Photo: UN Photo/Hana Haza'a

Gender Alert
Crisis Upon Crisis: Impact of the Recent Escalation on Women and Girls in Yemen

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UN WOMEN

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CONTEXT

Since late 2024, escalating conflict has deepened Yemen's already critical humanitarian crisis. Between February and April 2025, heavy bombardments have caused mass civilian casualties, widespread displacement, and the destruction of critical infrastructure. Attacks on key lifelines—Al Hudayda port and Sana'a airport in May—severed supply routes, halting the delivery of food, fuel, medicine, and humanitarian aid.[1]

This disruption has crippled humanitarian operations, shutting down health facilities, restricting food distribution, and impeding emergency services—especially in frontline areas. An estimated 9.6 million women and girls are in need of aid, facing mounting barriers to essential services, including maternal health, clean water, and psychosocial support. The destruction of health facilities and a water reservoir has cut off care for over 400 pregnant and lactating women and 9,600 children. Between January and May 2025, over 6,000 people were newly displaced[2]—26% of whom are in female-headed households,[3] adding to the 2.3 million women already living in displacement across Yemen.[4] Displaced women face risks from income loss to protection threats.

Despite the complexity of the conflict, the fragile cessation of hostilities between the U.S. and the Houthis in Sanaa offers a narrow but critical window for de-escalation and humanitarian response.[5] This moment must be used to scale up gender-responsive aid and restore essential services to displaced and conflict-affected populations.

1 "Deadly strikes on Yemen add to ongoing humanitarian crisis" | MSF May 2025

2 Yemen | Displacement Tracking Matrix

3 Yemen — Rapid Displacement Tracking Dataset (27 April - 03 May 2025) | Displacement Tracking Matrix

4 Yemen | Displacement Tracking Matrix

5 "US-Houthi ceasefire 'a welcome opportunity' to advance peace efforts in Yemen" https://news.un.org/en/story/2025/05/1163231

Key Data Points

Female displacement:

Between January to May 2025, at least 3,013 females have been displaced at least once due to escalating violence,[6] contributing to a total of 2.3 million displaced females as of March 2025. Given the ongoing nature of the situation, it is likely that the number has increased.

Rise in Female-Headed Households:

26% of recently displaced households are headed by women, many widowed or separated.[7] These households often face, limited mobility, reduced access to income-generating opportunities, and increased caregiving responsibilities. Such conditions can constrain access to humanitarian assistance, cause reliance on negative coping mechanisms, and heighten exposure to protection risks, including violence.

Menstruating Women and Girls:

Approximately 1,600 women and girls of menstruating age are currently estimated to be recently displaced and in need of menstrual hygiene supplies.[8] Based on Sphere minimum standards, 40,000 sanitary pads are needed each month to maintain women's menstrual health, dignity, and well-being.[9]

Maternal Child and Health Needs:

Health services for over 400 pregnant and breastfeeding women and 9600 children have been affected by damage to health facilities and water infrastructure, limiting access to maternal, new-born, and child health care in affected areas.

Impact of Supply Route Disruptions:

Recent airstrikes on infrastructure including Al Hudaydah port and Sana'a airport have disrupted critical supply routes, affecting the timely delivery of humanitarian assistance, including food, medical supplies, and fuel. This has had a direct impact on service availability in sectors such as health, food security, and protection.

As Yemen stands on the brink of a deeper crisis, this Gender Alert unpacks the gender specific impacts of the escalation in conflict in early 2025 on Yemini women and girls. It calls on the international community to act urgently to support their protection and ensure their access to critical services—efforts that are essential to safeguarding their survival, dignity, well-being, and rights.

6 This number is estimated by applying Yemen SADD estimations to the total number of displaced people from January to May 2025

7 Yemen: Understanding the cycle of gender-based violence, ACAPS

8 Humanitarian Needs and Response Plan 2025

9 Minimum humanitarian standards included in the Sphere Handbook in four vital areas of response: water supply, sanitation and hygiene promotion (WASH),food security and nutrition, shelter and settlement, and health.

METHODOLOGY

This Gender Alert draws on a desk review of secondary data, including humanitarian situation reports, protection monitoring updates, and displacement tracking data. It is further informed by key informant interviews (KIIs) with 10 women-led organizations (WLOs) in Yemen, which provided localized perspectives on the differentiated impacts of the compounding humanitarian crisis on women and girls.

Photo: UN Women/Yemen

GENDER-SPECIFIC HUMANITARIAN NEEDS AMID CONFLICT AND DISPLACEMENT

Humanitarian needs have escalated dramatically, with the escalation exacerbating an already dire situation. According to the 2025 Humanitarian Needs and Response Plan, 19.5 million people, or approximately 56% of Yemen's population, are estimated to be in need of humanitarian assistance and protection services – 1.3 million people more than last year. Among them, 9.6 million women and girls who are in acute need of life-saving assistance.

With the destruction of infrastructure and the disruption of electricity, communications and water supplies, and direct targeting of health facilities, the risk of famine, cholera resurgence, and preventable maternal and child deaths dramatically increases. In late 2024, only 22% of primary health care centres and 50% of district hospitals offer complete maternal health care.[10] Yemen already has the highest maternal mortality rate in the Middle East –10 times more than that of neighbouring countries – with one woman dying in childbirth every two hours, mostly from preventable causes.[11&12]

As of January 2025, an estimated 4.5 million people, most of whom are women and children, remain internally displaced. Women and children account for nearly 80% of the displaced population, and women and girls represent 2.3 million of those displaced.[13] With ongoing violence, displacement is occurring multiple times, with women and children bearing the brunt.

Women and children face disproportionate risks during displacements, which are compounded by the destruction of homes and livelihoods. A mother from Sa'dah shared, *"When we returned to our village, planes were in the sky. They hit the market full of kids. I banned the children from going to school, fearing for their lives."*[14] This sentiment highlights the growing fear among families, which has led to rising school dropout rates. With over 4.5 million children out of school, including 1.5 million girls, the situation is expected to worsen as insecurity grows and early marriage becomes an increasingly common coping mechanism.[15]

> *"...Al Hudaydah governorate and its residents are among the most affected groups. This includes areas close to and surrounding the targeted locations. Single mothers and sole female breadwinners are bearing the brunt of deteriorating services and the worsening economic and food security situation, as they are at the forefront and are seen by their families as responsible for securing shelter, food, and basic needs."*
>
> ***Source: WLO***

Traditional social norms remain prevalent despite the continued violence and displacement. As families flee their homes, women are often forced to navigate strict "mahram"[16] requirements. This severely limits their mobility and access to services. It also hinders their ability to evacuate safely.[17]

> *"Civilians, especially women and girls living near areas targeted, as well as IDPs living in camps or shelters, are most affected. The impact on them is compounded. Many households lose breadwinners as women become widows. The elderly and people with disabilities struggle to flee or protect themselves during attacks."*
>
> ***Source: WLO***

10 Humanitarian Needs and Response Plan 2025

11 USG/ERC briefing to the Security Council on the humanitarian situation in Yemen

12 "Yemen's war has devastated the health of women and girls. Midwives and doctors are building a "new normal""

13 Monthly Action Points (MAP) for the Security Council: April 2025

14 Displaced and scared: Yemenis still in limbo after almost five years of war, Reuters - January 2025

15 Yemen: Nine years into conflict and two years into truce, school dropouts soar, Save the Children

16 Being accompanied by a male guardian. A "mahram" is usually a close male relative such as husband, brother or father.

17 Yemen Annual Country Report 2024

FOOD SECURITY AND LIVELIHOODS

Photo: UN Women/Yemen

The destruction of critical infrastructure, such as Al Hudaydah port and Sana'a Airport has severely disrupted food supply, causing food shortages and exacerbating the risks of malnutrition.[18] As food prices continue to rise, pregnant women and new mothers face tragic choices of sacrificing their own health to feed their families, leading to long-term physical and psychological consequences.

Women and girls are being forced into dangerous survival strategies. With their mobility constrained by security risks and societal norms which might force them into risky coping mechanisms and dangerous survival strategies. This is compounded by the alarming rates of malnutrition among pregnant women and new mothers, putting both their health and their children's development at serious risk. As food prices continues to rise, these women will face tragic choices of sacrificing their own health to feed their families, leading to long-term physical and psychological consequences.

The decline in the economic situation has intensified the effects of the currency crisis, with foreign exchange rates soaring and the national currency plummeting. This has resulted in skyrocketing living costs, making it hard for families to afford basic necessities. The loss of livelihoods, particularly among women, has compounded their vulnerability. Many women have lost their primary income sources, as businesses shut down, including industries dominated by women, such as incense-making and tailoring. These businesses are now deemed non-essential due to the economic downturn and the prioritization of lifesaving commodities.[19]

> *"The situation has caused some women to lose their breadwinner, and thus their source of income. In addition, many businesses have stopped, and many professions practiced by women have become non-prioritized, such as incense-making and sewing."*
>
> ***Source: WLO***

Economic hardships and mobility restrictions force women to adopt negative coping mechanisms, with many turning to begging, selling their belongings, and marrying their daughters early.[20]

18 "Deadly strikes on Yemen add to ongoing humanitarian crisis" | MSF May 2025

19 Source:WLO

20 Save the Children "Yemen: Nine years into conflict and two years into truce, school dropouts soar"

VIOLENCE AGAINST WOMEN AND GIRLS

Photo: UN World Food Programme

The conflict is driving up forms and incidents of gender- based violence against women and girls as they face heighten vulnerability to sexual violence, exploitation, and harmful coping strategies.[21]

More than 6 million women and girls face heightened risks of abuse and exploitation.[22] Nearly one-third of all girls in Yemen are married before age 18, a practice that increases during displacement and heightens risks of GBV incidence.[23] One WLO explains that the breakdown of family and community structures, combined with a psychological toll of the crisis, is a trigger of violence within households.

As the needs of women survivors of violence continue to grow, access to integrated and multisectoral services—including legal aid—remains severely limited. This lack of support hinders women's ability to seek justice and protection. In such contexts, particularly in displacement camps and areas heavily affected by conflict, perpetrators of violence often face little to no accountability. This fosters a climate of impunity that further exacerbates the suffering and vulnerability of women and girls.

> ***" The psychological, economic, and security pressures make some men more violent towards their wives. Due to fear, women are more likely to stay home, which increases the incidence of violence. Additionally, legal services are hindered, leading to impunity of perpetrators, which encourages perpetrators of violence to continue."-***
>
> ***Source: WLO***

21 USG/ERC briefing to the Security Council on the humanitarian situation in Yemen

22 Ibid

23 "Yemen's war has devastated the health of women and girls. Midwives and doctors are building a "new normal""

SHELTER

In Sana'a and Sa'dah, repeated airstrikes have damaged homes, markets, and critical civilian infrastructure, forcing families, particularly women-headed households and widows, to flee with little or no belongings or documentation. These women are less likely to access formal shelter assistance[24] compared to familied headed by men.

Damage to water systems, electricity, and transportation infrastructure, recorded by the Civilian Impact Monitoring project, has severely compromised women's access to essential services and safe movement while fleeing danger.[25] Overcrowded shelters that lack gender-sensitive design -separate latrines, lighting, and lockable spaces- expose women and adolescent girls to heightened risks of sexual violence, harassment, and exploitation. With many male family members killed, missing, or separated, women are forced to take on the dual role of caregiver and protector. However, they are often expected to assume these responsibilities without having the necessary resources and support.

HEALTH

The destruction of health facilities—most recently in Hajjah on April 1st—has critically damaged health facilities.[26] One WLO reports that attacks on fuel supply routes and ports have paralyzed service delivery, leaving many health facilities non-functional or operating without electricity, clean water, or medical supplies.

Yemen already records the highest maternal mortality rate in the Middle East, with one woman dying in childbirth every two hours—largely due to preventable causes.[27&28] The destruction of maternal and reproductive health services disproportionately affects pregnant and lactating women now face exacerbated risks from lack of antenatal care, safe delivery options, postnatal support, and psychosocial services.

Moreover, women health practitioners —many of them women—are working in perilous conditions, often unpaid and without protective equipment, while also shouldering unpaid care burden. The collapse of health systems not only endangers women as patients but also undermines their ability to participate in and lead health response efforts.[29]

24 Yemen: Dozens killed in airstrike on detention centre, Human Rights Watch - April 2025

25 Country Policy and Information Note: Humanitarian Situation – Yemen, UK Home Office - March 2025

26 Action Against Hunger Condemns Air Strikes on a Health Centre It Supports

27 USG/ERC briefing to the Security Council on the humanitarian situation in Yemen

28 "Yemen's war has devastated the health of women and girls. Midwives and doctors are building a "new normal""

29 Ibid.

WOMEN'S ROLE AS COMMUNITY LEADERS[30]

In the face of continued hardship, Yemeni women continue to lead frontline responses—organizing aid, documenting rights violations, providing psychosocial care, and managing community-based protection mechanisms. In many communities hosting displaced people, women's grassroots initiatives fill critical gaps left unaddressed due to institutional collapse. Yet, their leadership is systematically overlooked and underfunded, with participation often framed as "volunteerism" rather than recognized as strategic humanitarian leadership.

> *"Yes, women participate as workers in both local and international organizations, providing relief, psychological support, and documenting needs. There are local women-led initiatives and women's community committees playing crucial roles, especially in affected areas and displacement zones. In addition, they take on media roles, raising their voices to advocate for the protection of women, the pursuit of accountability, and the cessation of violence."*
>
> ***Source: WLO***

Heightened fears for women's safety are being used to justify regressive norms—such as movement bans and "mahram" requirements—that further restrict women's mobility, agency, and access to services. This policing of women's movement under the guise of "protection" not only undermines their autonomy but also entrenches harmful power dynamics and heightens dependency. It also excludes women from formal coordination, planning, and decision-making forums—despite their demonstrated expertise and leading community role. Without targeted support, safety and protection, women's coping capacities are eroded, even as their role remains central to their communities' survival and resilience.

Most Urgent Needs (according to WLOs):

1. **Livelihood and Market Access**
   a. Sustainable family income generation programmes
   b. Affordable, reliable access to nutritious food in local markets
2. **Protection and Basic Services (Highest Priority)**
   a. Safety and security measures for women and girls
   b. Integrated health services (including reproductive care)
   c. Safe educational facilities with gender-sensitive staffing
   d. Psychosocial support for conflict survivors
3. **Support for Women-Led Organizations**
   a. Direct funding to local women's groups providing frontline services
   b. Capacity-building programs (legal literacy, leadership training, economic skills)

30 Source: WLO

RECOMMENDATIONS

Scale Up Women and Girls-Responsive Protection Services

- Prioritize safe access to GBV services in displacement settings and areas most affected by conflict, particularly where women and girls are resorting to negative coping strategies Ensure continuity of psychosocial and legal support for GBV survivors, especially in regions facing aid cuts or damaged infrastructure.
- Support the re-establishment of women-friendly spaces in IDP camps and urban displacement areas to provide privacy, case management, and protection referrals.

Strengthen Access to Shelter and Basic Services for Displaced Women

- Provide emergency shelter solutions that are safe, age-appropriate, and ensure privacy and protection for displaced women and adolescent girls, particularly in overcrowded or informal settings.
- Support documentation restoration services to help displaced and female-headed households register for aid.
- Coordinate the rebuilding of damaged water and electricity infrastructure in displacement areas to reduce protection risks and restore access to essential services.

Mitigate Economic Vulnerability and Expand Livelihoods Support

- Establish cash-for-work, vocational training, and microgrants for displaced women and those in conflict-affected areas to reduce reliance on negative coping mechanisms.
- Enhance access to food security and cash-based interventions for displaced women by addressing barriers such as a lack of identity documents and the destruction of local distribution systems.
- Support women vendors and small traders whose businesses were disrupted due to the destruction of markets, transport routes, and warehouses.

Protect and Support Girls at Risk of Child Marriage

- Implement urgent prevention campaigns in high-risk displacement sites to address child marriage, including outreach to caregivers about the risks of early marriage as a coping strategy.
- Provide safe, alternative education and psychosocial programming for displaced girls and those pulled out of school due to insecurity or fear.
- Train community leaders and local authorities to identify and refer cases of early marriage and ensure that girls remain in school wherever feasible.

Restore and Expand Health and Psychosocial Services

- Rehabilitate maternal and reproductive health services, particularly in facilities damaged or destroyed, and prioritize access for displaced women.
- Deploy mobile health and psychosocial teams in displacement sites and underserved areas, focusing on trauma care, maternal health, and MHPSS.
- Address the mental health toll through community-based mental health interventions targeting women and adolescent girls experiencing trauma, fear, and depression.

Improve Humanitarian Access

- Ensure that aid delivery is restored in areas where conflict has disrupted humanitarian corridors, particularly where women's access to food, health care, and shelter is critically impacted.
- Strengthen documentation and analysis of the impact of conflict on civilian populations, with specific attention to the experiences of women and girls, to inform humanitarian planning, response and advocacy.

UN Women has been present in Yemen since 2014, working to advance women's social, economic, and political rights, and remains committed to this mission.

Contact us:

X: UN Women Yemen
Facebook: UN Women Yemen