



**2 April 2018, Hajjah, Yemen** — It takes Aisha Jaafar one hour to reach the main health centre in Aslam district, Hajjah governorate, one of the most impoverished and remote areas of Yemen.

The journey through bumpy and mountainous roads is necessary, as this mother is desperate to get treatment for her 4-year-old daughter, Yusra, whose tiny body is weakened by acute malnutrition and bloody diarrhoea.

Like thousands of Yemenis, Aisha cannot afford the cost of transportation to the nearest health centre. At times, she has no choice but to keep her sick daughter at home.

“I have to borrow money for transportation to the health centre and I often cannot find anyone to lend it to me. I cannot even afford to buy diapers for my daughter who is constantly battling diarrhoea,” said Aisha.

Severe financial hardship is not only faced by patients and their families; health workers also suffer the same challenges.

“For months, I have not received a salary. Seeing all these destitute patients in great need, my people, is what motivates me to continue working in spite of the difficulties. If I abandon these poor children, they will die,” said Khadeejah Ahmed, a nurse in a remote health centre in Hajjah governorate.

“Nearly all the people here are very poor and they really need us.”

### **Getting health care to most remote areas of Yemen**

Recently, the WHO Representative to Yemen Dr Nevio Zagaria visited 4 districts in Hajjah plagued by poverty and fatal diseases. The aim of the visit was to discuss urgent health needs with local health authorities, enhance partnerships, and scale-up WHO support to health needs for people living in remote areas.

“People here struggle to receive even basic health services. As a result, malnutrition rates in this neglected part of the country are increasing. I was moved by the suffering of children on the verge of starvation, carried by their helpless mothers,” said Dr Zagaria.

“Hajjah is one of several remote areas in Yemen that is far from the main health centre, making access difficult for the most vulnerable. To resolve this, we are decentralizing the treatment of children with severe acute malnutrition and medical complications to local health centres that are closer to affected communities. WHO is committed to strengthening healthcare delivery at district level in order to increase people’s access to it, regardless of their location.”

### **The right to health**

## WHO keeping hospitals and feeding centres alive in Yemen

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In August 2016, WHO established its hub office in Hudaydah to further enhance WHO interventions in Hudayda and neighbouring governorates, including Hajjah.

Since then, WHO has established four diarrhoea treatment centres and 14 oral rehydration corners to fight the spread of cholera and acute watery diarrhoea in the governorate. WHO also supports main hospitals in the governorate with essential medicines, fuel and water to keep them functioning. Five therapeutic feeding centres in five districts have also been set up, and fixed medical teams are working in six districts.

“Despite the progress, more support is needed in remote areas that are extremely difficult to access due to their geographical and mountainous nature,” added Dr Zagaria.

An estimated 16.4 million Yemenis are in desperate need of healthcare. Through its Minimum Service Package, WHO aims to deliver basic health services to all people in need in Yemen, despite the ongoing conflict.

“Even in times of crisis, health is a basic human right. No one should die just because they lack access to healthcare, or cannot afford the cost of transportation to the nearest health facility,” said Dr Zagaria

<http://www.emro.who.int/yem/yemen-news/who-keeping-hospitals-and-feeding-centres-alive-in-yemen.html>