



The conflicts in Syria and Yemen are two of the largest humanitarian crises that have occurred within the last decade. This march the Syrian conflict marks its seventh anniversary and the Yemen conflict marks its third anniversary Civilians are paying the highest price in these conflicts, especially those who are most vulnerable – women. children, the elderly, and those with disabilities. Due to the insecurity of the ongoing political crises, both countries have seen their populations plunged into deeper stages of impoverishment and vulnerability. Stretched to their limits, the coping capacities and resilience of millions is beginning to decrease and people have begun to resort to more negative coping strategies, such as selling their livelihoods, assets and begging.



One of the cross-cutting issues which exacerbates susceptibility to other problems is the issue of nutrition and food security. Many do not know where their next meal will come from and the food that is available is often inadequate to meet the nutritional needs and mostly unaffordable as prices are skyrocketing due to the scarcity. Markets have become almost non-existent in many parts of Syria and Yemen, and agricultural and livestock productions have stalled as people do not have access to the agricultural inputs (seeds, fertilisers) or tools needed. Many agricultural assets have been destroyed and there has been a severe decrease in both crop and livestock production due to diseases, lack of fodder and vaccinations. This decline in agricultural output and loss of livestock is a contributing factor to malnourishment and poverty.

A malnourished and poor mother cannot feed her child properly; if she is pregnant, she will not be able give all the required nutrients to her soon-to-

be-born baby. A malnourished child under 5-yearsold might miss their 'Window of Opportunity' 1m to develop mentally and physically to be able to succeed in life. A malnourished schoolchild will not be able to focus on their schoolwork. A malnourished man will not be able to perform well at work due to physical exhaustion and therefore be unable to provide the food required to keep his family healthy. They will become more susceptible to diseases that they will not be able to recover from quickly, therefore falling deeper into poverty. Some will lose their lives. This vicious cycle attacks at every level and continues with increasing suffering. With economic blockades, bombings to civilian buildings and hindrances to aid agencies being able to deliver relief on the ground, the situation is getting worse. Vulnerability to chronic food insecurity remains alarming, and the risk of famine is now higher than it has

The international development community's efforts to combat hunger and improve lives have been making considerable progress for the past three decades. The Global Hunger Index Score has gone from 35.4 in 1990 to 21.7 in 2015<sup>2</sup>. At the same time, extreme poverty has declined from 36% to below 10%<sup>3</sup>, mortality of children under five has dropped from 93.4 per 1,000 to 40.8 per 1,000 and since 1950, life expectancy has risen from 48 to 71.5.<sup>5</sup>

However, recent years have seen this progress reversed in some regions, with both conflict and climate change increasing food insecurity and malnutrition.

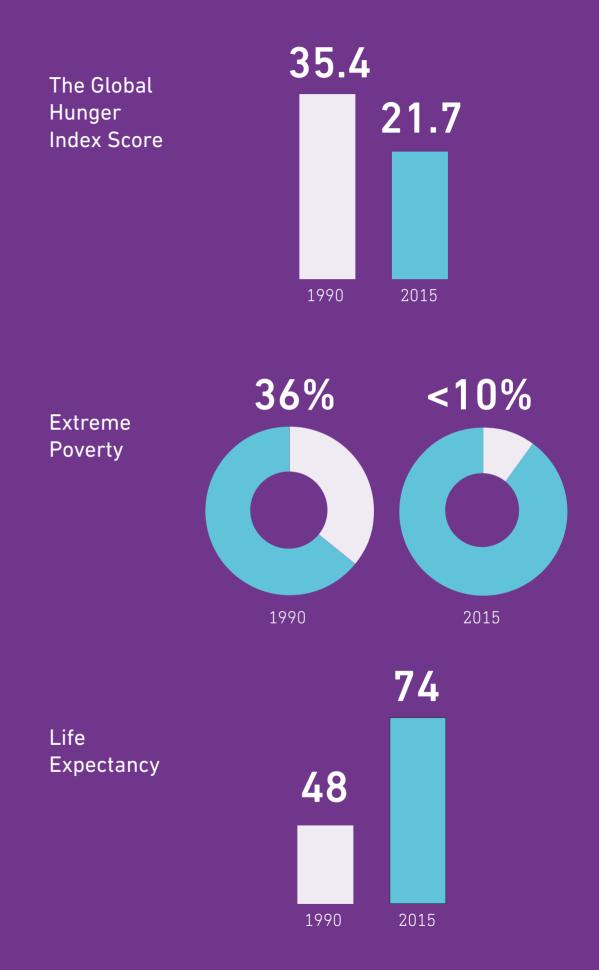
Hunger is more prevalent in countries affected by conflict, especially when institutional and environmental conditions are fragile. Of the 815 million people who can be classified as hungry, 489 million live in countries affected by conflict, and people in countries in the midst of protracted crises are 2.5 times more likely to be undernourished. This is especially true in the case of two of the worst conflicts of this decade - the ongoing civil wars in Syria and Yemen.

The short-term effects of malnutrition are devastating for both women and children.

Malnourished pregnant or lactating women are unable to provide enough vital nutrients needed for their babies, which can consequently lead to long-lasting damage to brain development, leaving the child vulnerable and more open to infections

and diseases. Malnourished, pregnant women are also more inclined to disease and exhaustion which impacts and reduces economic productivity, further deepening the cycle of poverty. Sadly, many lose their lives.

The long-term effects of malnourishment for women and children are equally distressing. Malnourished infants often miss what is known as the 'Window of Opportunity' during the first 1,000 days of life. Malnutrition in the first 1,000 days can cause poor development both mentally and physically. It is then more likely that these children, as they grow into young adolescents and adults, will be affected by irreversible health problems due to the lack of critical nutrients in their diet. Subsequently, a child's education will suffer immensely. An undernourished and malnourished schoolchild will not be able to focus. finish or complete their school education, which can hinder future economic development. The 'Window of Opportunity' is when it is vital for both the mother and child to consume the essential, vital and necessary nutrients to allow for healthy growth and development which will provide a positive impact on a child's life and education. Furthermore, well-nourished women before, during and after pregnancy are less likely to die during childbirth. By ensuring that mothers are healthy and able to breastfeed, the lives of almost 1 million children could be saved.7 For pregnant women and infants, having access to the right nutrition during this 1,000-day time frame can have a profound and long-lasting impact – not only will a child be able to grow healthily, learn and thrive; they will have a lasting effect on a country's economic prosperity.





On March 15th 2018, the Syrian war entered its eighth year. This conflict has already lasted almost a year longer than the Second World War and nearly three years longer than the First World War. As this conflict continues, often intensifying, food insecurity is growing. Since October 2015, the estimated number of people unable to obtain the basic food required to meet their needs has risen from 6.3 million to 7 million, or 38% of the population. A further 4 million are at risk of becoming what is described as acutely "food insecure" (not having reliable access to a sufficient quantity of food). The conflict has resulted in a severe decline in Syria's agriculture.

It has disrupted routes used to trade food and other goods, unemployment has risen dramatically with many having become displaced from their homes, and in many locations they are under a state of siege unable to escape from the violence and fighting. All of this has contributed to the worsening food crisis for the Syrian people. Overall, an estimated 13.1 million people in Syria require some form of humanitarian assistance, as well as assistance in the production of agriculture and agricultural jobs.9

Before the outbreak of the civil war in March 2011, Syria had one of the largest agricultural producers in the Middle East. The country was a net exporter of wheat, producing 4 million tonnes and exporting 1.5 million tonnes annually, with 3.5 million tonnes of wheat being kept by the government as reserves for protection from drought or economic sanctions. <sup>10</sup> As the conflict marks its seventh anniversary, the situation looks vastly different. Syria has become a net importer of food, and agricultural production continues to decline due to the destruction of vital infrastructure such as irrigation canals, lack of fertilisers, lack of electricity and power, and failure to rotate crops causing a loss in soil nutrients. Farmland has been reduced by a third. In Hasaka, the north-east province once produced almost half of the country's wheat however, this area has been nearly destroyed by air strikes and heavy conflict. The recent siege of Ghouta has also disrupted food supply to Damascus leaving hundreds of thousands without the basic supplies they need. 11 The Syrian conflict has cost more than \$16 billion in lost crops, lost livestock production, and destroyed farming

assets. Furthermore, wheat production fell by 53% from 2011 to 2016, with other staple foods, such as lentil production falling by 70%, and chickpeas by 30%<sup>12</sup>. Consistent access to safe water also remains a challenge for many Syrians, with families spending more than a quarter of their income on water. For many farmers, acute loss of income means that migration is not an option, and the risk of starvation has become imminent.

Over 8.2 million Syrians currently live in areas affected by fighting. These people face forcible displacements and deliberate targeting of both civilians and infrastructure.

This is a major challenge to the production capacity of the areas that people are leaving. It is also proving a strain on the limited resources of the communities receiving those people. In the first 6 months of 2017, over 440,000 internally displaced persons (IDPs) returned to their homes, which in many cases lacked basic food supplies and were restricted from being accessed by humanitarian organisations. 13 Internationally, refugees are also being pushed to return home, or are desperate to escape the conditions in which they are forced to reside. Consequently, the return of displaced people without appropriate information and coordination further increases the pressure on resources, with many becoming displaced again. Another driver of food insecurity in Syria is the use of siege as



a weapon throughout the conflict by the Syrian government, with 3.5 million currently living under siege or in places which are difficult to access. 14 In this way, food insecurity and the threat of starvation is being used to encourage rebels to stand down. There have been military sieges in cities such as Aleppo, Homs and Dara'a, and continues to do so in Eastern Ghouta, where the blockade is affecting tens of thousands and killing hundreds.

Many factors, such as the shrinking of the agricultural sector, lack of access to food and basic healthcare services and reduced immunisation, along with the often overcrowded and unhygienic living conditions of people who are displaced or living under siege, have increased the risk of severe acute malnutrition and disease for Syrian people. While humanitarian aid has allowed many Syrians to access necessary supplies of food, many are now totally dependent on humanitarian assistance, with 1 in 3 people unable to afford basic food items. 15 This method of food provision is unsustainable. Despite the conflict, agriculture remains a key sector of the economy; accounting for an estimated 26 per cent of GDP and is still a critical safety net for the 6.7 million Syrians who remain in rural areas. Moreover, due to years of strong droughts as well as lack of investments in

irrigation systems, it is vital to assist Syrian people in restoration of agricultural production, and thus restore their "food sovereignty." Food sovereignty is when people within a community has control over the way its food is produced, traded and consumed and that the food is healthy and culturally appropriate for the people it intends to feed.<sup>16</sup>

Despite these challenges, in many regions the agricultural sector has demonstrated resilience through sophisticated coping mechanisms and the determination of the Syrian people. However, the destroyed roads, disrupted trade routes, and the many larger businesses that have relocated to safer parts of the country (or even to nearby countries), are making it difficult and dangerous for people to access markets, even when harvests are successful. Up to 40% of jobs and livelihoods in Syria are connected to the agricultural industry, 17 but damage to the sector has led to high unemployment rates, further reducing the ability of many Syrians to purchase enough food to support themselves and their families. For the people in Syria, it is vital that humanitarian assistance, such as provision of food aid, and self-sustainability gets to them and is incorporated so that hunger is no longer used as a weapon of war.





Whilst Syria had a strong agricultural sector prior to its conflict. Yemen is a different story. Before the outbreak of conflict in 2015. Yemen was already one of the poorest countries in the region and food insecure. The 2008 global financial crisis increased poverty levels in Yemen by 25%, from which the country had not fully recovered from by the time the conflict started. The ongoing conflict has caused a decline in Yemen's already limited agricultural sector. Food insecurity has risen by 20% since June 2016, with over 60% of the population -17 million people - now food insecure. Over 8 million people, many of them children, in the country are severely food insecure and at risk of starvation.<sup>18</sup>

Yemen's malnutrition rate is one of the worst in the world with 2 million children under 5 acutely malnourished. Chronic malnutrition and stunting are affecting every second child and in some regions this number reaches to over 60% of children.<sup>19</sup> The 2017 Yemen Humanitarian Response Plan shows that about 3.3 million children and pregnant or nursing women were acutely malnourished, including 462,000 children under 5 suffering from severe acute malnutrition. This was a shocking 57% increase since late 2015. Children are 10 times more likely of dying compared to their peers not suffering from malnutrition.<sup>20</sup> Extreme restrictions to market access due to insecurity and blockades, the rise in unemployment and limited social protection and health services have all exacerbated food insecurity and therefore malnutrition.

Yemen's subtropical climate sees low annual rainfall, meaning that the country is traditionally a high net importer of food, with 95% of wheat (its main staple) being imported. However, livestock production covers over 60% and poultry almost 100% of the country's needs and many poor households are dependent on livestock as their only source of income. Despite its low contribution to Yemen's overall GDP, the agricultural sector is vital for the livelihoods of the country's poor. Water shortages and drought, as well as heavy frost in the highlands, already pose challenges to agriculture in Yemen. Three years of conflict have exacerbated this situation, at a time when rising fuel prices or shortages restrict power for farming, irrigation, and transportation. This has resulted in a 33% reduction in cereal production. With more than 50% of Yemen's workforce employed in the agriculture sector, a reduction in production affects not only food availability but the wider purchasing power of all Yemenis.21

Food availability has also been damaged by restricted access to markets due to insecurity, damage to transport infrastructure, and blockades. Coupled with reduced purchasing power due to increasingly high unemployment, this has resulted in a dramatic increase in food prices. In February 2017, the cost of wheat flour was 37% higher preconflict, while sugar prices increased by 62%, and red beans by 33% since February 2015. As over 90% of households depend on markets as their main food source, market disruption and price volatility has further contributed to the food crisis.<sup>22</sup> Food availability is also limited by displacement, as IDPs place a strain on already scarce food resources in the areas they are received. One in four households are affected by low food consumption, consisting of a diet of bread, sugar and fats, which alone do not provide enough nutrition and therefore leading to malnourishment.23

The Household Hunger Scale (HHS) has nearly tripled since 2014, seeing 40% of Yemeni households going to sleep hungry, and nearly 20% of households reported having gone 24 hours without eating.

Although the groups affected by food insecurity is growing, those distinctly vulnerable are people who live in the rural areas, those who have been displaced, households headed by women, or households whose breadwinners are not literate.<sup>24</sup> All of these problems are exacerbated when military actors do not allow aid to reach the people who need it.



Blockades have not only restricted humanitarian aid reaching those most in need, but they have also resulted in dramatic price increases and a loss of basic food availability, at a time when falling incomes are already making it impossible for many Yemenis to purchase sufficient food.

As over 90% of Yemen's staple food – wheat – is imported, blockades have a seriously detrimental effect.25 Access to Al Hudaydah port, which is the destination for 80% of imports to the country, is being severely restricted and wider constraints of activity at sea, has devastated the fishing industry due to the lack of access to fishing sides and crossborder trade.<sup>26</sup> And it is not just the fishing industry that has been impacted. The conflict has caused a surge in unemployment throughout most sectors. One in three urban households and one in five rural households have at least one government employee, but with the conflict resulting in an increased budget deficit, salary payments were suspended in September 2016. This has affected over 7 million people. In addition, social protection programmes which formerly reached 2.5 million people have collapsed. Informal systems are also affected as Yemenis are no longer able to support their family and friends. In urban areas, many people are forced to depend on begging, and 50% of households are indebted for food.27

The blockade's restrictions on fuel and drugs has also had a dramatic effect on healthcare. Hospitals

need fuel for their generators, and as of March 2017 more than half of all health facilities in the country were closed or only partially functioning, with as little as 25% in some regions.

### This has left 14 million people, including 8.3 million children without healthcare services.<sup>29</sup>

The severe lack of medical aid and supplie has become especially destructive due to the limited access to safe drinking water, another consequence of the conflict. Severe lack of clean, safe drinking water has increased and exacerbated the occurrence of preventable diseases, particularly cholera<sup>30</sup> which is caused and transmitted by drinking contaminated water and food.

### 982,295 cholera cases were reported between April and December 2017, including 2,225 associated deaths.

Malnutrition further aggravated the ability of the Yemeni people to cope with cholera. Those suffering from malnourishment are weaker due to the lack of food and nutrients, and therefore more susceptible to catching this deadly disease. To make matters worse, outbreaks of diphtheria also arose towards the end of 2017 with cases nearing 500 and killing 1 in 10.31



In summary, prior to the devastating conflict, Yemen was incredibly food insecure, but now 22.2 million Yemenis are in need of humanitarian assistance with more than 60% unable to meet their basic needs. The conflict has left over 3.1 million people internally displaced, including 25,000 from Yemen's capital Sana'a. All this has left two thirds of Yemen's households without access to enough nutritious food to support a healthy diet. Like in Syria, the only way we can begin to control malnutrition is if the people affected are allowed humanitarian access.



Human Appeal has been active in Syria since 2011, opening our field office in Gaziantep, Turkey in 2013. Human Appeal fights the effects of hunger and malnutrition throughout Syria, often in cooperation with global and local health organisations. We focus on all avenues that lead to under nutrition through of our projects, whether we are improving food security and livelihoods, providing clean water, sanitation & hygiene (WASH) or health and education. All of these programmes address the key drivers of malnutrition and use specific nutritional goals and objectives. However, the inaccessibility, besiegement and displacement over the past seven years have contributed to greater, mutually reinforcing causes of food insecurity.

Since the start of the conflict, one of our largest emergency programmes has been providing food aid in the form of cooked meals, food parcels containing essential items, Qurbani meat, and flour. Our large-scale food security project supplying over 37,300 tonnes of flour to millions of Syrians, has allowed Syrian bakeries to continue producing bread, a staple food of the Syrian diet. This project has helped stabilise the price of bread on the market and also sustained entire communities who have struggled to access nourishing food. Human Appeal is continuing our flour distribution project delivering food parcels in partnership with the World Food Programme (WFP), providing cooked meals and distributing winter kits. Moreover, our emergency operations in Syria include providing shelter and essential survival items to displaced families.

In 2017, we provided 1,250 Syrian farmers with agricultural tools and resources to support small-scale farming initiatives for host and IDP communities in Idlib. In December 2017, Human

Appeal begun a UNOCHA funded project to enhance resilient and diversified livelihoods for Syrian farmers. Providing Syrian farmers with the agricultural tools and resources allows them to become self-sustainable by growing their own food and building their resilience to conflict-related shocks and stresses.

We also support hospitals and schools in Syria, such as the Al-Iman hospital for women and children in association with UNOCHA and Americares. 150,000 vulnerable women and children have had access to healthcare at this facility every year, and many were reached in their local communities through our mobile health clinic. Furthermore, we have been working hard to help improve the health and hygiene standards of displaced communities as well as improving access to education for 1,400 Syrian children in 30 IDP camps (funded by UNOCHA) and better quality formal and non-formal education for over 80,000 children in Northern Syria (funded by UNICEF).





Human Appeal have been working in Yemen before the conflict started in 2015 and we have since opened our office in Yemen's capital Sana'a in 2016. Our main focus and concentration has been tackling the issue of malnutrition through the provision of emergency food and nutrition via our health projects. Over the past 3 years of the Yemen conflict, Human Appeal have provided food aid to over 48,208 people and supported 300 vulnerable children who have lost one or both parents.



Within our first year of operation in Yemen we delivered vital food aid to 22,000 residents and IDPs, provided emergency aid for 6,500 victims of Cyclone Chapala, and supported over 300,000 people in Aden providing clean water during the dengue fever outbreak. Not only that, we also distributed clothing to vulnerable children in Aden and provided safe, clean water to a further 3,640 children in schools. All of these projects have helped to alleviate the pressures felt within the local communities. Furthermore, we have supported hospitals in Yemen and delivered medical emergency aid, including hygiene and nutrition supplies to children in Al-Jumhon Hospital in Sa'dah. And subsequently, we delivered 10 incubators for premature babies at the Al-Sabeen Hospital in Sana'a and supplied the Al-Jumhori Hospital with a C-arm (a medical imaging device).

When the devastating cholera outbreak hit Yemen, Human Appeal were at the forefront of responding and after the second outbreak in May of 2017, we

carried out a rapid needs assessment delivering 100 beds with mattresses to hospitals to help ease the strain. Moreover, in November 2017, we signed an agreement with the World Health Organisation (WHO) to operate 5 Cholera treatment centres and 34 Oral rehydration centres to serve approximately 8,000 beneficiaries suffering from deadly cholera symptoms. As part of this response, we have also been at the forefront of providing incentives (through temporary employment contracts) and delivering essential medical aid training to over 600 medical staff and providing hospitals with medical supplies such as oral rehydration solutions, antibiotics. syringes, gloves, masks, protection gowns and head covers, allowing them to treat over 24,800 people. At the beginning of 2018, we have also began a Multisector Food security, Health and Nutrition project in the high risk area of Al-Hajjah operating 9 Health facilities providing Primary and Secondary Health care for the most vulnerable such as pregnant and lactating women, children under 5 and other vulnerable groups. We hope to target over 60,000 individuals over the course of this current year.

Rehan Salim, Human Appeal's Country Director in Yemen, describes the difficulties in trying to provide live saving aid in Yemen:

"There are numerous hurdles which make Yemen an incredibly difficult place to work, especially when trying to help the most vulnerable. Frequent air strikes in our operational areas, such as Sana'a, Hodaydah and Hajjah puts a lot of pressure on our staff and can be extremely risky. We try to mitigate this by providing 'de-confliction' coordinates to UNOCHA/EHOC who coordinate with the coalition but this can take time and is not a guarantee.

In addition, clashes and skirmishes between rival groups usually result in a lockdown and this consequently can lead to a deep mistrust between security actors and NGOs operating. In some areas, there is limited rule of law and so there have been cases of Human Appeal staff and other NGOs being subjected to attacks, forced entry to premises, arrests and intimidation. Travelling between governorates is also risky as there are confirmed reports of banditry and kidnapping cells operating in target areas.

In terms of humanitarian access, the refusal or delay of visas for expat staff (myself included) has affected a large number of aid organisations. Senior or technical staff not being allowed access hampers our ability to respond effectively and though there are capable, local staff incountry, the scale of humanitarian need is overwhelming. Even within country, permissions are also required to operate in hotspot areas of need which delays international NGO staff movement in areas where responsiveness saves lives. Finally, with the closure of the Hodaydah Port and Sana'a airport, countless tonnes of aid has also been denied entry.

All in all, Human Appeal and many other iNGO's are forced to invest in strong security management to mitigate these risks but despite these challenges, still manage to reach the most vulnerable as per our commitment to the people of Yemen".





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As Syria marks seven years of conflcit and Yemen marks three, two common themes amongst these conflict appear - food insecurity is escalating and aid organisations, two common themes amongst these conflicts are that food insecurity is escalating and aid organisations are being prevented from accessing the people who need the help. We argue that the former is exacerbated by the latter.

Human Appeal are a politically neutral organisation – we fully embrace the core humanitarian principles of impartiality and our aim is to help whoever needs it most, not discriminating on any basis. However, we do believe that aid in conflict zones is becoming a tool of politics and tension. For issues like the rising hunger in conflict zones, not only do NGOs have to be impartial, but military actors need to respect their impartiality.

If there is to be a conflict, wherever in the world, all parties must acknowledge and work with NGOs to ensure aid is delivered to the people who need it and that systems and processes are established within the context of the conflict to ensure all military actors can be assured aid workers are impartial and that aid workers can be assured that no military actor will target them or hinder their attempts to deliver emergency aid.

Ahmed Kehail, Human Appeal's Humanitarian Coordinator, explains:

"If aid was depoliticised and was allowed into all areas, this would mean we could direct all our capacity and focus on our humanitarian and development work, without worrying about the safety and security of our staff. It also means we can work according to our work plans without delays and to achieve all projects objectives. Moreover, it will mean reaching all targeted areas and increase the number of beneficiaries."

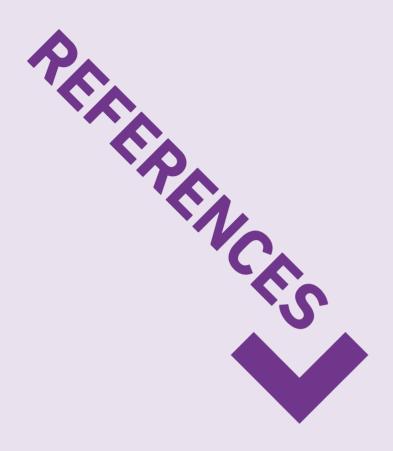
Sieges and blockades often cause or lead to starvation and therefore malnutrition. Emergency aid must be allowed to safely enter and be distributed in conflict affected areas to help prevent people becoming further victims to food insecurity and malnutrition. However, the argument could be made that, for some military actors, starvation in areas they are besieging is an intended consequence of their actions in order to advance their goal of a military victim. In October 2017, Hilal Elver, the UN Special Rapporteur on the right to food said "it is crucial that the international community understands that it is an international crime to intentionally block access to food, food aid, and to destroy production of food."<sup>34</sup>

### There are currently 20 million people across the globe who are hungry or face starvation due to man-made conflict.

However, to this day, there has never been a case of man-made famine referred to the International Criminal Court.<sup>35</sup> We think this needs to change. Governments, militia, armed groups, military actors, anyone involved in a conflict – they should not be allowed to conduct violence against innocent civilians by attempting to starve them with little fear of repercussions.

Human Appeal believes, through universal assurance, that aid can safely be delivered within besieged areas. The threat to actors who prevent food from reaching those most in need is real and we call on the international community, and all national governments, to support us in calling for the prosecution, as a war crime, for any actor in any conflict who intentionally prevents food from reaching areas where people are food insecure.





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