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## **Human Rights Council**

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Agenda item 4

Human rights situations that require the Council's attention

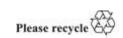
Joint written statement\* submitted by the Iraqi Development Organization, Americans for Democracy & Human Rights in Bahrai, non-governmental organizations in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[13 February 2017]

GE.17-02323(E)







<sup>\*</sup> This written statement is issued, unedited, in the language(s) received from the submitting non-governmental organization(s).

# Humanitarian Concerns over the Saudi-led Coalition Intervention in Yemen\*

IDO, together with Americans for Democracy & Human Rights in Bahrain (ADHRB), and Arabian Rights Watch Association (ARWA), would like to take the opportunity at the 34<sup>th</sup> session of the United Nations Human Rights Council to express concern over the Saudi Arabia-led coalition's ongoing systematic human rights violations in Yemen. The violations stem from the imposition of a comprehensive and indiscriminate land, air, and sea blockade and airstrikes on civilian targets, resulting in a humanitarian crisis. We are also deeply concerned with the coalition-backed Yemeni government-in-exile's decisions to appoint individuals who have been listed by the United States Treasury as terrorists, to government-related posts and to move Central Bank of Yemen from Sanaa to Aden. The movement of the country's central bank adds to the country's humanitarian burden.

### Ongoing Systematic Violations of the Laws of War, Human Rights Law, and Humanitarian Law

#### i) The effects of the coalition's blockade on public health and imports

Saudi Arabia and its coalition allies justify their intervention in the conflict in Yemen on the basis of United Nations Security Council Resolutions 2140 and 2216. However, the coalition's implementation of these resolutions has played a major role in creating a situation where an estimated 14 million Yemenis are food insecure, 7 million of whom are severely food insecure. This is a 33 percent increase from pre-war levels as recorded in late 2014.<sup>1</sup>

The Office for the Coordination of Humanitarian Affairs expects that food insecurity will further increase in 2017 "due to conflict-induced scarcity of basic commodities, the liquidity crisis, disruption of imports, the high price of essential commodities and dwindling livelihoods and income opportunities." The situation for children is especially grave: 2.2 million children are acutely malnourished and almost half a million children suffer from severe acute malnutrition. This represents a 63 percent increase since late-2015. According to the Famine Early Warning Systems Network, the conflict-induced crisis "has led to uncertainty about future food imports. In a worst-case scenario [...] Famine (IPC Phase 5) is possible in 2017."

The Saudi-led coalition's blockade has compounded Yemen's mass food insecurity, by leading to a financial crisis that affects the Ministry of Public Health and Population's (MOPHP) ability to fund health care centers and which "is likely to leave broad swathes of Yemen without health services." The financial crisis is largely caused by the reduction in fees from exports, imports, and customs taxation that go towards covering public sector needs. In August 2016, the MOPHP announced that it could no longer cover operational costs for health centers. The healthcare crisis has been

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<sup>&</sup>lt;sup>1</sup> "2017 Humanitarian Needs Overview," Relief Web, January 2017,

http://reliefweb.int/sites/reliefweb.int/files/resources/YEMEN%202017%20HNO\_Final.pdf [accessed 9 February 2017].

<sup>&</sup>lt;sup>2</sup> Yemen: Humanitarian Dashboard (January - December 2016), OCHA,

http://reliefweb.int/sites/reliefweb.int/files/resources/humanitarian\_dashboard\_jan\_to\_dec\_-\_25122017\_v2.pdf [accessed 30 January 2017].

<sup>&</sup>lt;sup>3</sup> Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Stephen O'Brien Statement to the Security Council on Yemen, New York, 26 January 2017, http://reliefweb.int/report/yemen/under-secretary-general-humanitarian-affairs-and-emergency-relief-coordinator-11 [accessed 30 January 2017].

<sup>&</sup>lt;sup>4</sup> Food Assistance Outlook Brief, Famine Early Warning Systems Network, January 2017,

http://reliefweb.int/sites/reliefweb.int/files/resources/Final%20Jan%202017%20FAOB\_0.pdf [accessed 30 January 2017].

<sup>&</sup>lt;sup>5</sup> 2017 Humanitarian Needs Overview.

further compounded by airstrikes on health facilities<sup>6</sup> and the blockade on food, medicine, and fuel. The cumulative result of the blockade, airstrikes, and the financial crisis has caused an estimated 14 million Yemeni people to go without adequate access to basic healthcare needs and led to the closure of 55 percent of hospitals, clinics, and health units.

The Saudi-led coalition's aerial blockade has banned commercial flights to and from Sanaa International Airport, causing a significant drop in the availability of medicine. The ban has curtailed Yemen's ability to import medicine via commercial flights. Prior to the blockade, this method was often the only way Yemeni health centers could import medicine that requires refrigeration and timely transport.<sup>7</sup>

Prior to the beginning of the conflict, the port at Hodeida handled approximately 80 percent of imports into Yemen. However, the Saudi-led coalition's naval blockade diverts ships sailing to Hodeida towards Jeddah or Djibouti. This often delays the entry of cargo to Yemen by up to three months. Despite the installation of the United Nations Verification and Inspection Mechanism in Yemen, whose purpose is to inspect incoming ships, the coalition continues to have oversight over all cargo attempting to enter Yemen's Red Sea ports, including Hodeida. Even when ships are allowed to enter Hodeida, they cannot dock and unload in a timely or efficient manner. Coalition airstrikes on critical port infrastructure like cranes has led to extended delays in offloading cargo that can take three months. Furthermore, some members of the Coalition, like the United Arab Emirates, do not allow medicine to be shipped from its ports to any of Yemen's Red Sea ports.<sup>8</sup>

The blockade on medicine particularly effects vulnerable patient populations, such as those with kidney failure. For example, Mohammad, a Yemeni citizen, had a kidney transplant in 1998 at the age of ten. The transplant dramatically increased Mohammad's quality of life during his childhood and throughout his adult life. In late 2016, 18 years later, Mohammad's transplanted kidney was rejected by his body because his immunosuppressants were no longer available locally and they could not be obtained through Sanaa International Airport. There are over 5,000 patients with kidney failure and thousands of other patients with heart disease and other illnesses requiring medicine that is no longer available and that is not readily available due to the blockade.

#### ii) Airstrikes on civilian targets

By 31 December 2017, Saudi-led coalition airstrikes had killed 7,469 civilians and wounded over 40,000. Among the munitions the coalition has deployed on residential areas are internationally-banned cluster bombs, including Britishmade BL755 cluster bombs. The use of these weapons on residential areas violates the principles of distinction, proportionality, and military necessity. Coalition jets have also targeted civilian infrastructure, destroying hundreds of schools, markets, health facilities, bridges, roads, and water points. Airstrikes are responsible for damaging two-thirds of Yemen's infrastructure.

#### iii) Appointment of designated terrorists to government-related posts

<sup>&</sup>lt;sup>6</sup> Complaint to the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health: Airstrikes on medical workers, facilities, and infrastructure in Yemen, 31 January 2017, http://arwarights.org/airstrikes-on-healthcare-facilities [accessed on 8 February 2017].

Omplaint to the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health: The Saudi Coalition blockade and its effect on the importation of medicines into Yemen, 31 January 2017, http://arwarights.org/blockade-on-medicines [accessed on 8 February 2017].

<sup>&</sup>lt;sup>8</sup> Ibid.

Omplaint to the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health: The Saudi Coalition blockade on medicines and its relation to Mohammad Abdullah Abdulmalik's Kidney Rejection, 31 January 2017, http://arwarights.org/blockade-effect-on-kidney-patients [accessed on 8 February 2017].

<sup>&</sup>lt;sup>10</sup> Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Stephen O'Brien's Statement to the Security Council on Yemen.

<sup>11</sup> Ibid.

The internationally-recognized Yemeni government-in-exile has appointed several individuals on the U.S Treasury's list of Specially Designated Global Terrorists to prominent government positions. Of particular concern are the appointments of Nayif Salih Salim al-Qaysi as the governor of al-Bayda Governorate, <sup>12</sup> and Abd al-Wahhab Muhammad Abd al-Rahman al-Humayqani as a negotiator to peace talks taking place in Geneva. Al-Qaysi has used his position to facilitate the expansion of al-Qaeda in the Arabian Peninsula (AQAP) while al-Humayqani used his Yemenbased charity to funnel funds to AQAP. <sup>13</sup>

#### iv) Relocation of the Central Bank to Aden

The Yemeni government-in-exile's decision to move the Central Bank of Yemen from Sanaa to Aden has amplified the country's humanitarian crisis by disrupting the payment of government salaries 6 million people who depend on them for basic necessities. The move has also disrupted the Central Bank's traditional role as an underwriter and facilitator of import transactions. As a result, Yemen's biggest traders have not been able to import wheat. A halt on wheat imports will have a devastating effect on Yemen's already-stretched population and could lead to starvation.<sup>14</sup>

#### Recommendation

At the 34<sup>th</sup> Session of the Human Rights Council, IDO, ADHRB, and ARWA, urge United Nations Member States to:

- Set up an independent international commission of inquiry to look into the crimes being committed by all parties to the
  war in Yemen and recommend that the United Nations Security Council transfer the case to the International Criminal
  Court:
- Halt all forms of military support that enables any State, including members of the coalition, to commit human rights violations and crimes against civilians in Yemen;
- Facilitate humanitarian access to impoverished areas;
- Urge Yemen's government-in-exile to prosecute individuals connected to terror and violent extremist groups;
- Facilitate inter-Yemeni dialogue to resolve the conflict without foreign intervention.

\*Arabian Rights Watch Association (ARWA), NGO without consultative status, also shares the views expressed in this statement.

<sup>12 &</sup>quot;Treasury Designates Al-Qaida, Al-Nusrah Front, AQAP, And Isil Fundraisers And Facilitators," United States Department of the Treasure, 19 May 2016, https://www.treasury.gov/press-center/press-releases/Pages/jl0462.aspx [accessed 9 February 2017]

<sup>13 &</sup>quot;Treasury Designates Al-Qa'ida Supporters in Qatar and Yemen," United States Department of the Treasury, 18 December 2013, https://www.treasury.gov/press-center/press-releases/Pages/j12249.aspx [accessed 9 February 2017].

<sup>&</sup>lt;sup>14</sup> "Yemen's inevitable food crisis," Oxfam, 24 March 2016,

https://www.oxfam.org/sites/www.oxfam.org/files/file\_attachments/mb-yemen-invisible-food-crisis-one-year-on-240316-en.pdf [accessed 9 February 2017].