building, due to fear of possible attacks. Schools that remain open are also often cramped and severely under-resourced, with a lack of teachers, books and furniture, with reports of children sitting on the floor in overcrowded classrooms.

Prolonged absences from school will detrimentally affect the futures of Yemen's children. It also means that they are more vulnerable to child protection risks including exploitation and abuse as they are not in the protective and regular environment that a school can provide. However, despite the overwhelming needs, funding for the education sector remains wholly inadequate, attracting just 42% of required funds in 2015 while in 2016 the sector has yet to attract any donor support.³⁶



Hania* is a teacher at a school in Sana'a and has been teaching for five years. She tells us that due to overcrowded classrooms "sometimes we cannot provide chairs for all of the students so they have to sit on the ground". She added that the huge influx of children (including many displaced children) makes classroom sizes unmanageable and therefore has a negative impact on the learning environment for her students. She told us "for eight months children have been in the streets with no school and all that they hear is bombing, gun fire and fighting" and as a result she has seen her pupils become more

violent and aggressive.

Arwa* is eight years old and lives with her family in a school in Sana'a that is being used by displaced people after her house and school were damaged in airstrikes.

She tells us, "I miss my school, friends, house, and I live in a classroom in a school. School should be for education not to live in but the war forced us to leave our house and live here. But I am sure this war will end soon and I will be able to go back home and back to school."

Arwa's mother tells us, "She is so smart and she keeps asking me when we will go back to our house and her school. Unfortunately I don't have answers to her questions."



Conclusion and Recommendations

According to the UN, in terms of people in need the current humanitarian crisis in Yemen 'is the largest in the world'.³⁷ Furthermore, the manner in which hostilities continue to be conducted which includes scant regard for children's lives and those of the wider civilian population, has created a protection crisis for the majority of Yemen's people. In order to prevent further unnecessary deaths and injuries and to enable Yemen's children to enjoy their basic rights including their rights to physical protection, food, education and health care, all parties to the conflict, the UN Security Council and the wider international community must intensify efforts to find a peaceful solution to the current conflict. In the meantime, in order to meet the humanitarian needs of the population, support for the UN's 2016 Yemen Humanitarian Response Plan (YHRP) is critical in order to reach 13.6 million people most in need of life-saving humanitarian assistance. The YHRP is currently only 4% funded, with both child protection and education completely unfunded to date.³⁸ The full funding of both sectors is crucial in order address the desperate education and protection needs of children across Yemen.

To bring this suffering to an end, Save the Children therefore urgently calls on:

Parties to the conflict to:

- I. Agree an immediate ceasefire and engage, without preconditions, in order to find a political solution to the conflict.
- 2. Respect international humanitarian and human rights law and end all grave violations against children, including killing and maiming of children, attacks on schools and hospitals and military recruitment and use of children. In addition, the military use of education facilities, including schools should cease in accordance with the 'Guidelines for Protecting Schools and Universities from Military Use during Armed Conflict'.
- 3. Stop the use of explosive weapons with wide-area effects in populated areas, in order to avoid the devastating and predictable harm to civilians, including death and injury, and the damage and destruction to civilian infrastructure that their use entails. Furthermore, end all use of internationally banned weapons such as cluster munitions and landmines.
- 4. Allow for safe, rapid and unimpeded humanitarian access to all populations in need of assistance.

The UN and its Member States to:

- I. Intensify diplomatic pressure on belligerents to the conflict to find a permanent ceasefire and a sustainable and inclusive political solution, while ensuring the protection of civilians. Should relevant UN Security Council Resolutions fail to bring about progress in facilitating humanitarian access, the protection of civilians, and an end to the conflict, a new resolution should be adopted that would ensure an end to the conflict and the humanitarian suffering.
- 2. Demand improved humanitarian access. All parties to the conflict must enable safe, rapid and unimpeded access to humanitarian assistance for those in need, particularly in active conflict areas. Those obstructing the delivery of aid should be condemned in the strongest possible terms and be held accountable.
- 3. Strongly condemn violations of international humanitarian and human rights law, including grave violations against children by all parties to the conflict. Demand that parties comply with their obligations under international law and support the establishment of a fully independent international mechanism to investigate reports of alleged violations.
- 4. Call on all parties to end all use of weapons banned under international humanitarian law such as landmines and cluster munitions and to stop the use of explosive weapons with wide area effects in populated areas in order to avoid the devastating and predictable harm to civilians and civilian infrastructure that their use entails.
- 5. States should stop approving the sale or transfer of arms to any party to the conflict in Yemen where there is a risk that they may be used against civilians and civilian infrastructure in violation of international humanitarian or human rights law. The arms embargo established under Security Council Resolution 2216 (2015) should be expanded to ensure that no arms or military equipment supplied to any party to the conflict can be used in Yemen, or in support of military operations there, where there is a clear risk that these arms may be used to commit violations of international law.
- 6. Support the humanitarian community to meet the needs of Yemen's population by fully funding the Humanitarian Response Plan which is currently only 4% funded. Furthermore, all funding should be consistent with humanitarian principles, unconditional and be allocated where it is most needed regardless of the geographical location of beneficiaries.

Notes

http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=17146&LangID=E

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- ¹⁶ UN OCHA, Yemen: Snapshot on Shipping, Food and Fuel Imports for February 2016, Issued on 11 March 2016
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- ²⁷ UN OCHA, Under-Secretary General for Humanitarian Affairs and Emergency Relief Coordinator Stephen O'Brien, Statement to the Security Council on Yemen, 3 March 2016
- ²⁸ WHO, Conflict in Yemen: Update and funding request, November 2015
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- ³² UNICEF, Yemen Humanitarian Situation Report, 27 January 9 February 2016
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- ³⁵ UNICEF, Information on grave violations against children from the UN-led Monitoring and Reporting Mechanism, received 29 February 2016
- ³⁶ UN OCHA, Financial Tracking Service, information extracted on 17 March 2016, https://fts.unocha.org/
- ³⁷ UN Security Council, Statement, 18 February 2016, http://www.un.org/press/en/2016/sc12250.doc.htm
- ³⁸ UN OCHA, Financial Tracking Service, information extracted on 17 March 2016, https://fts.unocha.org/

¹ UN OCHA, Yemen Humanitarian Needs Overview, 2015 and 2016

² UNICEF, Yemen Humanitarian Situation Report, 27 January – 9 February 2016

³ UN OHCHR, Press Briefing note on Yemen and Honduras, 4 March 2016,