

Yemen: “I survived only because of them”



Figure 1: Mohsen outside his village after being discharged from RI's clinic.

At almost midnight, a car sped into a remote village where RI had temporarily established a mobile medical clinic. In the back seat, unconscious, was Mohsen, he was so severely dehydrated from vomiting and diarrhea that he had slipped into a coma and was just hours away from death.

Mohsen was a primary school teacher in Hajjah: a remote, mountainous area in the north of Yemen. Like most people who were employed by the government before the war, he has not received his salary for over a year. The school he worked in had to close – there is no new equipment or stationary and the teachers cannot afford to continue teaching children without being paid. Now, Mohsen sells vegetables, riding from village to village on his motorcycle, and the children he once taught stay home. He makes just enough money to feed his family and buy fuel for his motorcycle but there is nothing left for even basic healthcare. That is why he almost died when he contracted cholera, which has been rampaging through the countryside, claiming thousands of lives.

Hajjah is near the border with Saudi Arabia and close to frontlines. Tens of thousands of displaced people shelter here in spontaneous settlements and public buildings. Many are destitute and urgently require healthcare, food, drinking water, and other basic needs. Many more have suffered the trauma of losing family members to the conflict, and losing their homes and jobs.

The situation in Hajjah right now embodies conditions all across Yemen. Even before the war, the country faced enormous humanitarian needs, with nearly 16 million people requiring some kind of assistance in late 2014 due to years of poverty, under-development, environmental decline, and weak rule of law. Now, Yemen is literally being torn apart. About 2 million children are out of school. More than 1,600 schools are currently unfit for use due to conflict-related damage, hosting of displaced people, or occupation by armed groups. More than half of health facilities have been destroyed, are not functioning, or lack staff and medical supplies, and the health system has collapsed. The country is now gripped by the worst cholera epidemic ever recorded. Since late April there have been almost a million suspected cases of the highly contagious bacterial infection, which can kill within hours if left untreated.

RI's medical staff immediately started treating Mohsen with intravenous fluids to stabilize him. Within hours, his condition had improved but he spent three days in our care recovering. With support from the Yemen Humanitarian Fund (YHF), RI is able to operate mobile medical teams, which travel to remote areas in Hajjah, providing free basic health care and free referrals to specialist health facilities. In a context where there are no ambulances, services are sparsely spread, and people are struggling just to put food on the table, this project is saving people's lives every day. Once Mohsen was discharged, he said: **“If it were not for these medical staff, I would not be alive today. I survived only because of them.”**

About the author:

Maha Ahmad is the Health Information Systems Officer for this project and has been working for Relief International in Yemen for two years.

“Thanks to the support we receive from YHF, we have saved lots of people's lives with this project. I'm really happy to be able to be part of this important work, helping my country.”

