Voices from Yemen
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Abbreviations

GDP  Gross Domestic Product
IDP  Internally Displaced Persons
INGO  International Non-Governmental Organization
IRG  Internationally Recognized Government
KII  Key Informant Interviews
MENA  Middle East and North Africa
UNHCR  United Nations Refugee Agency
UNDP  United Nations Development Programme
WB  World Bank
WFP  World Food Programme
YR  Yemeni Riyal

Glossary of Arabic terms used by respondents

*Ansar Allah*  Official name for the Houthi movement
*Alhamdulillah*  We trust God
*Khaliba ala Allah*  Leave it for God (a phrase that is used to indicate there is a problem but reluctant to tell details)
*Khat or Qat*  Chewable mildly narcotic leaf widely consumed in Yemen and Horn of Africa
Acknowledgements

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Photo credits and captions

Ali Al Sunidar:

Cover Selection of portraits.

Page 4 A view of a bustling local market in Old City, Sana’a.

Page 8 A view of the sunset off the coast of the Red Sea.

Page 11 A street vendor selling squash on the roadside.

Page 12 A street vendor selling ‘Henna’ in Al Hudaydah.

Page 17 Little girls in praying outfits in one of the mosques with a volunteer reviewing their school lessons.

Page 21 A family sharing food that does not require cooking due to the shortage of cooking gas. This includes ‘Shafoot’ (yogurt with special soft bread), ‘Sahawiq’ (smashed tomato with hot pepper), salad, and bread.

Page 24 A teacher and pupils in a makeshift classroom in a rural area.

Page 37 Fishermen setting up for the day by preparing their fishing nets.

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Ahmed Basha/Shutterstock:

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Executive summary

The Yemeni population, living in difficult war conditions for almost a decade, have resorted to innovative but often destructive coping strategies. This report aims to present the voices of Yemenis who have now spent eight years living through a civil war, economic crises, and close to famine. It aims to provide a picture to accompany the statistics reported in *Surviving in the Times of War*, which documents the change in food security since the conflict began (Favari et al., 2023).

This report uses a conceptual framework that also guided the quantitative analysis presented in *Surviving in the Times of War* to showcase perspectives on how conflict affects households, markets and institutions, and humanitarian support --- which all feed back into the conflict itself (Favari et al., 2023).

This report primarily uses qualitative research methods to collate and analyze data collected through qualitative in-depth interviews. Overall, 156 interviews were conducted during the 2019–2022 period, and they were subsequently coded and analyzed to search for common themes and emerging patterns. This report is among the few authentically capturing Yemeni voices on a range of day-to-day issues from different governorates across the country. Although the small sample size limits ability to generalize findings, generalizing findings was not the intention of the report. For each theme, Voices from Yemen presents a multi-stakeholder perspective to mitigate bias towards a single stakeholder group or geographical area. Moreover, the report’s findings are in line with those in other quantitative reports, such as *Surviving in the Times of War* or the *World Bank Phone Survey* reports on food security (Favari et al., 2023; World Bank, 2023).

*Voices from Yemen* presents a comprehensive picture of suffering derived from human stories behind the statistics. The conflict has made Yemeni lives unaffordable, uncertain, vulnerable, and often unbearable. The power of people’s speech and the intensity of their stories narrate their grave vulnerabilities and the sense of helplessness and suffering the conflict has caused. In summary:

In day-to-day life, respondents widely report reducing food intake. Cutting back on meal frequency, restricting the amount of food and its diversity, prioritizing food among family members, moving away from cooking gas to wood, and even going hungry are some of the coping strategies reported by households. Most respondents noted that to afford basic sustenance, often the main breadwinner had to juggle multiple jobs in a climate of limited livelihood opportunities. The below quote from a male respondent who now lives in Al Mahwit illustrates the realities of hunger.
Yes, sometimes we sleep with no dinner. My wife and I, no one knows what we eat or what we don’t. Sometimes when I have some money for dinner, my wife tells me that the kids need milk, so I buy them milk and we sleep without having dinner. The kids are more important.

*Yemeni children are missing out on critical education.* Yemeni parents sent children to school if it was close by, consistently offered classes, and did not charge fees. Otherwise, they needed to prioritize which child to be sent to school based on safety, accessibility, and financial circumstances. If they could afford to send children to school, they needed to make sure to give support to children at home due to the reduced quality of education. Schools also faced many struggles such as sustaining teachers, providing supplies, and maintaining basic infrastructure. A school principal from Hajjah quotes:

“My school has 1050 students, and it is only six rooms, one of which is residential for two teachers, one for the principal’s office, and the remaining four rooms for all grades. We have three shifts for different grades. One of the teachers had to bring his family from Al Hodeidah as confrontation intensified there, so we had to move the other teacher to live under the staircase. There is no restroom or water in the building.”

Most respondents only accessed health care in case of emergencies. Health shocks were considered the main shocks households faced. However, health professionals had to cope with patient emergencies under limited facilities and drug supplies. A manager of a health center in Al Hudaydah governorate said:

“We used to offer services and medicine for free. Now we have to charge the patients and write them a prescription to buy medicine from pharmacies. People stopped coming, and they shy away. They can’t afford all that, given that commuting here will also cost them a lot. It is even a hardship for staff who spend half of their salaries on transportation.”

Internally displaced Yemenis struggle to absorb and cope with a full set of shocks. The main challenge they suffer is ensuring the safety, security, food, and re-settlement of the family. A male respondent from Al-Baida describes the reason and process of displacement and the difficult reality of the high cost of living, especially as IDPs:
We had to leave our town because of the air raids that destroyed our homes. We had four homes. We were terrified and used to cry. Our life is very tough here and there. My mother passed away. The rent is also very expensive. We cannot afford that. We struggle to find food, then how about paying the rent. […] All of us moved, even my in-laws. From Raada we first moved to a house that was expensive to rent, then we moved to another house where we could afford to pay the rent. It is difficult to live everywhere in Yemen.

This report also presents key cross-cutting contributions to understanding the situation in Yemen:

First, this report uncovers the key cross-cutting theme of repeated shocks and harmful coping strategies Yemenis endure. The realities of life—related to food, basic services (education and health), livelihoods, and displacement—force most respondents to resort to a plurality of often highly destructive coping strategies. Households must make tradeoffs in terms of spending on food, education, or health. They try to cope with repeated shocks, such as an illness, by selling assets such as gold or even guns. They borrow from extended family, local stores, and other social and familial networks and live in a vicious cycle of credit.

Secondly, findings across this report confirm how the conflict interlinks with households, markets, institutions, and the humanitarian response. It discusses pathways in which the humanitarian response feeds back into these categories described by the conceptual framework. Examples include:

• **Food unaffordability is due to direct and indirect effects of conflict** on markets and institutions; and while the humanitarian response intervenes in the form of food aid, it is often not adequate nor sustainable.
• **Conflict and the humanitarian response affect education and health provision.** For households, these priorities compete, influenced by affordability, which is primarily related to livelihoods. Lack of education and health for a prolonged period can have long-lasting consequences that can feed back into the conflict.
• **Conflict and the humanitarian response has changed the economy.** Analysis of livelihoods reveals that the humanitarian response to the war has changed the local economy. In healthcare, for instance, humanitarian organizations have attracted health workers while not providing sustainable healthcare investments. Also, small companies might be losing out to bigger companies that can provide services at scale, potentially leading to monopoly in different sectors.
• **Displacement is another factor that interconnects with food, basic services, and livelihoods.** As in the Surviving in the Times of War report, our findings show that displacement affects food availability and affordability, exacerbates overcrowding in classrooms, deprioritizes health access, and disrupts livelihoods and assets.

Finally, this report demonstrates the deep and constant struggles of the Yemeni population, who often do not have any choice other than to endure. Viewing this as resilience, or the “ability to cope”, treats vulnerabilities as strengths, thus underestimating the toll of the conflict on the living conditions of Yemenis, and the consequences that will be felt for generations to come.
Introduction

Armed conflict has exacted a disastrous toll on the life, health, and economic prospects of the people of Yemen for eight years (World Bank, 2022a). An estimated 377,000 individuals have lost their lives because of direct and indirect effects of the Yemeni conflict (UNDP, 2021). Nearly two-thirds of those killed are children under age five. Since 2019, the United Nations has been referring to Yemen as the world’s worst humanitarian crisis. It is estimated that half of the total died from indirect causes such as the lack of food, healthcare, or infrastructure (UNDP, 2021).

Yemen is divided, with some areas controlled by the Houthis and others controlled by the internationally recognized government (IRG). Yemen spiraled into armed conflict in 2014 when the Houthi forces from northern Yemen took control of the capital city of Sana’a and aimed to advance toward the southern part of the country. However, a coalition of nine countries launched a military campaign in March 2015, pushing the Houthi forces back to the north (World Bank, 2017). Over the past eight years, the Houthi forces have established control over Sana’a while the IRG has been based in both Riyadh and in Aden.

Yemen has 22 governorates, of which Sana’a is the smallest and Hadramout is the largest in geographical size, with governorates further divided into 333 districts. Yemen is situated on the southwestern tip of the Arabian Peninsula and borders Saudi Arabia, Oman, and the shipping lanes of the Red Sea and the Gulf of Aden. The map (Figure 1.1) shows all governorates, key cities such as Sana’a (the most populous city), Aden, and ports such as Hodeida and Al-Mukalla.

The conflict in Yemen has caused a severe economic and humanitarian crisis. Even before conflict escalation in March 2015, Yemen already was one of the poorest countries in the Middle East and North Africa (MENA) region (World Bank, 2022b). Estimates suggest real GDP has roughly halved since the start of the conflict, despite a slight rebound in 2022. Of Yemen’s total population of about 34 million, 28 million are estimated to be affected by the conflict and 23.4 million require aid (ACAPS, 2022b; HNO, 2022). An estimated 17 million individuals suffer from acute food insecurity, and millions of Yemenis have been displaced. Communicable diseases are widespread, and the country faces medicine shortages, basic health and education service disruptions, and destruction to infrastructure (including road networks) (HNO, 2022; World Bank, 2022a).
In addition to these ongoing crises, Yemen faced several other shocks over the years. Figure 1.2 shows key shocks that have compounded the humanitarian emergency in Yemen. These include tightening the air and sea blockade on the Houthi-controlled area, health epidemics such as a cholera outbreak, a currency crisis leading to price inflation, the COVID-19 pandemic, and the global spike in food prices (Favari et al., 2023).

This report aims to present the voices of Yemenis who have now spent eight years living through a civil war, economic crisis, and close to famine. The Yemeni population, living in difficult war conditions for almost a decade, have resorted to innovative but often destructive coping strategies. Despite challenges in collecting data, some numbers and statistics are available. A recent World Bank report, *Surviving in the Times of War*, documents the change in food security since the conflict began (Favari et al., 2023). But these figures can be overwhelming, and people are quick to ignore the small country that seems so far removed from our daily lives. Yet there are many human stories behind the statistics that have not received the attention they deserve. This report documents these voices from Yemen, reflecting suffering, resilience, and hope during the conflict.

This report is the result of four years of qualitative data collection conducted by the World Bank’s Poverty and Equity team. At first, the team used qualitative interviews for background research intending to inform operational work and explain the traditional quantitative analysis. However, after interviewing many community workers, local government officials, households, and NGOs, the team accumulated interviews that uncovered the rich lived experiences of humans behind the statistics.
In addition to interviews conducted over the last four years, we also interviewed new respondents in 2022. Interviews were subsequently coded and analyzed to search for common themes and emerging patterns. The next section summarizes the qualitative methodology. Section 3 reports findings from this work, organized into the themes of food security, basic services (education and health), livelihoods, and displacement. We discuss these findings and draw some conclusions across these themes in section 4.
Methodology

2.1 Conceptual framework

The conceptual framework used for this report—*Voices from Yemen*—defines the immediate effects of conflict on households, markets, and institutions. This report uses the same conceptual framework that guided the quantitative analysis presented in the report *Surviving in the Times of War*, as visually summarized in Figure 2.1 (Favari et al., 2023). The conflict has resulted in a humanitarian crisis, initiating a humanitarian and development response. The mechanisms are not linear but rather interlinked and contribute to each other. The nature of the conflict has also changed over time. In the medium and long term, the conflict’s repercussions on all three channels—households, markets, and institutions—and the humanitarian and development response feed back into the conflict itself.

Figure 2.1: Conceptual framework: Immediate, medium, and long-term impact of conflict
This conceptual framework aided in selecting themes for the qualitative inquiry and organizing findings. The food theme represents a key aspect of conflict and how it negatively impacts households. To represent the impact of conflict on institutions, we looked at two basic services: education, and health. We included the livelihoods theme to indicate the condition of markets, and displacement to represent the humanitarian response. It is important to note that these four themes are interlinked. For example, in discussing food we also must discuss markets and basic services. Section 3 discusses how these themes capture the lived experiences of the conflict on Yemenis.

2.2 Data collection and analysis

The World Bank's Poverty and Equity team conducted 156 in-depth phone interviews1 with households and key informants from October 2019 to December 2022. Household respondents were selected from a previous phone survey that focused on understanding basic services and food. Key informants were selected from various sectors—education, health, and private sector—randomly from contact lists obtained from different public sources or through snowball sampling. The Key Informant Interviews (KIIs) initially started as a process to inform the work of several World Bank sectoral teams, including education, health, and social development. Key informants included health workers, teachers, school principals, private sector enterprises, and district council officials.

Data collection took place in two phases:

• In the first phase from October 2019–November 2021, households, and key informants (health workers, teachers, school principals, officials in education and health offices at the district and governorate level, and members of the local councils) were contacted to discuss the topics of education, food security, and health. These calls were made gradually to capture the realities of lived experiences across several governorates. One of the lead researchers prepared topic guides for the themes of inquiry and collected the data herself.

• The second phase of data collection from November–December 2022 included an intensive phase of phone interviews with households to understand the current situation on a range of topics. These semi-structured interviews used a topic guide that covered topics such as food, employment, displacement, and overall coping strategies. Interviewers were recruited via a third-party data collection agency. The interviewers were given three days of intensive training to familiarize them with the study’s purpose, topic guide, interview techniques, and etiquette. Before making the calls, they were also briefed about the profile of the participants so that the interviewer can build rapport quickly.

All interviews were carried out over phone and were recorded and quality reviewed. As shown in Table 2.1, the interview duration ranged from 15 minutes to 50 minutes. The interviews started by reminding participants about an earlier call they received and seeking their consent for participation. Interviews were conducted in Arabic and directly translated to prepare transcripts. These were quality checked by other team members and the transcripts of interviews conducted by third-party interviewers were quality checked by a native Arabic-speaking lead researcher.

1 We also used qualitative data from a private enterprises survey that included open-ended qualitative questions. The overall study sample included 349 enterprises selected for the formal enterprises including 20 closed business. We analyzed data from 27 private enterprises that have answered the open-ended questions and 19 closed businesses. These are not included in Table 2.1 or in the total interview calculation.
## Table 2.1: Overview of interviews

<table>
<thead>
<tr>
<th>Respondent category</th>
<th>Themes</th>
<th>Number of respondents</th>
<th>Period</th>
<th>Governorates</th>
<th>Method</th>
<th>Mode</th>
<th>Avg. duration</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Households</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household member</td>
<td>Health and food Security</td>
<td>10 (40 calls made)</td>
<td>June 2021</td>
<td>7</td>
<td></td>
<td></td>
<td>20–30 min</td>
</tr>
<tr>
<td>Household member</td>
<td>Education</td>
<td>18 (40 calls made)</td>
<td>October 2019-January 2020</td>
<td>11</td>
<td></td>
<td></td>
<td>20–30 min</td>
</tr>
<tr>
<td>Household member</td>
<td>Vaccine hesitancy</td>
<td>23 (83 calls made)</td>
<td>March 2021</td>
<td>13</td>
<td></td>
<td></td>
<td>15–25 min</td>
</tr>
<tr>
<td>Household member</td>
<td>Food, Employment, Displacement, Overall coping</td>
<td>28 (30 calls made)</td>
<td>November-December 2022</td>
<td>14</td>
<td></td>
<td></td>
<td>15–45 minutes</td>
</tr>
<tr>
<td><strong>Key Informant Interviews</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health practitioners</td>
<td>General Health + Covid19 lockdown</td>
<td>22 (9 general + 13 covid19)</td>
<td>February-December 2020</td>
<td>10</td>
<td>Semi-structured qualitative interview</td>
<td>Phone</td>
<td>40-50 min</td>
</tr>
<tr>
<td>Health practitioners</td>
<td>Vaccine hesitancy</td>
<td>15 (50 calls made)</td>
<td>March 2021</td>
<td>12</td>
<td></td>
<td></td>
<td>15–25 min</td>
</tr>
<tr>
<td>Directors of governorate education offices, principals, and teachers</td>
<td>Education</td>
<td>31 (33 calls, 2 rejected)</td>
<td>October-January 2020</td>
<td>12</td>
<td></td>
<td></td>
<td>30–40 min</td>
</tr>
<tr>
<td>Members from district councils</td>
<td>Local council</td>
<td>9 (15 calls made)</td>
<td>October-November 2021</td>
<td>7</td>
<td></td>
<td></td>
<td>30–40 min</td>
</tr>
</tbody>
</table>

* Gender disaggregation of respondents was not possible for two reasons. Firstly, providing the gender, designation, and governorate names of KIIs could potentially identify female respondents and jeopardize their anonymity. Secondly, in remote interviews with households, only 25 percent of respondents were female because the majority of phone users were male. In such cases, we provided the gender and governorate names of household respondents in respective quotes. We recognize this as one of the limitations of our study and have attempted to include more quotes and perspectives from female respondents when possible.
Interviewers briefed all participants about the study purpose, voluntary participation, anonymity clauses, and audio recording procedures. In the first data collection phase, phone calls made by the lead researcher explored leads and stories with the participants’ consent with no compensation offered to participants. For the second phase of interviews using a third-party agency, a nominal compensation of US$5 (paid in Yemeni Riyal (YR)) was provided to participants. All anonymized interview recordings and transcripts are stored in password-protected folders and shared only among three researchers. The third-party agency also follows the security procedures and will wipe out the folders, per their contractual obligations.

The researchers conducted a thematic analysis to analyze the data. The transcripts were read several times for data familiarity and to identify patterns in meaning to derive themes and sub-themes. The transcripts were coded using the qualitative software Dedoose. Codes were developed and revised for each theme and informed the writing of detailed thematic memos and thematic summaries to derive the main findings.

### 2.3 Limitations

Qualitative data has some limitations. Qualitative data does not claim to represent the population at large. Instead, it aims to provide rich and nuanced lived experiences, thoughts, and viewpoints. It also helps the reader understand context, provides insightful explanations to understand a phenomenon, or further explain quantitative findings, or guide future lines of inquiry.

With this in mind, we consider several further limitations below:

- **The study findings could be biased toward the population that owns a mobile phone.** Although mobile phone penetration in Yemen was 85 percent of households prior to the war, this study did not reach out people without mobile phones, likely living in worse-off circumstances.

- **The study findings might not fully address women’s perspectives.** Interviewing one member of the household by phone, in most cases men, meant that the interviewers needed to explicitly ask about the experiences of women in the household.

- **Phone interviews conducted at different times, and pre-pandemic, might not fully illustrate current conditions.** Conducting interviews remotely during an active conflict was a huge challenge. Phone network connectivity issues persisted through data collection phases, meaning interviewers sometimes had to call respondents back at a later time. Across themes, some present the realities pre COVID-19 and some more recent. For example, findings on basic services—education and health—capture mainly the period from October 2019 to January 2020. COVID-19 likely worsened the situation. To portray a holistic, evolving story of food insecurity and coping strategies, we stitched together participant viewpoints from October 2019 to January 2020, June 2021, and November to December 2022. This report aims to document the stories of Yemenis surviving through the conflict, recognizing that the context is fluid, and the situation could already be different for some respondents today.

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2 Authors’ calculations using the 2014 Household Budget Survey.
Findings

We organize and present findings in four main sections:

- **Section 3.1 discusses food as a key theme**, especially insecurity and coping strategies associated with it, as it directly captured the impact of conflict on people’s lives. It also complements this theme of inquiry in the quantitative report *Surviving in the Times of War*.

- **Section 3.2 describes how the conflict and resulting humanitarian actions have affected institutions**, presenting perspectives on two basic services—education and health—from the viewpoints of households (users of the services) and key informant (providers of the services).

- **Section 3.3 presents perspectives of Yemenis with wage employment and owners of private enterprises**, specifically exploring their livelihood opportunities and challenges to capture conflict effects on markets, food, and basic services.

- **Section 3.4 aims to capture the voices of internally displaced persons**—one of the most common, devastating repercussions of conflict—to highlight their displacement journeys and challenges endured.

### 3.1 Food

Most global indicators on hunger and food security portray a gloomy picture of the situation in Yemen (Favari et al., 2023; UNDP, 2021; World Bank, 2017). Since the conflict escalated in 2015, Yemen has been in an ongoing food emergency often bordering famine circumstances (IPC, 2015, 2017, 2018, 2020, 2022). The *Surviving in the Times of War* report demonstrated that households struggled both to earn a living and to afford food and basic services even before the conflict escalated (Favari et al., 2023). It also showed the disaggregated patterns of acute food insecurity households experienced based on geography, displacement, and income status. Results from a recent *World Bank Phone Survey* found that approximately 25 percent of Yemeni households have poor food consumption scores, and another 25 percent have *borderline* food consumption scores (World Bank, 2023).
Qualitative inquiries also strongly reflected this painful reality of hunger and food insecurity. A range of households at all three different periods—October 2019 to January 2020, June 2021, and November to December 2022—from different governorates described food insecure situations. Almost all interviewed households described a daily struggle to meet basic dietary needs, expressed anxieties about living in a food insecure situation, and described coping strategies to survive day-to-day life. Interviews show that most households have been cutting down on the quantity and quality of food and rely on a less diverse food basket. Some also openly talked about instances when they stayed hungry.

A quote from a male respondent who now lives in Al Mahwit illustrates the realities of hunger and the need to prioritize giving food to children while parents skipped meals:

“Yes, sometimes we sleep with no dinner. My wife and I, no one knows what we eat or what we don’t. Sometimes when I have some money for dinner, my wife tells me that the kids need milk, so I buy them milk and we sleep without having dinner. The kids are more important.”

Another quote from a female respondent from Al Baydha recollected that at times she could not even provide food for her children.

“It has been so hard for the last five years. Most days, we remain without food. I cannot make food for my children.”

Despite describing daily, deep struggles, many respondents expressed gratitude. They completed their sentences with “Alhamdulillah (we trust God),” and their voices reflected mixed emotions of frustration and desperation along with pride and gratitude for what is left in their lives. A quote from a male respondent from Al- Hudaydah illuminates the struggle and the attitudes:

“Khaliha ala Allah ['leave it for God”, a phrase used to indicate a problem but reluctant to tell details]. We live day by day, I barely manage to ensure a meal at a time, and I don’t know if I can secure another meal. It all depends on if I get work to do that day or not.”

Unaffordability due to price inflation is a key barrier to daily food consumption. Although some households mentioned the lack of regular availability of some food items, such as fresh fruits and vegetables, food affordability remains the key issue. Food prices steeply increased beyond what Yemenis can afford on their incomes. Even juggling multiple jobs, most respondents believed they could not afford the food basket they bought before the conflict. A male respondent from Abyan explains how income is not enough to buy more costly food.
Sometimes I work for 1,000YR\(^3\), so I buy vegetables and potatoes for 500YR. Some other days, we get nothing. The situation is very difficult.

A few other quotes that elaborate on food unaffordability due to inflation are included in Figure 3.1.

**Figure 3.1: Perspectives on the unaffordability due to inflation**

In 2014, food was cheaper, but now prices are very expensive. One egg is for 100YR now. In 2014, we used to buy 10 eggs for 100YR. Things were much better before. Prices are very high today. Prices in Yemen are so high due to the economy.

*A female from Hajjah*

1kg of meat is 15,000YR. We’re more than 10 of us in the house, so 1 and 2kg of meat is not enough. We can’t afford 30,000 for meat. Sometimes we buy chicken and fish. One chicken is for 8,000YR.

*A male from Al Mahwit*

We were living well. After the war, everything became much more expensive. Even if you still have the same income, you can’t live with the new prices. The whole wheat flour was 1,000 but now it’s for 19,000-25,000 (old riyal)

*A female from Al Baidha*

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\(^3\) The exchange rate of Yemeni Riyal (YR) fluctuated drastically over the years. It moved from approximately YR 610:US$1 in 2020, to a peak of YR 1,700:US$1 by December 2021, in Houthi-controlled areas. During the first months of 2022 it was around 1,100:US$1. The currency in the Houthi-controlled areas remained relatively stable, around YR 600:US$1.
This report, together with *Surviving in the Times of War*, presents a coherent picture of the depth of unaffordability households experience and its macroeconomic underpinnings. This report only presents respondents’ lived experiences of unaffordability of food items due to inflation. The *Surviving in the Times of War* report describes the reasons for inflation—a set of interlinked factors directly or indirectly a result of the conflict. These include conflict-related partial restrictions on imports that have affected logistics (for instance, increasing transportation costs), and repeated macroeconomic crises, such as fuel price hikes, the currency crisis, differential taxation between the north and the south, and global food price hikes.

**Diversity of food consumption before and after the war has deteriorated.** Most households perceived that food was available and affordable before the conflict compared to their current reality. A few respondents believed that they ate less than half than before the conflict. Whereas before the conflict they commonly ate poultry, meat, fish, flour, fruits, and vegetables, since the conflict households have reduced consumption of chicken, and meat (only once or twice per year), fruits, and most vegetables. Households seem to survive with bread, rice, beans, potatoes, and onions. They occasionally eat tomatoes and a few other vegetables. At least a meal or two a day for adults is just bread and tea, often without sugar and milk. A male respondent from Al Mahwit describes the situation before and now, giving a glimpse of the extent to which their food basket has reduced in the past seven years:

“We used to eat meat, fish, and fruits weekly. We don’t get this anymore. We used to buy tuna, yogurt, and such. That was before the conflict. We also used to make pizza, cake, and such. All people are affected by the conflicts now; not only me. Now we barely have tea and bread.”
Yemeni households often resort to destructive coping strategies to survive day-to-day. Most of the interviewed households felt anxious about their food insecurity and had to rely on borrowing from shopkeepers or family or friends. Some accumulated debts from borrowing to cover food expenditures. For some living in joint families, if one male member did not work, his father or brothers helped to cover food costs and he reciprocated once paid. A few also reported sometimes receiving food aid from organizations. The below quote from a male respondent from Hadramout illustrates the stress around food and how Yemenis cope when having multiple pressing needs for money:

“Yes, daily because the salary I get barely makes ends meet, we have house rent to pay and other expenditures when someone gets sick, and most importantly, food. So, I always worry about food availability. My son once got sick, and I had to pay for everything. I had to buy the medicine and got no money left for groceries or the basics, so I searched for a job for days, and then I had to borrow money.”

Interviews suggest several common ways Yemenis cope to survive. As mentioned, most households interviewed have reduced the quantity, frequency of meals, and types of food they eat. For example, some respondents mentioned that food items such as fruits or special vegetables are bought every other week or month, depending on income and prices. They also prioritize children if food availability is low. Most households have also moved from gas to firewood for cooking. Considering women are mainly responsible for cooking at home in most interviewed households, the switch from gas to firewood has increased the burden on women in urban areas. A female teacher from Sana’a who lives in an urban area illustrates how they cope despite the challenges:

“We stopped buying fruits for example. I stopped making bread at home because it uses more cooking gas while there is a shortage of gas. We buy bread from outside. We sometimes had to cook using traditional tandoor using wood, but wood increased in price in the city. I have my family in the village who would send me wood from the village. My neighbors and I used to cooperate in providing wood and cooking food together in one place to save on wood.”

The conflict has directly and indirectly decreased the availability and affordability of food, and unfortunately humanitarian aid did not emerge as a strong mediating factor in the interviews. These perspectives underline the pathways the conceptual framework in section 2 suggests. Food insecurity is a key day-to-day concern that Yemeni households endure. It is also crucial to note that, as envisaged by the conceptual framework, conflict effects on food are not linear. Availability and affordability of food for households are affected by markets and institutions (through repeated macroeconomic shocks). Perhaps due to the small scale of this study, interviews did not often mention that they had significantly accessed humanitarian food aid. However, the World Bank Phone Survey results do not show aid as being the main source of income for households (World Bank, 2023). Despite the context, wages from labor were reported as the most significant source of income (livelihood options are further explored in section 3.3).

To conclude, most interviews said that the food security situation in Yemen had deteriorated and described a dire hunger crisis. Unaffordability due to skyrocketing food prices has forced Yemenis to drastically reduce food consumption and face hunger and starvation. Yemenis endure this struggling situation with various, often destructive, coping strategies. Severe food insecurity has longer-term consequences especially for children, causing malnutrition and developmental delays, undermining the country’s future human capital, peace prospects, and path to recovery.
3.2 Basic services: Education and Health

3.2.1 Education

Interviews with households, school principals, and senior governorate-level officers illustrate a grim education picture, especially on educational quality, enrollment, and student dropout rates in public schools across Yemen. The Surviving in the Times of War report showed that 18 percent of households had at least one school-aged child who did not attend school in the past 30 days (Favari et al., 2023). The report also highlighted that high-quality education is an issue in Yemen and households face major difficulties sending their children to school. Figure 3.2 maps the range of supply side problems facing Yemen’s primary schools.4

Figure 3.2: Problems with availability of education in Yemen

Source: Favari et al., 2023; Most frequently reported problems estimated from a local government survey conducted from May-November 2019. Note: The boundaries, colors, denominations and any other information shown on this map do not imply, on the part of The World Bank Group, any judgement on the legal status of any territory, or any endorsement or acceptance of such boundaries.

Many schools closed due to conflict-related factors. All respondents believed that the quality of education worsened drastically across governorates. Most schools operated on an emergency schedule, which resulted in part-time classes and often non-continuous lessons. Many respondents also stated that children needed intensive follow-up at home as they could not rely on the quality of teaching at school. One parent from Al Bayda who works as a daily wage laborer complained that:

“My son is in 6th grade and cannot read a page in Quran.”

4 Other problems listed as the third category in the map include the lack of availability of teachers, the lack of quality of teachers, the lack of functioning schools, the reluctance of parents to send girls to schools, teacher absenteeism, the lack of security, and parents not appreciating the value of education.
A father of two from Amanat Al Asimah said:

“I follow up on their education at home. I cannot rely on school education.”

Schools, especially high schools and schools in remote areas, have had many children drop out of school. This was commonly a result of having to work to support families or due to social norms in the case of girls. Many families send one or two of several children to school as they cannot afford to send them all, or the school is far away for younger children. For example, a parent from Sana’a said:

“[…] The school is far away, that is why we are sending one and keeping two at home. We cannot afford transportation and school supplies for three of them.”
A multitude of reasons exists for the perceived worsening of the quality of education. Key reasons cited by the respondents are lack of teacher availability, overcrowded classrooms, shortage of printed textbooks, and infrastructure limitations.

Firstly, teacher shortages are worsening. Respondents believed that the unavailability and low performance of teachers contributed to the low quality of education. The discontinuation of teachers’ salaries in Houthi-controlled areas and erratic salary payments in IRG areas forced teachers to either quit or find additional livelihood options to supplement income. Public hiring has been frozen since 2012, contributing to persistent decline in number of teachers every year either, in addition to retirement or other reasons (sickness, displacement, and death).

To mitigate the severe shortage of qualified teachers, schools resorted to using volunteers. Finding teachers seems hardest in rural and remote areas. Volunteers were often high school graduates (mostly women) working voluntarily or for lower wages. Commuting to a rural area is a challenge for volunteers, who spend a high share of their wages on transportation. While often not trained or qualified, these volunteers tried to help by offering lessons, but most respondents perceived that it worsened teaching quality. Lack of qualified and specialized teachers is one reason why schools combined classes, contributing to overcrowding and further decreasing education quality. A school principal from Al Hudaydah described the situation:

“Teachers’ performance got worse because they need to find other sources of income, 3000 teachers have left their jobs. Volunteers are covering the gap.”

A quote from another parent from Amanat Al Asimah summarized the issue:

“Teaching quality is so low, replaced by volunteers who are not qualified.”

Secondly, lack of textbooks affected the quality of education. Students across governorates suffered a shortage of books, except for grades 1-3 in IRG areas. In Houthi-controlled regions, schools did not have textbooks for any grades except for a few prints that were distributed to teachers who relied on writing on boards for students to copy. To cope, schools collected old textbooks from previous years and redistributed them to students. Also, students tend to rotate textbooks or share within a group of five to 15. In urban areas, some families who could afford it resorted to making photocopies. In rural areas even photocopying is challenging due to the lack of facilities or even electricity. In Amanat Alasimah, one principal said that he sometimes approached parents whom he thought could pay and asked them to make extra copies for other students. He also said private schools would collaborate and photocopy extra copies to distribute in public schools.

Thirdly, most schools face many infrastructure challenges. These include deplorable conditions of school buildings; lack of basic needs such as water, restroom facility, and electricity; and lack of labs or computers, thus harming educational quality. Most respondents stated that the overall condition of school buildings was deplorable—with

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5 Some IRG areas use local revenues to contracts volunteer teachers with pay, but the Houthi-controlled areas do not offer money to volunteers.
buildings either destroyed or lacking regular maintenance—to the point of exposing students to extreme risks. None of the schools interviewed had sufficient furniture, and often children would sit on the floor, posing severe challenges in winter as young students found it difficult to sit on cold tiles. The availability of functional space within existing buildings is challenging. For example, a respondent from Hajjah said that their school consisted of six classrooms and had around 1000 students of all grades (1st -12th). Quotes in Figure 3.3 further highlight the challenges faced by schools.

Another official from Lahj describes an unfortunate incident due to the infrastructure limitations:

…”We have 59 schools [in the governorate] for basic education [elementary], some of them are not buildings but some cottages made of tree leaves and mud. We just had a recent incident of a ceiling falling over the students’ heads.

Finally, functioning school classrooms are overcrowded. Overcrowding was also a contributing factor respondents perceived to decrease educational quality. In some cases, this was due to the increase in enrollment to accommodate children from internally displaced families. In other cases, schools coped with the multitude of daily challenges by merging classes.

Overcrowding and dropout are perceived to occur in the same classroom. Although interviewed schools were witnessing overcrowding in classrooms, this did not suggest an increase in enrollment; respondents believed that there was a decrease in school enrollment. A few perceived two common barriers to enrollment and regular attendance that caused dropout: (i) deterioration of household income, and (ii) distance to schools and lack of transport options.

All interviewed households experienced income deterioration. This made it impossible to pay school fees, forced older children to seek work to supplement family income, and decreased resources to meet children’s nutritional needs. To cope with funding cuts, schools—especially in Houthi-controlled areas—instituted a fee of approximately 1,000 to 2,000YR$ per month. Although school officials said it was voluntary, some parents said it was compulsory. Most parents found it hard to pay the fees and had to either stop sending children or sent only one child. A quote from a mother from Amran elaborates on the situation:

…”My older son doesn’t go regularly to school because schools impose fees of YR1,000 monthly for teachers since there are no salaries. The school is a 1-hour walk from the house and sometimes, my son ends up staying outside the school because they didn’t allow him in for not paying the fee... […] Teachers sometimes hit my son because he didn’t bring the fee and their teaching is of low quality.

6, 7 The exchange rate of Yemeni Riyal (YR) fluctuated drastically over the years. It moved from approximately YR 610:US$1 in 2020, to a peak of YR 1,700:US$1 by December 2021, in IRG-controlled areas. During the first months of 2022 it was around 1,100:US$1. The currency in the Houthi-controlled areas remained relatively stable, around YR 600:US$1.
Some students drop out to try to earn income. Some interviews mentioned that a sizeable number of students were not attending school regularly so they could find sources of income to support their families. In Sana’a and Al Hodeidah, principals expressed their concerns about students who usually attended two to three days per week or did not attend for a while (seven to 10 days) to work (see Figure 3.3).

Some former students join armed groups. Although interviewers did not probe the participation of students joining armed groups, in Lahj, respondents raised this issue as a key factor for many students and teachers dropping out of school. Other reports exist of children and adolescents joining different armed groups, often under coercion, across the country (UN SC, 2019). Joining fighting groups guarantees better pay, especially if included in the armed group payroll. Some principals also raised concerns about returnees from fighting groups influencing peers. This perhaps represents one pathway through which lack of institutional provision of a basic education service feeds back into the conflict.

Distance from schools is a major problem. The majority of interviewees noted that most students walked to schools and the distance from the farthest houses assigned to the school was two to three kilometres. The irregularity of teaching sessions, furthermore, made it not worthwhile to make a long trip to the school daily.
Conflict is especially keeping girls from accessing schools in some areas. However, in urban areas, respondents perceived that the girls’ attendance did not drop as much as for boys. However, in rural areas, the reasons that impeded girls’ attendance even before 2015 have worsened. These include lack of parental motivation to educate girls beyond basic literacy, absence of female teachers, lack of basic facilities such as toilets in schools, distance to school, and early marriages. A female school principal from Alturbah- Ibb elaborated on the increased dropout rate for girls versus boys:

“Boys drop out is much higher than girls. There were not many dropouts in my school. But in higher grades like 7th- 8th, girls usually don’t continue due to early marriage that interrupts their education.”

A school principal in Sana’a said:

“Girls attend elementary grades, after the 3rd grade, the girls’ attendance starts gradually declining. It is because of the school conditions, lack of class furniture, and lack of female teachers. It is culturally improper for girls to sit on the floor with boys.”

A few international and community-led initiatives support Yemen’s education sector; however, they were not regular enough nor helped at large enough scale to mitigate the many day-to-day hardships schools and families face. The interviews also probed any facilitating factors during the crisis that helped to alleviate some of the above-discussed issues. Most of the local community-led initiatives to support schools were individual initiatives and were not systematic or sustainable except in areas that receive significant remittances from abroad. These initiatives included supporting the printing and photocopying of books, building construction and maintenance, contribution to teachers’ salaries and accommodation, and food baskets. UNICEF incentives of a one-time US$50 payment for teachers have also reached most schools interviewed. One humanitarian intervention respondents repeatedly mentioned was the provision of fortified, high-energy biscuits supplied by the World Food Programme (WFP) in schools. One school principal from Hajjah shared an incident that made him emotional even recalling it. After asking a student why he pocketed one of the biscuits, the young boy responded, “I want to keep it and share it with my father”.

These findings reiterate the interconnected relationship between conflict, households, markets, institutions, and the humanitarian response. Factors that have decreased the quality of education are conflict-induced. In turn, the prolonged absence of quality education could feed back into the conflict by decreasing Yemen’s human capital development.

To conclude, most respondents perceived that the last eight years of conflict have worsened the quality of education and led to student dropouts. A few key reasons for the perceived deterioration of quality and dropout are lack of teacher availability, shortage of printed textbooks, infrastructure limitations, overcrowded classrooms, deterioration of household income, distance to schools, and lack of transport options.
3.2.2 Health

Over the last decade of conflict, health service delivery in Yemen, especially by the public sector, deteriorated. Conflict accelerated deterioration in access and quality of public services, causing human resource and supply shortages (World Bank, 2021, 2022a). Outbreaks such as cholera, malaria, chikungunya, and dengue, along with COVID-19, in a highly food-insecure country further strained an already broken health system (WHO, 2022). The Surviving in the Times of War report showed that about 35 percent of households that required medical care were not able to receive sufficient health care. Figure 3.4 presents a map of supply side problems facing healthcare facilities (Favari et al., 2023).8

Most respondents only sought health services in case of severe symptoms or emergency. In-depth interviews reported that to access health services many turned to the private sector or paid a fee at public facilities for diagnostic services and essential medical supplies and medicines. Most interviewed households believed that both options were unaffordable, hence most respondents only sought health services for perceived emergencies.

Respondents perceive lack of health professionals and severe infrastructure and supply shortages as reasons for decline in access and quality of health services. In-depth interviews with health practitioners highlighted severe shortages of human resources and supplies at local and regional health facilities. Across Yemen, health professionals’ salaries (doctors, nurses, and other allied staff) were either suspended or drastically reduced. In IRG areas, professionals received a small salary, barely enough to meet monthly expenses. Some respondents noted that with suspended salaries, health professionals coped by seeking employment in private or humanitarian sectors, leading to limited staffing in existing facilities. Most doctors interviewed had multiple jobs between public and private facilities to make ends meet. A doctor who works in both public and private hospitals in the capital city elaborated on challenges faced by hospitals (see Figure 3.5).

Figure 3.4: Problems with availability of healthcare in Yemen

Source: Favari et al., 2023; Most frequently reported problems estimated from a local government survey conducted from May-November 2019. Note: The boundaries, colors, denominations and any other information shown on this map do not imply, on the part of The World Bank Group, any judgement on the legal status of any territory, or any endorsement or acceptance of such boundaries.

8 Other problems listed as the third category in the map include the lack of functioning medical centers, the unaffordability of medical services, the nearest medical facility being too far away, the lack of nurses, and the lack of security.
Most interviewed doctors said that young doctors quit medical practice to join international non-government organizations (INGOs). In many cases, they left for administrative and operational jobs in health projects for better pay and benefits. A medical school intern in Amanat Alasimah said:

“All my friends graduated and found jobs in INGOs working in humanitarian aid. I don’t want to take their route; I want to practice medicine. I am just looking for a good residency program in public or private hospitals.”

Doctor migration is also perceived as another reason for the shortage. Many who have degrees from certified boards migrated in search of better opportunities in neighboring countries. A doctor who works at a public cancer center and a medical school said:

“Many of my colleagues, especially those who have the “Arabic board” have found jobs in Gulf countries immediately. Few of us remained. You would barely find good doctors now. The good ones were all offered jobs elsewhere.”

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9 The exchange rate of Yemeni Riyal (YR) fluctuated drastically over the years. It moved from approximately YR 610:US$1 in 2020, to a peak of YR 1,700:US$1 by December 2021, in IRG-controlled areas. During the first months of 2022 it was around 1,100:US$1. The currency in the Houthis-controlled areas remained relatively stable, around YR 600:US$1.
Interviewed health professionals echoed that health facilities struggle to have adequate beds or diagnosis and treatment equipment, such as CT scan units, dialysis units, and MRI scan units. They also suffered severe shortages including essential drugs and lab work supplies. In addition, the interviewed health facilities faced basic constraints such as interrupted water and electricity supply. Most interviewed doctors also observed a rise in disease outbreaks—cholera, dengue, chikungunya—chronic diseases—such as cancer and tumors—and mental health-related issues. Most patients came into hospitals with severe symptoms beyond rescue. A gynecologist from Sana’a elaborated on these issues:

“Devices and machines have to be maintained. If a device or machine is broken, we don’t have any replacement. There is a need for more essential drugs for each department. Fuel for power, we need to at least be assured that the electricity is not going to be interrupted while in operation. [...] Mortality and morbidity are going high. When we make our staff meetings and discuss the mortality cases, what used to be a major case that shook us are now normal cases of death [...] Complications are way worse. The patients arrive at the hospital too late to be able to manage their complications, adding to that our already limited availability of medicines, equipment, devices, and nurses. In the operation room, we stay tense and nervous about any power outage in the middle of the surgery.”
Interviewed health professionals mentioned that public facilities needed to seek a small fee. To cope, facilities needed to charge a small fee for diagnostic services and essential medical supplies, such as cotton and IV fluids. Patients also needed to purchase medicines from outside the health facilities. The support from the INGOs for some facilities seemed to meet basic operational needs such as electricity or running water in the facility. A manager of a health centre in Al Hudaydah Governorate said:

“We used to offer services and medicine for free. Now we have to charge the patients and write them a prescription to buy medicine from pharmacies. People stopped coming, and they shy away. They can't afford all that, given that commuting here will also cost them a lot. It is even a hardship for staff who spend half of their salaries on transportation.”

Household perspectives underscore unaffordability as a key barrier to accessing healthcare. Interviews with households corroborated the observation about seeking health services in a worst-case scenario. Household respondents reported that unaffordability was the main barrier to accessing health care. Due to the loss of livelihoods and increased food and fuel prices, most households reported not prioritizing seeking health services. A female former teacher from Sana’a elaborated:

“We only go if it is absolutely necessary. We don’t go for light symptoms. We wait until it is really serious. I am pregnant now and when the doctor writes me prescriptions for vitamins and medicines, I don’t buy all of them. I only buy what I can.”

Yemenis living in both urban and rural areas have trouble accessing health services. In urban areas, health services were available, but access was hampered due to unaffordable medical expenses. In rural areas, due to the lack of nearby facilities with doctors, transport costs further worsened affordability and hence access to health services. Seeking health services only when severe symptoms appear seems to be a main coping mechanism. A male respondent from Alldali discussed the accessibility issue:

“We don’t seek medical services unless it is an emergency [...] If we have urgent medical expenses, it certainly affects our budget for other basic needs. The health centers around us have basic medicine. We have to travel to cities if we need doctors. Transportation is a major obstacle. Transportation is more expensive than medicine.”
High out-of-pocket expenditure for health emergencies represents a main shock for household finances. This leads them into debt which they often cannot repay. An internally displaced male respondent reported:

“If someone gets sick in the house, we simply do nothing unless we get a loan, or someone donates to cover treatment expenses.”

International health sector support needs a more sustainable effort. Health professionals interviewed also mentioned that support from international organizations in supplying free medicines, setting up health facilities and treatment units varied. However, a few perceived that the efforts lacked coordination with existing health facilities and that sustainability of these efforts was questionable. The quote from a male doctor elaborates on the unsustainable humanitarian response influencing basic health service provision and quality of care:

“We are working with [Name of the Organization] in identifying the centers that have no support from other INGOs to avoid overlapping and supporting centers that are already supported by others. In general, we notice there is no capacity or institutional building for these facilities so once the support stops, the facility shuts down.”

In conclusion, most respondents highlight severe deterioration in access and quality of healthcare in Yemen. Several supply-side challenges still exist and put a risk on sustainable quality service delivery. Unaffordability and inaccessibility are two critical hindrances household respondents face. In most cases, health-related shocks force families into a vicious cycle of debt. The findings also highlight pathways through which conflict-induced humanitarian responses influence basic health service provision and quality of care.

3.3 Livelihoods

We captured voices from Yemen on the ways the conflict directly and indirectly affects markets. This section presents perspectives of Yemenis with wage employment or who own private enterprises, specifically exploring their livelihood opportunities and challenges. Further, this section focuses on the perspectives from owners of businesses that have closed to understand challenges that led to their closure.

Labor conditions in Yemen are difficult. The Surviving in the Times of War report highlighted that labor conditions in Yemen were less than ideal even before conflict escalation (Favari et al., 2023). The report also suggested strong-gender differentiated effects on employment, including related to the movement of women, especially in Houthi-controlled areas. A recent World Bank Phone Survey found that most households (84 percent) had at least one member aged 15 or above working the month before the survey (World Bank, 2023). While most respondents or main income earners (69 percent) worked the week before the survey, the work remains precarious; around 46 percent of workers are in elementary-occupations and only 33 of workers have a permanent job. The labor market is dominated by wage workers, accounting for 67 percent of the workforce.
Livelihood options are volatile and inadequate. Most qualitative interview respondents were either in wage employment, owners of small-scale private enterprises, or actively looking for opportunities. They were working as teachers, manual laborers, farm laborers, shop assistants, vegetable sellers, among other occupations. Their employment was volatile as they were not sure about finding employment the next day. Some also shared that they lost their jobs due to internal displacement, discontinuation of the establishment, or a personal health situation. Some also mentioned that livelihood options depended on geographical locations (see Figure 3.6).

Figure 3.6: Perspective on the volatility of employment

“My job is tiring. Sometimes I get work to do, and other times I don’t… I carry rocks and cement… We just work with anyone who needs us. I’ve been working with this since 2011… Sometimes there’s a job for a week, and sometimes there’s no job. I ask people that I know [for a job]. Whoever has a job, calls me to go and work. The challenge is when there’s no work and no one to work with… Yes, I’m working this week… We moved out [from Sana’a] in 2011. Life is no longer the same as it was before. I used to work as a contractor at an administrative place [in Sana’a]. Then the conflicts started, and we had to move out. There’s no job there.”

A male from Raymah

The inadequacy of one-wage employment is a critical theme that emerged in interviews. All respondents said that one job was not enough to meet their needs, hence they are in constant search of secondary employment or supplementary income opportunities. A few also mentioned that they had to move from specialized professions to casual labor or supplement a low-paid specialized job with casual labor. A male from Al Mahwit who used to be a pharmacist elaborates on the volatility and inadequacy of his wage employment:
There’s a major change, but we can’t do anything about this. I used to work with a pharmacist for 7,000-8,000YR a month, but it’s not enough when you’re married with kids. That’s why I was looking for another job. My job [now] is terrible. I’m staying at home most of the time, but I might get some work once or twice a week to get 2,000YR at noon and 2,000YR in the afternoon. My siblings and I are all married, and everyone helps with whatever he has. We live in the same house, so we share everything. If there’s work to do, I go in the morning. I come back home for the lunch break, then go back to work until Maghrib (evening prayer time). If there’s no work, I stay at home. It might take weeks or even a month. When I get money, I pay, and when my brother gets money, he pays.

A male from Hadramout illustrates how and why he juggles two jobs despite physical exhaustion:

I kept searching until I found two odd jobs….We try to make ends meet. [I] work in a factory and sometimes I work in odd jobs after I finish work in the factory. [I do] anything available such as selling vegetables…The main job in the factory starts in the morning and ends afternoon and then I work odd jobs afterward and on Friday, I rest and don’t work. ....To make ends meet because the house rental cost is high and the cost of living in terms of food and other things is also high. [I feel]...physical exhaustion [due to] long working hours carrying items.

A male machinery workshop owner recollected how the infrastructure challenges due to the conflict affected his operating costs.

The power outage and our dependence on the government electricity line, the lack of oil derivatives, including diesel for the electric generator and its high price, in addition to inflation and the cost of living which led to a rise in workers’ wages and an increase in other operating expenses.

Some also faced business-specific challenges such as litigation with partners, facility owners taking longer than usual due to the conflict, changing demand for the product, and accumulation of debts.

Of the seven female respondents interviewed, some worked in small-scale tailoring part time to support family income and emphasized the social norm that prevents them from working outside the home. Most male respondents mentioned that their wives did not have wage employment due to the social norm of women not being allowed to work outside their area or lack of education. A few respondents said they were supporting their wives to continue their education to gain a livelihood option later. A female respondent from Hajjah elaborated on the challenges women face to find livelihood options outside their homes.

10 The exchange rate of Yemeni Riyal (YR) fluctuated drastically over the years. It moved from approximately YR 610:US$1 in 2020, to a peak of YR 1,700:US$1 by December 2021, in IRG-controlled areas. During the first months of 2022 it was around 1,100:US$1. The currency in the Houthi-controlled areas remained relatively stable, around YR 600:US$1.
I sometimes do some needlework. I work at home; cleaning, cooking, and organizing... Now, only if someone wants to sew anything, they get it to me. I fix and sew clothes. I don’t work anything outside my house because, in our town, women aren’t allowed to work outside. I’m trying to find a source of income, but there’s nothing. All the people are devastated. We’re not allowed to go outside. It depends on the area we’re living in, and we’re not living in a cultured [urban, civilized] area. Women aren’t allowed to go outside to the streets. Women aren’t allowed to go to work or to go shopping in the market. They are only allowed to go to occasions like weddings or to visit someone sick; only to another house. Here, they consider it improper for women to go out.

We also had some interview information from closed business owners. While following up with businesses surveyed in 2010 and 2017 as part of a World Bank private sector assessment, the World Bank’s Poverty and Equity team found that many businesses were no longer operating. To investigate further, the team worked with a local partner to conduct 19 face-to-face interviews with owners or managers of 19 closed businesses in Yemen to understand the reasons that led to closure. The closed businesses were in the main economic centers, and the majority of them were from Al Hodeidah and Amanat Al Asimah. Only three were from rural areas. All respondents were male, and they were either the facility owner, manager, or sales manager. The type of closed businesses interviewed varied from wholesale and retail businesses that traded a wide range of items such as food, building materials, medicines, cars, scrap, and services such as transport, customs clearance, and labor. Most businesses were small (between one and 19 employees) and had sole ownership. Only two businesses—a fish import and export company with ice brick production, and a commercial store that sold building materials—had additional branches.

Conflict played a role in closing businesses. Although the exact dates of closure are not available, it is crucial to note that most of the businesses closed after 2015—the year in which the conflict escalated—and the rest closed between 2012 and 2015. The businesses faced multiple challenges, and, in a few cases, these challenges also led to bankruptcy. Although some businesses had internal management challenges, for all of them, direct or indirect conflict-induced challenges caused the business closure. Main reasons for closure were high inflation, cost of clearing customs, decrease in demand for the product, currency exchange instability, high fuel prices and accessibility challenges, and lack of credit/loan services. Some conflict-specific challenges included closure of the Al-Hudaydah port and the road blockade between governorates. In addition, due to the conflict, working hours per day were limited and made it difficult to manage a business. One of the businesses that sold automobile spare parts recollected:

“Yemen being under the UN Chapter VII led to a rise in the price of shipping and obstruction of supplies and caused me problems with customers and suppliers, and to this day we are in the courts [with customers and suppliers].”

Small businesses faced additional vulnerabilities. Another closed business that ran a small rental car business discussed how small businesses are squeezed out by larger firms. The emergence of a humanitarian response resulting in the presence of international organizations also seemed to have created a change in demand, especially in the service sector. This is also an example of how small firms can be left behind, potentially leading to monopoly.
At the beginning of the work, the process of renting cars to citizens was easy and smooth, but then there were many problems and obstacles due to the citizens’ inability to rent cars, as currently car rental is only through services requested by organizations, companies or large institutions at the level of the transport sector and the facility only has 8-9 cars, but the competing companies have 300-400. Also, organizations exaggerate guarantees, as they are looking for a respectable building, a high budget, and a large fleet of 80-90 cars, and in the past, the organizations often contract with several companies, but now it is through tenders, and there is price competition, especially in large companies. There are also other reasons for closing the facility, which are the high costs of transportation, fuel, spare parts, labor costs, and insurance companies, which are now imposing high insurance premiums.
A concrete mixing business owner explained how his business failed.

“There are no solutions, first of all, because in 2015 we got into problems with the people in the [Name of the area] over the land on which the facility resides, and we solved the issue and started work at the end of 2017, and then the aerial bombardment happened, and our equipment was affected, and we stopped work. The brothers got into problems and now we want out, and we no longer thought of finding solutions to save the facility.”

The conflict, and the humanitarian response, have changed the nature of the local economy and demand, making it difficult for small businesses. These findings further underscore the pathways in which the conflict and the humanitarian response associated with it influence the market and create new market conditions that feed back into the conflict. Few closed businesses managed to adapt to a new “war economy”. Of the 19 closed businesses, only three resumed after closure, but only after they changed location or type of product. Two started afresh in new locations—the one that traded scrap in wholesale had to reduce scope, and a car sales business restarted as an ice block production business due to high demand for the product. A third business resumed in the same location but revamped from being a fish import-export and ice factory to a mineral water and ice factory. As expected, businesses laid off their workers, and, in some cases, these workers were displaced. According to respondents, these workers went on to find other jobs, but a few are still unemployed.

Respondents suggested a range of recommendations for support that could have helped businesses sustain themselves. They ranged from ensuring political stability and security in the country, improving the economic climate, opening ports, stabilizing the local currency, and providing a financing mechanism to cover debts, among other financing needs. A business manager of a building materials firm highlighted that they needed to be compensated for the physical damage conflict has caused to reopen the business.

“Compensating us for the loss because the closure was due to the bombing and war of 2015 after the armed groups stationed in the facility for the fuel that was stored in it, and the airstrikes bombed the facility, and since then the facility was closed as well as the marketing office.”

In summary, most respondents perceived their wage employment as volatile and inadequate. To make ends meet, they often needed to juggle two jobs, but few jobs were available. Perspectives from private enterprise interviews suggest that conflict has caused direct and indirect challenges to their businesses and led to some closures. Moreover, the overall economic crisis, reduced consumers’ purchasing power, and presence of humanitarian response has also changed the local economy and nature of demand for products.
3.4 Displacement

Over the last decade, Yemen has witnessed a forced displacement crisis, both in the form of internal displaced persons (IDPs) (moved within the country) and international displacement (crossing borders to become refugees). The *Surviving in the Times of War* report used the monthly WFP survey to estimate that the share of households currently displaced varies between 29 and 41 percent (Favari et al., 2023). The report highlighted that IDPs face worse deprivations in many, but not all, critical welfare dimensions. The report also highlighted that although displaced households have significantly worse food access, all the major shocks seem to identically impact displaced and non-displaced households. The report suggests that food access, which was stable leading up to displacement, saw a sharp decline in the three or four months following displacement (Favari et al., 2023). Both IDPs and non-IDPs faced similar levels of poor access to healthcare.

The qualitative inquiry focused on understanding people’s lived experiences of forced displacement. The aim was to understand reasons for displacement, key features of the process of displacement, and consequences.

Displacement is directly or indirectly related to the conflict. Most respondents were displaced due to the conflict or due to indirect impacts of the conflict, such as increased prices and unemployment. They decided to migrate when they experienced violence firsthand or expected that the violence was near them in the form of loss of lives or destruction of property. They fled in fear to keep their families safe (see Figure 3.7). A few who discussed the decision-making aspect said that they were told to leave when the conflict intensified, or it was due to everyone around them leaving. Most of the respondents were displaced after 2014, but a few moved as early as 2011. In these cases, the reason for their displacement was due to the destabilization caused by the Arab spring and in a few cases due to Al-Qaeda attacks (quote provided later).

A male respondent from Al Baydha summarized:

> We moved after the war to the city. Everyone was moving. Some people died there and those who wanted to live moved. [Our house] was destroyed in the war and we all moved.

Displacement is either temporary or permanent. Permanent displacement occurs when violence has been so damaging that the displaced have nowhere to return to. The *Surviving in the Times of War* report did not find a strong association between violence and forced displacement. However, narrations from *Voices from Yemen* suggest that differentiating the permanent and temporary nature of the displacement is crucial to further understand its association with violence. Interviews suggest that permanent displacement mostly occurred when people lost everything due to the violence and nothing was left to start a new life. Often, they could not re-enter the area due to ongoing fighting and blockades. Often their dwelling or much of the neighborhood was destroyed in aerial bombardment, which also resulted in the loss of lives. A male from Raymah who was displaced from Sana’a recollects his experience:

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11 UNHCR defines forced displacement as: displaced “as a result of persecution, conflict, generalized violence or human rights violations”.
I (with my wife and kids) moved out of Sana’a. Everything was lost. We had no electricity, water, or anything. I did not go back to Sana’a.

In the case of temporary displacement, the reasons were similar to permanent displacement, but often Yemenis left their homes in anticipation of violence. They returned once the fighting stopped, or when the fighting had moved away from their areas. They came back to dwellings that were not severely damaged to resume the life that they left behind. A male respondent from Marib who was temporarily displaced due to the war returned to Marib in 2016 and described the painful process of displacement:

“...We escaped the war...We were not allowed to go back due to the war. We all moved away. No one stayed in Marib. I was on my way to Marib. The aircraft shelled our homes. My family was at home, and we had to flee the war. I went back to Marib in 2016. The whole of the town was destroyed.”

Figure 3.7: Perspectives of internally displaced persons
Displacement has taken many forms. In some cases, a few family members, usually men, stayed back to look after their houses and land. Sometimes other family members either fully or partially moved back to their native area after being displaced for some time. If people migrated to cities and they could not afford to live there, they returned to their native area or moved elsewhere. Some who discussed displacement more than once, after the initial displacement from violence, needed to move again to an area where they could hope to find livelihood options and life was affordable. A male respondent from Al-Baida describes the reason and process of displacement and the difficult reality of the high cost of living, especially as IDPs:

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We had to leave our town because of the air raids that destroyed our homes. We had four homes. We were terrified and used to cry. Our life is very tough here and there. My mother passed away. The rent is also very expensive. We cannot afford that. We struggle to find food, then how about paying the rent. [...] All of us moved, even my in-laws. From Raada we first moved to a house that was expensive to rent, then we moved to another house where we could afford to pay the rent. It is difficult to live everywhere in Yemen.
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Extended family and kinship were key enablers that facilitated displacement. People moved to places where they had extended families or social networks that could help them set up temporary or permanent living arrangements. Of course, not all could benefit from extended family and kinship networks. In those cases, they resorted to living in tents either in camps or outside. The generosity of extended family and kinship, host community members—and in some cases even strangers—helped people find shelter, food, and other basic needs. Some also mentioned receiving help from organizations when they were IDPs, but not after they returned to their native areas. A male respondent from Al Mahwit describes the temporary nature of the movement, decision-making, and enabling factors that facilitated the process.

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The bombardment was near our neighborhood in [Name of the Street and Area]. A missile hit next to our house, it was our neighbor’s house, which is only two units away from my own house, four people died in that house. It was raining bullets and some bullets would go through our house. We were all scared. Our house roof went down (half a meter down), and we did some mending to it. We decided to move, we rented in the [Name of the Street and Area in a different district]. We first took the women and children to the new house we rented, and we kept going back and forth to pack our stuff. After a while, the conflict expanded to reach our new place, so we had to leave the whole governorate “Al Hudaydah.” We all moved, my cousins, and brothers, each went to different places. I moved to Al Mahwit, which is my grandparents’ hometown. We still have our grandparents’ house there, but my cousins went to Sana’a.
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Some also wanted to leave Yemen but could not do so due to the lack of money. A male respondent from Abyan who migrated to Aden and returned recollects the cost of displacement. However, this occurred in 2011 when they had to move due to Al-Qaeda-attacks in Abyan:
The road from Abyan to Aden was closed. We had to take another road between mountains and valleys, so it cost us 70,000 YR. Now, it would cost a minimum of 200,000 YR because petrol and fuel prices have increased. My brother was migrating with his kids as well, so we split the cost; each paid 35,000 YR. My brother paid for my part and told me to pay him back when I have enough. I paid him back throughout the years. It cost us 35,000 YR to reach Yafa, then 20,000 YR to reach Aden. So, it was a total of 50,000 YR I guess.

The consequences of displacement vary. The main consequence of either permanent or temporary forced displacement was the loss of livelihoods and assets. Leaving behind everything people owned and living in uncertainty was difficult. Most had to find new livelihoods, which was challenging in a new place. Those whose livelihoods depended on land or who relied on regional-specific livelihood options (for instance, laborers who worked on khat) were affected the most when they moved to other areas. Many also needed to spend their savings and assets (such as gold) or borrow on credit to move and resume life elsewhere. Many of them now living as IDPs hope that they can go back to their native areas and return to the old lives they left behind. Figure 3.7 further illustrates the tragic situation of a male from Abyan and his family.

A male respondent who currently lives in Ibb also recollects how he could not receive any help as he did not have any documents.

[...] I left all my papers at my house in Ta‘iz. They don’t allow anyone there. Hence, I cannot register at any [humanitarian] organizations.

In summary, the conflict has caused both temporary and permanent internal displacement in Yemen. Although extended family and kinship acted as key enablers to facilitate displacement decisions, displacement has led to severe consequences such as loss of livelihoods, assets, and lives for many Yemenis.

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12 The exchange rate of Yemeni Riyal (YR) fluctuated drastically over the years. It moved from approximately YR 610:US$1 in 2020, to a peak of YR 1,700:US$1 by December 2021, in IRG-controlled areas. During the first months of 2022 it was around 1,100:US$1. The currency in the Houthi-controlled areas remained relatively stable, around YR 600:US$1.
Discussion and conclusions

This report highlights respondents’ lived experiences during Yemen’s conflict as experts of their own experiences. This report aims to present the voices of Yemenis who have now spent eight years living through a civil war, economic crisis, and close to famine.

This report is among the few authentically capturing Yemeni voices on a range of day-to-day issues from different governorates across the country. But—arguably—the small sample size limits ability to generalize findings. However, generalizing findings was not the intention of the report. For each theme, Voices from Yemen presents a multi-stakeholder perspective to mitigate bias towards a single stakeholder group or geographical area. Moreover, the report’s findings are in line with those in quantitative reports, such as Surviving in the Times of War or the World Bank Phone Survey report on food security (Favari et al., 2023; World Bank, 2023).

Voices from Yemen presents a comprehensive picture of suffering derived from human stories behind the statistics. The conflict has made Yemeni lives unaffordable, uncertain, vulnerable, and often unbearable. The power of people’s speech and the intensity of their stories narrate their grave vulnerabilities and the sense of helplessness and suffering the conflict has caused. To summarize:

• In day-to-day life, respondents widely report reducing food intake. Cutting back on meal frequency, restricting the food basket, prioritizing food among family members, moving away from gas cooking to wood, and even going hungry. Most respondents noted that to afford basic sustenance, often the main breadwinner had to juggle multiple jobs in a highly employment-scarce climate.

• Yemeni children are missing out on critical education. Yemeni parents sent children to school if it was close by, consistently offered classes, and did not charge fees. Otherwise, they needed to prioritize which child to be sent to school based on safety, accessibility, and financial circumstances. If they could afford to send children to school, they needed to make sure to give support to children at home due to the reduced quality of education. Schools also faced many struggles such as sustaining teachers, providing supplies, and maintaining basic infrastructure.

• Most respondents only accessed health care in case of emergencies. Health shocks were considered the main shocks households faced. However, health professionals had to cope with patient emergencies under limited facilities and drug supplies.
• Internally displaced Yemenis struggle to absorb and cope with a full set of shocks. The main challenge they suffer is ensuring the safety, security, food, and re-settlement of the family.

The main findings of this report corroborate and complement the findings of the Surviving in the Times of War report. Voices from Yemen complements the quantitative analysis of Surviving in the Times of War by providing viewpoints from both households and service providers, using a more nuanced and granular analysis. Both reports use the same conceptual framework to analyze data and organize findings.

Voices from Yemen portrays the Yemeni people living through unprecedented levels of food unaffordability due to inflation. This confirms findings from Surviving in the Times of War, which elaborates on the reasons for unaffordability: conflict-related air and sea blockades and repeated macroeconomic shocks. The Surviving in the Times of War report also demonstrated the lack of consistent access to health care and education and underscores the importance of these areas given the negative consequences for life-long human capital development (Favari et al., 2023).

This report confirms the volatile and inadequate labor market conditions. The Surviving in the Times of War report only touches upon livelihoods due to lack of quantitative data (Favari et al., 2023). This report delves into the perspectives of private enterprises including closed businesses. Voices from Yemen elaborates on displacement issues covered in Surviving in the Time of War, showing clear evidence that many Yemenis permanently left their homes due to violence (especially aerial bombardment), and/or destruction of their properties, or if they could not afford the journey back. People temporarily displaced left due to anticipation of violence or when it was nearby. Surviving in the Times of War was not able to address the complexities in decision-making Yemenis face, but Voices from Yemen suggests that people left when they felt their life was in danger. We are not able to discern, however, the extent to which leaving homes were individual decisions or based on collective perspectives (everyone else left).

This report also presents key cross-cutting contributions to understanding the situation in Yemen:

• First, this report uncovers the key cross-cutting theme of repeated shocks and harmful coping strategies Yemenis endure. The realities of life—related to food, basic services (education and health), livelihoods, and displacement—force most respondents to resort to a plurality of often highly destructive coping strategies. Households must make tradeoffs in terms of spending on food, education, or health. They try to cope with repeated shocks, such as an illness, by selling assets such as gold or even guns. They borrow from extended family, local stores, and other social and familial networks and live in a vicious cycle of credit. These findings echo those of another ACAPS report finding that households use detrimental coping strategies, with Yemenis citing economic changes that transpired during the war as reasons for why meeting current basic needs is so challenging (ACAPS, 2022a).

• Secondly, findings across this report confirm how the conflict interlinks with households, markets, institutions, and the humanitarian response. It discusses pathways in which the humanitarian response feeds back into these categories described by the conceptual framework. Examples include:
  a. Food unaffordability is due to direct and indirect effects of conflict on markets and institutions; and while the humanitarian response intervenes in the form of food aid, it is often not adequate nor sustainable.
  b. Conflict and the humanitarian response affect education and health provision. For households, these priorities compete, influenced by affordability, which is primarily related to livelihoods. Lack of education and health for a prolonged period can have long-lasting consequences that can feed back into the conflict.
  c. Conflict and the humanitarian response has changed the economy. Analysis of livelihoods reveals that the humanitarian response to the war has changed local demand. In healthcare, for instance, humanitarian organizations have attracted health workers while not providing sustainable healthcare investments. Also, small companies might be losing out to bigger companies that can provide services at scale, potentially leading to monopoly in different sectors.
d. Displacement is another factor that interconnects with food, basic services, and livelihoods. As in the *Surviving in the Times of War* report, our findings show that displacement affects food availability and affordability, exacerbates overcrowding in classrooms, deprioritizes health access, and disrupts livelihoods and assets.

Reflecting on the overall report and cross-cutting findings, two key perspectives arise:

- **Shocks and destructive coping strategies have potential long-term destructive consequences on the population, especially youth.** Continued destruction and lack of investment in basic services such as education and health have intergenerational negative effects by depriving current and future generations of fulfilling their capabilities and opportunities. Adverse food coping strategies and high child malnutrition can prevent a generation of children from achieving their full potential. The extent of this damage is yet to be even understood and it could be feeding back into the conflict. For example, lost learning will make it difficult for the next generation of Yemenis to find good jobs, which might impact individuals’ preferences over whether and how to finally end the conflict (for example, see (UNICEF, 2021)).

- **In the context of Yemen, we need to view the traditional definition of resilience with a critical eye.** A theoretical definition of the concept of resilience is “a capacity to confront, absorb, withstand, accommodate, reconcile, and/or adjust to condition of adversity, setback, and challenge in the pursuit of desired or desirable goals or states” (Lotz, 2016). It can be argued that the plurality of coping strategies Yemeni respondents employed in the face of repeated shocks is due to their high level of resilience. But respondents in this report describe deep and constant struggles, and often do not have any choice other than to endure. Viewing it as “ability to cope” might be treating their vulnerabilities as strengths, thus underestimating the vulnerable situation.
References

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