WHO is working with the Ministry of Public Health and Population (MoPH) and health partners in Yemen to respond to the health needs of populations affected by the ongoing conflict, as well as ensure that adequate health services are in place for populations in potential conflict areas around the country.

Since the beginning of the year, the capital city of Sana’a and other major cities in Yemen have witnessed an escalation of armed conflict. According to the MoPH health operations room, more than 100 people have been reported killed and 300 injured this year. More than 8.4 million people are estimated to be in need of health care services across the country, including almost 334 000 internally displaced people who are mainly located in the north.

Limited access to essential health care services have increased the risk of higher morbidity and mortality from mass casualty events and other common diseases (diarrhoea, respiratory infections and vaccine-preventable diseases) in areas such as Al-Baidha, Marib, Taiz and Aden. With additional waves of population displacement expected as the conflict continues, there is an urgent need for the provision of basic life-saving services, essential medicines, and the deployment of mobile health teams.

“Humanitarian access to conflict areas is one of the key challenges faced by humanitarian partners in Yemen, impeding the provision of health care service delivery in the current situation,” said Dr Ahmed Shadoul, WHO Representative in Yemen. “This has highlighted the urgent need for enhancing and strengthening local health actors to respond to mass casualties and ensure the availability of life-saving services and referral mechanisms in newly inaccessible geographical areas, including reproductive health services and immunization activities.”

Together with MoPH and local health authorities in Al-Baidah governorate, WHO has identified urgent health needs in Rada’a district, and worked closely with the health office in Marib and
health partners to prepare a rapid response contingency plan for Marib governorate as a potential conflict area due to its oil resources and strategic location next to Sana’a.

The contingency plan includes preparedness and deployment of surgical and mobile teams for internally displaced persons and isolated host communities; stockpiling of essential medicines and emergency supplies; and arrangement for standby ambulances as part of referral mechanisms in the capital and major potential conflict areas (Sana’a, Marib, Aden, Al-Baidha and Abyan). Additional health kits containing trauma medicines, essential medicines and medical supplies for one million people are being procured from WHO’s humanitarian hub in Dubai for contingency stockpiling.

Priority health facilities in key areas have been rehabilitated and equipped with life-saving equipment, including Haradh Hospital and Abs Hospital in Hajjah, Amran Hospital in Amran, Al-Thowra Hospital and the Burn Centre in Al-Hodeidah, and Jedir Health Centre in Sana’a.

Capacity-building activities for health workers and community health volunteers have been conducted, including training on topics such as mass casualty management, reproductive health, immunization, and maternal and child health.

Parallel to these response activities, the health cluster is also preparing the health system to cope with long-term service-provision under early recovery and resilience-building of government institutions, as well as affected communities returning home post-conflict. WHO is taking the lead in supporting these activities comprising the transition of the health system from an emergency phase to development phase.

According to health cluster plan for year 2015, total funding required to cover health needs in Yemen was projected at around US$ 61 million, of which WHO requested US$ 25 million. WHO has so far received funding or pledges for almost US$ 6.5 million for 2015.

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