Escalation on Yemen's West Coast

PATTERNS OF HARM, IHL CONCERNS AND RECOMMENDATIONS

01 AUGUST – 22 SEPTEMBER 2026

SUMMARY

The escalation of hostilities along Yemen's west coast is putting civilian services and humanitarian operations under increasing pressure. Attacks and disruption affecting healthcare, education, food and water systems are occurring alongside growing displacement, damaged transport routes and reduced humanitarian access. These impacts are interconnected: damage to civilian infrastructure increases humanitarian needs at the same time as insecurity, looting and restrictions make it harder for humanitarian organisations to respond.

This report summarises the patterns of harm along Yemen's West Coast and underlines the need for stronger protection of civilian services and humanitarian operations to ensure improved access to essential goods and assistance for the civilian population. It also underlines the need for better monitoring of the cumulative effects of hostilities on civilian populations and essential systems.

The report covers how vital civilian services have been affected by the hostilities:

- **Health:** At least 11 incidents affecting hospitals, clinics and medical staff were recorded, including repeated strikes on the same medical complex and the obstruction of ambulances, straining emergency and referral care.
- **Food security:** At least 24 incidents damaged farms, fishing communities, livestock and food supply routes in August alone, undermining local food production and distribution.
- **Water:** At least six incidents damaged water infrastructure, including the destruction of a drinking water project by a ballistic missile, driving protection and public health risks including a rising risk of disease linked to displacement.
- **Humanitarian access:** Obstruction of aid delivery, the looting of at least eight UN vehicles, and the seizure of a UN humanitarian complex contributed to a shrinking operating space for aid organisations.
- **Education:** At least 10 schools were struck or damaged, including five schools in Lahj city shelled on a single day, disrupting children's access to learning.

Insecurity Insight

The report highlights the need for:

1. Respect and protection of civilian infrastructure and essential services, including medical and educational facilities, water infrastructure, food production and distribution systems, and humanitarian facilities. Parties should take all feasible precautions to avoid damage to civilian objects and services on which civilian survival depends.

2. The need for safe, rapid and sustained humanitarian access, including through restored access along key roads, enabling the safe movement of humanitarian personnel, medical and food supplies and other essential goods. Humanitarian facilities, vehicles and supplies should be protected from looting, seizure, threats and other interference.

3. Strengthen monitoring and contingency planning, through support for enhanced capacities to prepare for further disruption to supply routes and maintaining contingency stocks and alternative routes for essential goods.

4. Prioritise support for areas receiving newly displaced populations and maintain essential services, particularly in Lahj, Taizz and other reception areas. Humanitarian and donor support should anticipate increased demand for emergency water, sanitation, healthcare, protection and food assistance, while also supporting the continuity of health, education, water and food systems, including the repair of damaged infrastructure and support for health and education workers and livelihoods where access permits.

5. Strengthen accountability. International humanitarian law (IHL) requires parties to an armed conflict to respect and protect civilian objects and essential services, take constant care to spare civilians and civilian infrastructure during military operations, and ensure that their conduct does not unlawfully deprive civilians of access to essential services such as healthcare, water, food, electricity and education. Better monitoring and accountability of respect for IHL are needed.

While hostilities have also affected areas beyond the west coast, including hospital access restrictions in Sana'a, fighting along the Sa'dah border and around Marib, and Houthi missile and drone strikes on Abha and Riyadh airports in Saudi Arabia, this report focuses on the situation at Yemen's West Coast. The review of reported impact on Yemen's West Coast underlines that protecting civilian services cannot be separated from protecting humanitarian access and civilian livelihoods. Continued attacks and disruption risk creating a cycle in which damage to essential systems increases humanitarian needs while simultaneously reducing the capacity of humanitarian organisations and local services to respond.

As hostilities continue, restoring and protecting access to healthcare, education, food, water and humanitarian assistance will be essential to preventing the current escalation from developing into a deeper and more prolonged humanitarian crisis.

Background

From mid-2026, fighting along Yemen's west coast intensified following the deterioration of existing front lines and the collapse of the 2022 truce in July. From early August, Houthi forces launched attacks against government and National Resistance positions along the west coast, with Al-Mukha among the main areas of fighting. Hostilities escalated in early September, with Houthi forces taking control of Al-Mukha, Dhubab and Perim Island. By mid-September, Houthi forces had extended their control along substantial sections of Yemen's Red Sea coast, increasing the strategic significance of the area within the wider regional conflict.

Fighting subsequently expanded southwards and inland, including toward Lahj and the southern approaches to Taizz city, while hostilities also continued around Marib. Saudi-led coalition airstrikes were reported in Al-Mukha and surrounding areas following the Houthi advance, alongside strikes elsewhere in Taizz governorate. Access from Aden to the west coast was subsequently disrupted. Control of territory and access routes continued to change during the reporting period.

The escalation occurred alongside the wider US-Israel war with Iran, which increasingly drew the Iran-aligned Houthi forces into the regional conflict. Houthi attacks on shipping and their involvement in the wider regional confrontation with Israel and the United States heightened the strategic importance of Yemen's Red Sea coastline and contributed to increased military activity in and around the area.

IHL Concerns



These documented incidents raise clear concerns under international humanitarian law, in particular the special protection owed to medical facilities and personnel and the prohibition on using access to healthcare as a tool of the conflict. The repeated striking of the same Al-Mukha medical complex, the obstruction and targeting of ambulances and medical responders, and reports of health care being denied to civilians, including a blocked vaccine shipment, are difficult to reconcile with the obligation to respect and protect medical services in all circumstances, absent clear evidence that protection had lawfully lapsed.

The scale of attacks on farms, livestock and fishing communities, alongside strikes on schools (including ones sheltering displaced civilians) and water infrastructure, also raises proportionality and precautions concerns, particularly given the foreseeable and cumulative harm to civilian livelihoods and essential services in a densely populated coastal strip. Attribution for individual incidents remains provisional in several cases and would require further verification; a fuller assessment would need information on the military objectives claimed, precautions taken, and warnings given, if any.

Harm to vital civilian infrastructure and aid services at Yemen's West Coast

These hostilities have resulted in a growing number of reported incidents of effects on civilian services in Ad Dali, Al Hudaydah, Taizz, and Lahj governorates. These include strikes on medical and educational facilities, destruction to water infrastructure, attacks on humanitarian infrastructure and a sustained pattern of attacks on farms, livestock and fishing communities that underpin local food security.

If this trajectory continues, we can expect a compounding humanitarian emergency: degraded routine healthcare, disrupted schooling, accelerating loss of livelihoods for farming and fishing households, and a widening gap in access to safe water - all occurring in an area where humanitarian access is simultaneously contracting.

Insecurity and narratives are shrinking the humanitarian space

Alongside insecurity on the ground, harmful narratives on social media are placing additional pressure on humanitarian space. In Yemen, an online campaign called for the removal of the UN Special Envoy and portrayed UN engagement as supporting the Houthis, while the ICRC has faced false claims about its activities.

If these narratives persist or intensify, they may further erode trust and acceptance of humanitarian actors, increase hostility and scrutiny, and make it more difficult for organisations to maintain access, communicate with communities and operate safely and independently.

Impact on civilian services

Between 1 August and 22 September 2026, Insecurity Insight's monitoring recorded a sustained rise in incidents affecting civilian services across Ad Dali, Al Hudaydah, Taizz, and, increasingly, Lahj governorates.[1] During the first weeks of August, reported incidents centred around agricultural areas and the Al-Mukha coastal strip. In early September, hostilities moved south following the fall of Al-Mukha, translating to incidents clustered in Lahj and southern/central Taizz districts. A separate strain of the wider Yemen conflict - including hospital access restrictions in Sana'a and fighting on the northern Sa'dah border and around Marib - unfolded in parallel over the same period, but fell outside the west coast pattern this report aims to highlight.

HEALTH

Conflict impact on health care services

As of 22 September, at least 11 incidents affecting healthcare were recorded on the west coast, highlighting two patterns.[2] First, repeated direct strikes on the same medical complex in Al-Mukha: the Saudi Field Hospital and an adjacent building housing health workers were both hit within hours of each other on 9 August by Houthi forces with missiles and drones. The same complex - the 2 December Hospital, Saudi Field Hospital and staff residence - was struck again on 7 September by a Houthi ballistic missile.

A second pattern highlighted the obstruction of care. Ambulance teams in Al-Mukha were obstructed from reaching a site to evacuate injured people on 15 August, after Houthi forces fired a fourth missile while medical teams were attempting to reach an area. The attack complicated rescue operations, delayed the arrival of medical teams and contributed to an increase in casualties. In total, one person was killed and eight were injured. In late August, Houthi forces refused a shipment of children's vaccines from the UN, unless they reopened UN facilities in Houthi controlled areas, which have been closed for over a year following their storming and the group's imposition of restrictions on humanitarian organisations. On 10 September, resuscitation and oxygen devices were allegedly removed from injured military personnel in hospitals in Al-Mukha by Houthi forces, preventing them from receiving medical treatment, causing the unnecessary deaths of a number of injured personnel. An ambulance driver and an emergency medical responder were killed on 18 September in the Kahbub region in Lahj governorate, though the conflict party was not specified. Health-related humanitarian infrastructure was also affected on the coast: clinics and medicines warehouses run by the King Salman Humanitarian Aid and Relief Centre, which reportedly served around 250,000 people a year, were looted and staff threatened in Al-Khokha, Al Hudaydah governorate, in mid- September.

Conflict impact on the ability to deliver and access health care

These incidents disrupted both the availability of healthcare and the ability of patients and medical teams to safely reach care. Some health facilities were forced to turn pregnant women and others in need away, in order to focus on trauma patients, despite pregnancy-related emergencies killing three Yemeni women every day, even before the escalation. In some areas of active fighting, maternity wards had been converted into emergency rooms to deal with the wounded. Vulnerable children reportedly filled incubators and sharing beds, while medical facilities fell short on supplies and fuel after key supply routes between Mokha and Taizz were largely cut off.

Over time, repeated attacks and disruption can weaken the wider health system by damaging infrastructure, driving health workers away from affected areas and diverting limited resources towards emergency care. Evidence from Yemen shows that conflict-related insecurity, attacks on facilities, workforce shortages and supply disruptions have contributed to reduced availability and quality of services, while health workers have been killed, injured, displaced or migrated, leaving some facilities understaffed. The effects can extend to routine and preventive care: research in Yemen has documented reduced availability of reproductive, maternal and child health services, including a decline in the proportion of health centres providing reproductive health services. These cumulative effects can persist beyond individual incidents, reducing the health system's capacity to provide comprehensive care and making recovery and reconstruction more difficult.

Outlook: Rising casualties and a weakening health response

The proportion of deaths among recorded casualties rose from 17 percent to 24 percent, according to WHO, and on 15 September deaths reportedly exceeded injuries. This may be explained by 'limited access to timely trauma and surgical care' and shortages

of blood and anaesthesia in receiving hospitals. With the Aden warehouse already out of stock on several life-saving items (normal saline, sterile surgical gloves, atropine, potassium chloride) and Scenario 2 of the joint response plan only 22% funded, WHO stated that 'efforts to expand trauma and intensive-care capacity, strengthen referrals, deploy mobile medical teams, support displaced communities and prepare for disease outbreaks will remain constrained'.

Telecommunication disruptions in Taiz, Marib and the coast are expected to continue and expand, disrupting services such as casualty verification and ambulance dispatch. If the current casualty rate continues, we would expect the share of preventable deaths to keep rising.

FOOD SECURITY

Conflict impact on the food systems

At least 24 incidents that damaged the food systems were recorded across Ad Dali, Al Hudaydah, Taizz and Lahij governorates in August alone, including sustained shelling, drone and landmine damage to farms, livestock and fishing communities. Of the 24 incidents, 20 were attributed to Houthi forces. Four were attributed to Yemeni forces: two children were killed while grazing sheep in Hudaydah and Taizz, and a wholesale fish market was destroyed and livestock killed in Taizz.

In Yemen, food production is often carried out at a household level creating strong links between civilian harm and the ability to produce food. The fighting over the past weeks has reported a specific impact on families' care for livestock and on fishing communities. Civilians, including children, have been killed or injured while grazing livestock, struck by shelling, sniper fire or landmines left from previous fighting. Secondly, fishing communities and infrastructure have been directly impacted: a fisherman was killed on 7 August in a waterborne IED attack near Al-Mukha; Al Urdi fishing port was struck by a drone strike on 11 August; fishermen's boats were damaged by missiles during the 14 August strike on Al-Mukha port; and a fishing anchorage near Hanish Island was hit by a missile strike, destroying 12 boats and injuring six fishermen on 27 August. Finally, food infrastructure and distribution have been affected, including a wholesale fish market destroyed in Taizz-Salh on 14 August.

Impact on food security among communities

The cumulative effect of these incidents is a reduction in people's ability to produce, catch, distribute and access food. Strikes on markets, ports and distribution points interrupt the movement of food to communities already facing insecurity, while the loss of boats, livestock and farm equipment removes essential sources of food and income and can leave households without the means to resume their livelihoods. Farmers and fishers who are displaced, or who cannot safely reach their land or fishing grounds, lose access to production and income, and landmines and other conflict-related hazards can keep farmland and grazing areas out of use. Households facing food insecurity may respond by selling their produce, reducing food consumption or taking on debt, which further undermines their resilience.

WATER

Conflict impact on the water infrastructure

At least six incidents impacting water infrastructure were recorded. A drinking water project in Shujayna was completely destroyed by a Houthi ballistic missile on 9 August. Household water tanks were damaged in strikes in As Sadiyat (11 August) and Bayt al Haymi (26 August). A water distribution tank for the Al-Ahkom project was hit by a Saudi airstrike on 16 September, and two further water facilities in Taizz governorate were struck on 14 September. Water and shelter projects run by the King Salman Humanitarian Aid and Relief Centre were also looted or threatened in Al-Khokha on 18 September, alongside the health and food infrastructure noted above.

Conflict impact on access to water

Damage to water infrastructure reduces access to safe and reliable water, particularly where alternatives are limited. Only about a third of Yemen's population is connected to a piped water network, so most households already depend on other sources such as wells, tanks and trucked supplies, hence damage to tanks and water projects can cut supplies even where the wider network still works. Looting and threats to humanitarian water projects reduce assistance further, and households spend more time and money on water or turn to unsafe sources.

The longer-term risks are to health and household finances. Prior hostilities in Yemen highlighted how quickly water damage becomes disease: collapsing water, sanitation and health systems cut 14.5 million people off from regular access to clean water and sanitation in 2017, and the cholera epidemic that followed passed one million suspected cases and more than 2,300 deaths. Cholera is usually prevalent where people are displaced and sanitation and hygiene are poor, which are the conditions now developing in reception areas in Lahj, Taizz and Aden. In Taizz in July 2025, 1,000 litres of trucked water already cost around $5, roughly a day labourer's wage, after scant rains pushed prices up. Damage to water infrastructure and disruption to trucking during the current hostilities is likely to push costs higher still, and to leave more households, particularly displaced families, unable to afford enough water Because women and girls are typically responsible for collecting water, the time involved contributes to school dropout among girls, linking the water and education impacts.

Outlook: Wider public health and protection risks

The WHO/Health Cluster reported that areas receiving newly displaced people are showing early signs of strain. Several water systems supplying host communities have been damaged, receiving areas face a combined deficit of more than 1,147 emergency latrines, and reliance on emergency water trucking is increasing. Such conditions contribute to a rising risk of acute watery diarrhoea and cholera, while the risk of measles, dengue, diphtheria and malnutrition is simultaneously prevalent.

EDUCATION

Conflict impact on education services

Education services were affected by hostilities at at least 10 facilities: five schools in Taiz, and five in Lahj governorates. The five schools in Lahj were all in the city, sheltering IDPs and were shelled by Houthi forces on the same day, 22 September, impeding humanitarian organisations' access to provide aid. Of the five schools affected by the hostilities in Taiz, two were attributed to Houthi forces, two to Saudi forces, and for one the conflict party remained undetermined. The incidents included missile strikes on Karim School - while classes were in session - and Abu Ayoub Al-Ansari School, an airstrike affecting another school in Taiz, and attacks in the vicinity of two further schools; including the vicinity of Othman School which was hit by Saudi airstrikes while residents were burying a victim of a previous Saudi strike.

Conflict impact on the ability to teach and receive education

These incidents threaten both the safety of students and staff and the continuity of education. Although no students or teachers were reported injured in the documented strikes on school, damaged school infrastructure and repeated strikes nearby interrupt classes and discourage attendance. In an area already affected by prolonged conflict, the consequences are likely to outlast the fighting itself. Earlier disruption to education in Yemen reduced attendance and contributed to school dropout, while displacement, poverty and child labour made it harder for children to return. The effects reverberate up the education system: a study in 2024 found that university enrolment fell sharply at several institutions, and students who do stay may struggle to complete their studies or acquire foundational skills. Over time, this weakens Yemen's future human capital, including the supply of professionals needed in healthcare, education, engineering and post-conflict reconstruction. Research also indicates that schooling quality is lower in regions experiencing violence than in more stable areas, and teachers who go unpaid may leave the profession altogether, further depleting the education workforce.

Outlook: Education disruption likely to deepen

The escalation of hostilities is already disrupting education. A Save the Children assessment in late August revealed that in Aden, Lahj and Taiz, nearly two-thirds of surveyed children were out of school, including children who had never enrolled and those who had dropped out. By 16 September, UNICEF reported that 243 schools had closed or suspended learning, affecting more than 137,000 students, while displacement and insecurity have cut children off from essential services.

If fighting and displacement continue, further school closures, interrupted attendance and displacement of students and teachers are likely, particularly where access routes remain disrupted or schools are damaged or used for other purposes. Continued interruption would increase the risk of prolonged absence and dropout in areas already experiencing low school participation, reducing continuity of learning and progression through the education system.

HUMANITARIAN SERVICES

Conflict impact on humanitarian access

The destruction and disruption of existing water, food, health and other essential systems increases reliance on humanitarian assistance at the same time as it constrains the capacity of aid organisations to respond.

Humanitarian agencies and their operations were directly affected as fighting intensified. Food and medicine warehouses were looted in Al-Khokha on 18 September, and shelter and water projects under attack, putting humanitarian services at risk of suspension. The World Food Programme reported disruption at 17 front-line distribution points around Al-Mukha on 10 September. Eight UN vehicles were looted between 3 and 11 September, and the vicinity of the OCHA office in Al-Mukha was struck on 7 September. A UN humanitarian complex in the city was subsequently seized by Houthi forces on 11 September, although staff had evacuated before the seizure.

Humanitarian access has also narrowed alongside these incidents. The International Rescue Committee suspended field operations around Al-Mukha on 12 August, while the city's seaport sustained significant damage and suspended operations as fighting intensified on 10 September.

The combination of insecurity, damage to transport infrastructure, looting and the seizure or disruption of humanitarian facilities combined with online campaigns reduces the ability of aid organisations to reach affected populations and maintain regular operations at a time when needs are increasing. Suspension of field activities and disruption to the port can restrict the movement of personnel, supplies and essential goods, while attacks and looting increase operational risks and costs. FAO has reported that rural households that previously relied on their own production are increasingly dependent on humanitarian food assistance. Repeated attacks and disruptions can therefore compound immediate losses with longer-term reductions in household resilience and in communities' ability to produce or afford food, while simultaneously constraining the humanitarian response on which they increasingly depend.

This is particularly consequential in Yemen, where more than 22 million people were expected to require humanitarian assistance at the beginning of 2026, only around 59 per cent of health facilities were fully functional, and 18.3 million people faced acute food insecurity. As of late September, more than 138,000 people had been displaced since the start of August, the highest level of new displacement since the 2022 truce. The contraction in humanitarian access therefore risks widening the gap between rising needs and the capacity of humanitarian actors to provide assistance.

Social media narratives linked to the escalation

An online campaign developed following the UN Special Envoy's 7 September statement called for restraint and dialogue. Between 6 and 8 September, 107 X posts directly called for the envoy's expulsion from Yemen. Posts accused the envoy or the UN of favouring or protecting the Houthis, while some extended the criticism to

international mediation and wider UN involvement. Photographs of people reportedly killed in different incidents were reposted alongside calls for the envoy's removal. The use of emotionally distressing images appeared to reinforce the campaign by creating an implied, but unverified, link between the deaths and the envoy. Separately, the ICRC publicly refuted false claims that its teams had recovered specific numbers of combatants' remains from front lines, stating that the allegations and accompanying images misrepresented its activities.

Impact on humanitarian acceptance

The monitored narratives do not indicate a wider rejection of humanitarian organisations at this stage. However, allegations that international actors favour one side of the conflict, together with false claims about humanitarian activities, can weaken perceptions of neutrality and independence. If these narratives become more widespread or begin to target aid organisations directly, they reduce trust and acceptance, increase hostility towards humanitarian actors and make community engagement and humanitarian access more difficult. The UN envoy monitoring itself found that hostility had broadened beyond the envoy to some calls for UN offices to close or agencies to leave, while no LNGOs or INGOs were specifically targeted.

Outlook: Access and supply chains continuing to erode

Humanitarian and medical supply routes are deteriorating rather than stabilising. Al-Mukha seaport remains non-operational after sustaining significant damage; the Hayjat Al-Abd road, the main paved route between Taizz city and Aden, has been struck repeatedly and its continued use is uncertain; the Sana'a–Taizz road was temporarily suspended; and access from Aden to the west coast has stopped entirely, with partner access to Taizz city and At-Turbah also difficult. Control of Bab el-Mandeb and Perim Island by the advancing party is reported to be raising insurance costs, freight costs and lead times for international procurement into Aden. If these routes remain closed or contested, we expect the dispatch of medical and food supplies to stifle just as demand rises, increasing the risk that hospitals and distribution points run out of essential supplies during peak casualty periods.

Overall trajectory

Taken together, these trends point toward continued deterioration rather than stabilisation: response planners are already monitoring triggers for a third, larger scenario in the joint response plan. However, without a decline in fighting, a substantial funding increase, and restored access along vital routes, it's likely that casualties, displacement and disruption to civilian services will continue to rise through the coming weeks, with Lahj and the approaches to Aden at greatest immediate risk.

If displacement continues at its current rate without a matched scale-up in water, sanitation and protection services, we would expect a rise in outbreak-prone disease, malnutrition and protection incidents in reception areas over the coming weeks, in addition to the direct casualties of the fighting itself.

Recommendations

To all parties to the conflict:

1. **Respect and protect civilian infrastructure and essential services.** Parties should refrain from attacks on medical and educational facilities, water infrastructure, food production and distribution systems, and humanitarian facilities, and take all feasible precautions to avoid damage to civilian objects and services on which civilian survival depends.

2. **Respect and protect healthcare and medical personnel.** Parties should ensure that medical facilities, ambulances and medical personnel can operate safely and without obstruction, and that wounded and sick people receive care according to medical need.

3. **Facilitate safe, rapid and sustained humanitarian access.** Parties should allow and facilitate the passage of humanitarian personnel, supplies and essential goods to affected populations, including by restoring access along key roads and reopening or otherwise enabling safe operation of critical transport routes and infrastructure where possible.

4. **Protect humanitarian personnel, premises, vehicles and supplies.** Humanitarian facilities and assets should not be looted, seized or otherwise interfered with. Parties should ensure that humanitarian organisations can maintain operations without threats, harassment or other restrictions that impede the delivery of assistance.

5. **Protect water and food systems from further disruption.** Particular attention should be given to water systems, agricultural land, livestock, fishing infrastructure, markets and food distribution networks. Damage to these systems can have effects extending beyond the immediate incident by reducing household access to food and water and increasing dependence on humanitarian assistance.

To humanitarian organisations and donors:

1. **Prioritise support for areas receiving newly displaced populations.** The response should anticipate increased demand for emergency water, sanitation, healthcare, protection and food assistance in Lahj, Taizz and other reception areas, including support for emergency latrines and water trucking while damaged systems are restored.

2. **Strengthen contingency planning for disrupted supply routes.** Humanitarian and health actors should maintain contingency stocks and alternative supply routes for essential medicines, trauma supplies, fuel, water and other critical goods, particularly given the disruption to Al-Mukha port and key road connections.

3. **Support continuity of essential services alongside emergency response.** Where feasible, assistance should protect the underlying capacity of health, education, water and food systems rather than focusing only on immediate emergency needs. This includes repairing damaged infrastructure, supporting health and education workers, and protecting livelihoods where access permits.

4. **Ensure protection and gender-based violence services are maintained during displacement.** The displacement of GBV service staff and suspension of safe spaces demonstrate the need for contingency arrangements that allow protection services to continue during rapid population movements and insecurity.

For monitoring and accountability:

1. **Monitor cumulative impacts on civilian services and humanitarian access.** Monitoring should track not only individual incidents of damage but also repeated attacks on the same facilities, interruptions to service delivery, displacement of service providers, closure of access routes and the loss of humanitarian capacity. This would help identify when individual incidents are producing wider or longer-term effects on civilian populations.

2. **Investigate reported interference with civilian services.** Reports of obstruction, interference or attacks affecting the delivery of healthcare, education, food, water and humanitarian assistance should be independently investigated. Findings should be used to identify those responsible and inform appropriate accountability measures.

Endnotes

1 For further details on Insecurity Insight's monitoring methodology for violent incidents affecting vital civilian services, please see here.

2 The map is continuously updated, so totals may increase as more information becomes available. As of 22 September 2026, three incidents of conflict violence affecting health care beyond the West Coast were recorded in Yemen, but they are not included in the discussion in this document.

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