

## Under-Reporting of War Deaths - or Genocide?

By [Global Research News](#)

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*The estimates of numbers killed in this terrible war have varied from website to website. On the 31st July FARS news agency reported the number killed as 5313 people, most of them women and children. Al Jazeera quoted UN statistics on 27th July, stating that 3,640 have died altogether, about half of them civilians deaths. I believe both of these numbers hide the truth, and the number of those who have died is much, much higher.*

Systems of recording deaths in Yemen during the war are not straightforward, hence the differences in death counts. Some agencies count deaths that have been reported in the media, but this is a multi-focal war, with both militia activity and air assaults by the coalition happening in all of the areas except Hadramaut, and journalists cannot access all areas where people are being attacked. As the war progresses, deaths in Yemen have become less newsworthy as it has become so commonplace and the Western media have not seriously tried to give the war in Yemen the coverage it deserves. Furthermore, militias and fighting forces have an interest in under-reporting any of their own fighters killed by the other 'side' as militia and military deaths have a propaganda purpose; these deaths can only be estimated.



Another way of collecting information about those killed is from hospitals and medical sources. However, many hospitals have themselves been out of action, either because of destruction caused by war activity, because of loss of personnel due to the conflict, or because they have run out of medical equipment and may have disruption of water and electricity supplies making it impossible to function. Additionally, many who died at the site of an attack will not be included in hospital statistics

Then there is the nature of Yemen itself. In rural mountainous areas Yemeni families bury the deceased in their own villages, and with the ongoing conflict there is no system for these deaths to be immediately recorded. In some areas, especially the north-west, villages are inside conflict zones and not excluded from serious effects of warfare. The lack of fuel also means that moving injured to hospital is a challenge, for example, a recent report from journalist Mathieu Aikins “Yemen’s Hidden War” published by Rollingstone, stated that whilst he was in Yemen injured people were bought into a hospital in Saada from a village – he pointed to the difficulties in getting the casualties to hospital, with little petrol available, and for many the cost prohibits access to petrol. Apart from the blockade by Saudi Arabia, 180 petrol stations have been bombed in Saada area. For those few who manage to get their injured loved ones to hospital, inevitably many others will have failed and the injured may have died from lack of medical care.



Saada has been subject to daily extensive aerial bombardment by Saudi Arabia throughout the war, causing extensive displacement of families

Aikins also points out that in the areas he passed through in the Sana’a and northwest areas almost all bridges have been bombed, making communication and movement extremely difficult. In a radio report on Radio 4 on 27th July, MSF British doctor Natalie Roberts confirmed this and also stated that it is extremely dangerous to drive along roads, because so many cars and trucks – even those with no military use – are regularly targeted. No-one will use roads for routine issues such as reporting deaths, and with severe electricity shortages there may be no means for some villages to communicate with the outside world.



Dr. Natalie Roberts saw food trucks that were recently bombed in Amran district, destroying desperately needed food.

The siege has also made it impossible to obtain medicines and medical equipment. This has particularly affected those with chronic illnesses. At times, medicines have been in very limited supply and even the black market has been unable to provide them. This has meant that those with chronic diseases have been at risk, and many have died. Friends have reported that most people on dialysis have died in Sana'a, and also people who need medicines such as insulin have found it difficult to obtain essential medication. Sometimes this has meant that they have had to lower their dosage or change to an alternative medication, often without access to medical advice. Because of the war, non-emergency medical treatment is restricted in many areas; it is hard to imagine that this has not resulted in deaths. These early deaths would have been recorded as due to natural causes, whereas they were due to unnatural warfare and siege conditions under which most Yemeni people are now forced to live.

Examples include a 24 year old man in Aden I know, previously very healthy, who died of malaria because he was not able to obtain medical supplies. In the Guardian newspaper it was reported that an obstetrician stated that two women had died from complications during childbirth, who would not have died but for the war. Some women will no doubt be giving birth at home because it is impossible to get to hospital, increasing risk to mothers and babies. These deaths are hidden from war statistics.

Sources reporting the humanitarian situation in Yemen point to the precarious water supply. Yemen, already short of water, has now moved into an era of critical water shortage since the beginning of war. On 26th May Oxfam reported that two thirds of people in Yemen no longer had access to clean water, and expected that this would cause deaths from water borne diseases. The situation has worsened since then, as some water tanks have suffered bomb damage, and the petrol needed to pump water from deep wells is in even shorter supply. Another problem is a lack of baby milk. It was reported from Yemen sources recently that only 11.9% of Yemeni women are able to exclusively breast feed, a significant fall since last year. The shortage of water, shortage of food and ongoing stress will make it more difficult for women to produce sufficient milk for their babies. The reduction in breast feeding is life threatening for Yemeni babies, especially when it is combined with low availability of milk powders, unclean water supplies, and shortage of fuel to boil water for sterilisation purposes.





Precarious water supply – benefactors in Yemen have supplied water tankers: people are allowed 5 litres every 3 days each. In some areas the supply is less secure due to lack of diesel for water pumps.

Food is also becoming a severe problem as normally 90% of food is imported into Yemen, and the country is under siege making imports impossible. Humanitarian aid delivery is restricted by a Saudi led blockade. Tariq Riebl of Oxfam pointed out that “People are resorting to extreme measures, principally begging. You’ll see this especially with the 1.5 million displaced people...many that have fled suddenly when airstrikes or ground combat erupted. They are leaving behind all their belongings and having no revenue source or income.” Riebl stated that it is difficult to know how many people are dying from the effects of food deprivation because many parts of the country are not accessible and he continued: “The airstrikes have covered the entire country...so it’s difficult to give you an exact figure. In terms of classification, right now 10 out of 22 governorates are classified as Level 4. Level 5 would be famine. Level 4 is critical emergency level. And the rest of the country is in Level 3, which also would be already considered past the emergency threshold. Yemen is one of the most food insecure countries in the world, if not the most.”



UNICEF: 1.3 million children on verge of severe malnutrition, 16,000 currently being treated, 30.7.2015

As the blockade has reached its fourth month, the effects of the blockade are now causing severe disruption to the food supply and much suffering, and inevitably deaths. Humanitarian aid is said to be arriving in Aden but people there are telling me, and many others tweeting, that they have not yet received help. Food is increasingly expensive in the capital Sana'a, and most residents there are without employment or income, relying on savings. Those who still draw government salaries are mostly not working, and fear their salary will stop as the Houthi led administration is running out of money due to the blockade. Food trucks moving in Amran province have been regularly bombed, according to Natalie Roberts of MSF, creating a disastrous food situation there. The only area which is not under strict blockade is in Hadramaut, where food is entering via Mukalla. The east has a low population as it is a largely a desert region. Although many internally displaced have moved there, this area is not receiving any humanitarian aid. Displaced people in Hadramaut are mostly living on limited savings, rents are extremely high, and food is very expensive, so even in the most stable area in Yemen food security is an important issue.

The ongoing Saudi air bombardment is also causing many deaths, most of them civilian. No area is spared except for Hadramaut in the east, which has had minimal bombing raids so far. For example, in Mocha on the Red Sea coast on 24th July a bombing raid killed between 60-120 civilians, and injured many more, some of whom are seriously ill and with the shortage of medical care it is likely that the death toll will rise. This was not an area where Houthi militias were found; the persons living there worked in an electricity power plant.

Does this amount to genocide? According to the UN:

Genocide is defined in Article 2 of the Convention on the Prevention and Punishment of the

Crime of Genocide (1948) as “any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial or religious group, as such: killing members of the group; causing serious bodily or mental harm to members of the group; deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part<sup>1</sup>; imposing measures intended to prevent births within the group; [and] forcibly transferring children of the group to another group.”

The Saudis are particularly targeting the Zaidi population in the northwest of Yemen, destroying homes, schools, petrol stations, hospitals, roads, factories, shops, mosques, historical artefacts, a refugee camp and vehicles. Although it was reported that those in Saada were given notice that their homes were about to be destroyed by leafletting prior to main bombing raids, the people living there had few choices. Some organisations claim that the bomb damage in the northwest amounts to war crimes. The majority of people in targeted areas lost their homes, belongings, sources of employment, and income. The destruction of their homes destroyed shelter for families in a hot desert region in midsummer; in winter, high mountainous areas can also experience cold conditions and night frosts, making life without shelter challenging all year round. With the loss of their homes, families also lost access to water, electricity, and cooking facilities. Whilst some of the displaced have moved to the capital Sana’a and other cities, they would not be able to escape to the more stable area of Hadramaut due to their tribal and religious identity, as that area is controlled by extremist Sunni militias with strong anti-Shia sentiments and a fear of Zaidi spies. A large proportion of the displaced from Saada area have remained in the northwest, finding or building temporary shelter with limited resources. Some have formed camps near to the Saudi border, as many have relatives in Jizan and Najran who might offer them sanctuary, but currently I understand they are denied entry into Saudi Arabia, and a wall prevents them from crossing the border.



IDPs are living in tents and home made shelters, with very little protection from the elements.

Many that remain in the northwest are now trapped, as the severe shortage of petrol, the high cost of travel by bus, and the targeting of vehicles for air attacks on all local roads means that escape is challenging even if living conditions are life threatening. The low numbers of refugees crossing borders only reflects severe travel restrictions, and does not imply that the conditions in Yemen are better than in other war-torn countries such as Syria. The northwest of Yemen is suffering severe problems with food and water supplies, not only because of the Saudi led blockade that is affecting all of west Yemen, but also because of damage to roads, and targeting of food trucks. Despite the extensive damage here, the bombing raids continue and like those living all over Yemen the Zaidis are suffering severe



stress as they listen to the warplanes circling overhead on a daily, even hourly, basis.

It is difficult to argue that these conditions are compatible with life, and desperate appeals have been put out by a number of organisations, including Oxfam, UN, and WFP, ensuring that Saudi Arabia and its coalition partners, including US and UK, must be aware of the seriousness of this man-made crisis. Particularly the lives of the very young, the very old, and disabled have been and are seriously at risk. Additionally, with many hospitals and clinics destroyed, there is little medical input to help the vulnerable overcome these threats, and as the siege proceeds more of the population will become vulnerable. It is hard to argue that continued military strikes and ongoing siege in the face of this evidence can be anything other than intentional, as described in the Convention on the Prevention and Punishment of the Crime of Genocide (1948).

There is impelling evidence that members of the Zaidi population have been killed, and most have suffered serious bodily and mental harm by the destruction of their homes and the on-going blockade, and continued bombing attacks. It is hard to understand the purpose of the air attacks unless it was calculated to inflict on the Zaidi conditions of life that would bring about their physical destruction, in whole or in part. Additionally, the nearest border is the Saudi border, and the desperate and displaced are not allowed to cross it.

There are also many reported civilian deaths at the hands of the various militias, including the Houthis, in areas of conflict. This has resulted in damage to a significant numbers of homes and other buildings, reduced access to fuel, food, water, and medical assistance, and some civilians have been killed by militias, as well as militias killed whilst fighting each other. Also, many families in the southwest are displaced because of militia activity, and found it difficult to escape horrendous living conditions because of the conflict and siege, as to escape they had to pass through dangerous areas where militias were fighting each other. All of these factors have resulted in Yemeni deaths and suffering, particularly in Aden, Lahj and Taiz. Whilst the actions of militias were often inhumane and brutal, it is more difficult to link this to genocidal intent, as all militia fighting on the ground is primarily designed to control through war rather than to eliminate any particular group within the population. Opposing militias were fighting each other, and additionally, these areas were also subject to air attacks by the Saudi coalition and the Saudi led blockade; hence it is far less clear where boundaries for responsibilities lie.

Meanwhile, in UK, the Disasters Emergency Committee has not yet had a charitable appeal to help the severe disaster that has been inflicted on Yemeni men, women and children. Politicians and the media are not telling it how it is. I find this inexplicable.

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