

# **NO CHOICE:** Somali and Ethiopian Refugees, Asylum Seekers and Migrants Crossing The Gulf of Aden



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# Executive summary

Thousands of people risk their lives every year to cross the Gulf of Aden to escape from conflict, violence, drought and poverty. During 2007, almost 30,000 took the dangerous voyage to seek relative safety in Yemen. Due to the escalation of the conflict in Somalia and the food crisis in parts of the Horn of Africa, more and more people will join the already large refugee and migrant population in Yemen. During the first five months of 2008 over 20,000 arrived, more than double the number of arrivals in the same period last year.

Lacking safe and legal alternatives to leave their country, refugees and migrants have to use the services of smugglers to cross the Gulf of Aden. The boat trip is fraught with danger; the smugglers are notorious for their brutality. Fatality rates are very high; for 2007, it is estimated that at least 5% those setting out on the dangerous journey did not reach the shores of Yemen alive.<sup>1</sup> However, the actual death toll is probably much higher; the coastline is long, and neither all boats nor all the dead bodies are detected.

While most attention, especially in Europe, has focused on migrants and refugees coming via the Mediterranean, the tragedy unfolding in the Gulf of Aden is largely ignored by the international community and Western media. With this report, MSF aims to raise awareness about the plight of refugees, asylum seekers and migrants arriving on the southern coast of Yemen.

In September 2007, MSF established a project on the southern shores of Yemen to provide medical, psychological and humanitarian assistance to new arrivals. A system of focal points in strategic villages along the coast serves as alert system, allowing MSF mobile teams to intervene rapidly once an arrival has been signalled. In addition to providing emergency assistance on the shore, MSF operates the medical facility in the newly established reception centre at Ahwar. Since the beginning of the project, in September 2007, until the end of April 2008, MSF has provided assistance to over 6,000 refugees and migrants arriving on the shore of Yemen.

This report documents the medical and humanitarian consequences of the perilous journey, in particular of the abuses by the smugglers. MSF teams have treated patients for injuries from severe beatings, dehydration and respiratory problems. Many patients presented with general body pains and headaches – physical manifestations of the psychological consequences of the extreme hardships of the journey. Many survivors have not only been through traumatic events themselves but have lost loved ones from violence or drowning.

This report is based on medical and counselling data collected during MSF's operations and on the more than 250 testimonies gathered from new arrivals. People arrive exhausted, many of them ill and emotionally shattered. They told MSF harrowing stories of death and survival. Boats designed to carry 30 to 40 people at the most are packed with over 100 passengers, many of them stuck in small windowless storage places in the hold. People are forced to sit in the same position without moving and are, in the large majority of cases, deprived of food and water.

From nine out of ten boats, beatings were reported, the most common implements being sticks, pipes, belt buckles and sometimes also rifle butts and knives. Women and children are not spared.

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<sup>1</sup> Calculation based on UNHCR Incident Statistical Report, December 2007.

Conditions are so harsh that deaths during the trip were confirmed from one third of the boats. The main causes were severe beatings, lack of food and water and suffocation from being in the hold of the boats. Several interviewees also reported cases where the smugglers threw passengers, including young children, overboard. Also cases of suicide were reported where passengers jumped ship out of desperation and fear.

Arrival on the Yemeni shores is exceedingly hazardous, as the smugglers take extreme measures to avoid being detected by the Yemeni security forces. In almost half the interviews, passengers reported that the boats did not come close to the shore and that they were forced to disembark in deep water. If passengers are afraid and refuse to jump, they are beaten and thrown into the sea. As many people, especially those coming from the interior of Ethiopia or Somalia, cannot swim, deaths from drowning are frequent. The majority of boats come towards the shore at night to avoid being spotted by the Yemeni military, which further exacerbates the risk of drowning. Almost one third of the respondents reported deaths from drowning. In two cases MSF provided assistance to survivors from boats where the majority of the passengers, 100 people or more, had drowned or were missing.

The majority of those crossing were aware of the risks, but told MSF that they had no choice. For them taking the dangerous trip does not constitute an option among several, but their only survival strategy to escape violence and destitution. The majority of those interviewed listed multiple reasons for leaving, with violence and insecurity being the main one, followed by poverty and lack of work.

About two thirds of the new arrivals were Somalis and one third Ethiopians. The majority of those crossing the Gulf of Aden were men, but over twenty percent were women. Most of them were young, in their mid-twenties, but MSF also encountered some older people as well as young children. Over half of the new arrivals interviewed were married. Families are frequently separated, with one or several family members taking the journey and the others staying behind, sometimes because they could not afford to travel all at the same time.

Before reaching Bossaso, the port of embarkation in the Northeast of Somalia, people have already been through a dangerous and expensive journey. There are around 100 checkpoints along the road from Mogadishu to Bossaso, and many reported being threatened and having to pay bribes. They also described attacks by armed robbers and cases of killings. In Bossaso, the new arrivals faced precarious living conditions and increasing insecurity.

Yemen traditionally has been welcoming to the new arrivals, especially Somalis. The Yemeni Government recognizes Somalis as *prima facie* refugees. Thus Somalis do not need to undergo individual status determination. However, newly arrived Ethiopians are considered illegal and subject to deportation, without a distinction made between migrants and asylum seekers. Thus, Ethiopians are afraid of being arrested and many of them start moving from the shore when they are still exhausted and weak.

The high influx of refugees and migrants poses a major challenge for Yemen. To date, the humanitarian response to those arriving at the shore as well as to the refugees and migrants already in Yemen has been far from adequate. More international assistance is urgently needed. Also, the response capacity of actors assisting refugees and

migrants arriving on the coast needs to be strengthened. Few actors are present and there is an urgent need for additional organizations to intervene. UNHCR should increase its presence on the coast and assume a more pro-active, stronger role in fulfilling its protection mandate. Conditions in the Ahwar Reception Centre regarding registration, shelter and food and transportation should be improved. Also, new arrivals need to be provided with information about the options open to them in their respective languages.

Yemen is signatory to the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol, the only country on the Arab peninsula to have acceded to these international instruments. However implementation at the national level is lacking and the Government of Yemen is urged to play a stronger role regarding its responsibilities for the protection of and humanitarian assistance for refugees, asylum seekers and migrants. The capacity of local and national authorities needs to be strengthened to respond to the needs of new arrivals. Non-Somalis should be allowed access to asylum procedures.

As long as conflict, poverty and drought in the Horn of Africa persist, people will continue to flee. Refugees and migrants must be provided with alternatives to putting themselves at the hands of brutal smugglers. The international community, governments and other actors should make every effort to address the humanitarian needs of the migrants and refugees concerned.

# I Introduction



Exhausted Somali refugees on the beach, October 2007

Every year, thousands of people risk their lives crossing the Gulf of Aden to escape from the volatile Horn of Africa region to the relative safety of Yemen. Ethiopians and Somalis seek refugee from conflict, violence, persecution, draught and poverty.

With the escalating conflict in Somalia and the food crisis in parts of the Horn of Africa, their numbers are increasing. Up to end of May 2008, over 20,000 Somalis and Ethiopians crossed the Gulf of Aden, which is more than double the number for the same period last year. Lacking safe and legal alternatives to leave their country, they have to use the services of smugglers to cross the Gulf of Aden. The smugglers are notorious for their brutality and fatality rates are high. Those who survive the dangerous trip arrive exhausted and emotionally shattered.

In September 2007 MSF started a project providing humanitarian, medical and psychosocial assistance to refugees and migrants arriving on the southern shore of Yemen. In the context of the project, MSF interviewed over 250 newly arrived Somalis and Ethiopians, gathering information about their background, reasons for leaving and abuses during the journey.

This report documents the conditions of the perilous journey and their impact on the health and psychological state of the new arrivals. It presents statistical data as well as individual testimonies, including first-hand reports from victims, substantiated

by accounts from other passengers, and medical and counselling data. The report often cites what the migrants/refugees have told us upon their arrival in Yemen. This is to give them a voice and to offer the reader a sense of the severity of the abuses: how these people suffer during the boat journey, how they feel, and how desperate the situations are which force them to flee.

While most attention and research, especially in Europe, has focused on migrants and refugees coming via the Mediterranean, the tragedy unfolding in the Gulf of Aden is largely ignored by the international community and Western media. With this report, MSF aims to raise awareness about the plight of refugees, asylum seekers and migrants arriving on the southern coast of Yemen. The report documents the medical and humanitarian consequences of refugees and migrants having to resort to smuggling boats because of the lack of safe and viable options.

## II Context

### 1 Background

Yemen, in view of its geographical location – its proximity to the Horn of Africa and to the wealthy Gulf States - has traditionally been a country of origin, destination and transit for refugees and migrants. Also, population movements within and from the Horn of Africa, have a long history, from the traditional migration of pastoralists, to labour migration to the Gulf States, and, in more recent times, flight because of conflict, political instability and economic deprivation.<sup>2</sup>

Since the past year the number of people escaping conflict, persecution, draught and poverty in Somalia and Ethiopia arriving at the shores of Yemen has continued to increase. Frequently, the motivations for leaving are mixed, with the majority of the new arrivals stating the conflict or repressive political environments as well as poverty and lack of work as reasons for departure. Also, as is the case with population movements from other regions, refugees and migrants travel alongside each other in so-called mixed flows, using the same routes and modes of travel and, because of the absence of legal channels for seeking refuge or migrating, have to employ the same services of smugglers.<sup>3</sup>

The increasing number of new arrivals poses a major challenge for Yemen, especially as it the poorest country in the Arabian Peninsula, grappling with high poverty and unemployment, rapid population growth and dwindling water resources.<sup>4</sup>

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2 For more details see: Joakim Gundel, "The Migration-Development Nexus: Somalia Case Study," *International Migration*, Vol. 40, No 5, 2002; International Centre for Migration Policy Development (ICMPD) *The East Africa Migration Routes Report*, Vienna 2007 (hereafter cited as ICMPD); Mixed Migration Task Force Somalia, *Mixed Migration through Somalia and across the Gulf of Aden*, April 2008 (hereafter cited as Mixed Migration Task Force report).

3 ICMPD, p. 15; Stefanie Grant, *International Migration and Human Rights*, Paper prepared for the Global Commission on International Migration, September 2005, p. 4. Jeff Crisp, "Beyond the nexus: UNHCR's evolving perspective on refugee protection and international migration," *New Issues in Refugee Research*, Research Paper 155, April 2008, p. 4 (hereafter cited as Crisp); Council of Europe, *The Human Rights of Irregular Migrants in Europe*, 17 December 2007, p. 8.

4 According to the 2007 UNDP Human Development report, Yemen ranks 153 out of 177 on the Human Development Index. Population growth is 3.6%, unemployment 40%, with over 40% of Yemenis living in poverty.

## 2 Current scope and patterns

During 2007, according to UNHCR statistics 29,360 refugees and migrants arrived on the coast of Yemen. The voyage proved perilous and the estimated fatality rate was very high - the smugglers are brutal and take advantage of the extreme vulnerability of the passengers. In 2007, it is estimated that at least 5% of those setting out on the dangerous journey did not reach the shores of Yemen alive, with 654 confirmed dead (buried) and 754 missing.<sup>5</sup> However, the actual death toll is probably much higher. Yemen has a very long coast line with entry points for boats along a stretch of about 500 km - and it is very likely that not all new arrivals were detected nor that all the dead and missing were reported.

After a lull from June to August, when the sea is too rough for crossing because of the monsoon, the migration season began again in September 2007. According to UNHCR statistics, the estimated number of people arriving at the shores of Yemen peaked at 6,164 in September and at 7,628 in October.<sup>6</sup> Many people had been waiting in Bossaso, the port city in the North of Somalia, starting point for the boat journey, for the beginning of the crossing season. An increasing number of people had fled the fighting in Somalia. Also, during Ramadan and Eid (from 13 Sept. to 16 Oct., 2007) the number of boats crossing the Gulf of Aden was very high, as has been the case in previous years, since the smugglers took advantage of the fact that the Yemeni coast guard and military were less vigilant.

The first part of 2008 saw a massive increase in the number of refugees and migrants, with 4,000 or more new arrivals each month up to March 2008.<sup>7</sup> By the end of May, over 20,000 had arrived at the shores of Yemen, with almost 400 dead or missing.<sup>8</sup> This was more than double the number for the same period in 2007.

The large majority, around 25,000, of the new arrivals in 2007 came via the Gulf of Aden, while some 5,000 came from Djibouti via the Red Sea. From December 2007 on, more refugees and migrants made the boat journey from Djibouti. This trend continued during the first months in 2008, with over 50% of the new arrivals in January and February 2008 crossing the Red Sea. This trip is much shorter and less dangerous. Also, according to UNHCR, the majority of the boats crossing the Red Sea are smaller and less crowded and the smugglers seem to behave less inhumanely. In March and April, few boats came via Djibouti as the authorities there were tightening controls. In May 2008 the number of boats crossing the Red Sea was on the increase again.<sup>9</sup>

Over the past months, the smugglers have begun to use a new type of smaller, faster boats, with 25 to 45 passengers. The price of transportation is higher, but people, according to their reports, are treated better. The passengers interviewed from these boats - except for one which due to technical troubles on the high sea took five days to cross - told us that they did not encounter major problems during the trip. It seems that these boats are increasingly used; for instance

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<sup>5</sup> UNHCR Incident Statistical Report, December 2007. In 2006, according to UNHCR incident statistics, 25,800 refugees, asylum seekers and migrants arrived in Yemen having crossed the Gulf of Aden, with at least 330 dead and 300 missing.

<sup>6</sup> UNHCR Incident Statistical Report, December 2007.

<sup>7</sup> According to UNHCR incident reports the estimated numbers of arrivals at the coast for the first 4 months of 2008 were as follows: January 4,481, February 3,997, March 4,132, April 3,605. In comparison, estimated figures for January up to and including April 2007 were 7,144.

<sup>8</sup> UNHCR Incident Statistical Report, May 2008.

<sup>9</sup> According to UNHCR, in April, only 10% of the new arrivals came via Djibouti. In May, 40% of all the boats crossing came via Djibouti

in April 08 over half the boats arriving on the shores of Yemen were smaller boats.

The price of the boat trip ranged from US\$ 50 to 80, and US\$ 100 to 160 for the smaller, faster boats.



Ahwar reception centre, May 2008

### 3 Situation of the refugees and migrants upon arrival in Yemen

After arriving on the shore, people are taken by UNHCR's implementing partner Society for Humanitarian Solidarity (SHS, a local NGO) to either the Mayfah or Ahwar Reception Centres (CR) where they stay a few days, receive assistance and are Registered.<sup>10</sup> Initially there was only one reception centre at Mayfah, about two hours inland from the coast. In 2007, UNHCR decided to establish a second reception centre at Ahwar on the coast, with MSF responsible for the emergency health centre. However, there have been considerable delays and Ahwar Reception Centre (ARC) was opened only on 9 March, 2008. At that time MSF started activities there, providing medical and psychosocial support for the new arrivals. However, general conditions in the RC regarding registration, shelter and food still need to be improved. In addition, new arrivals (on the coast and at the Ahwar Reception Centre) are frequently not given adequate information about the next steps and possibilities open to them. Thus it is important that organizations active there have staff speaking Somali and the main Ethiopian languages needed (Oromifaa and Amharic).

According to UNHCR 2007 statistics, 81% of the newly arrived Somalis got to the Mayfah Reception Centre as did 21% of non-Somalis (almost all Ethiopians).<sup>11</sup> They are taken then to Kharaz Refugee Camp, located in Lahaj Governorate, about 200 km west from Aden. Over half the Somalis, 57% according to UNHCR, initially go to the Kharaz camp. However, few stay there, as Kharaz is located in the desert far away from any town. Conditions are harsh, with high temperatures and winds, and services inadequate. Kharaz Camp "hosts some of the most destitute and vulnerable refugees residing in Yemen".<sup>12</sup> The current population of the Camp is around 9,000, according to UNHCR. The large majority of the refugees in Yemen live in urban areas, especially in Sana'a and Aden. Living conditions for the refugees are very difficult, with few possibilities open to them, especially for employment.

There are no exact figures regarding the number of Somalis living in Yemen. According to UNHCR over 118,000 Somali refugees currently reside in Yemen, but the actual number is likely to be much higher as many Somali refugees have not been registered.<sup>13</sup>

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<sup>10</sup> The reception centres are transit centres for new arrivals, where they spend a few days to recuperate from the journey, are provided with initial assistance and registered before being taken to the Kharaz Refugee Camp for a longer-term stay.

<sup>11</sup> UNHCR Incident Statistical Report, December 2007. According to UNHCR 2008 statistics, during the first four months of 2008, 89% of the Somali new arrivals and 32% of the non-Somalis reached the reception centres.

<sup>12</sup> UNHCR, *Country Operations Plan 2008: Yemen*, p. 5.

<sup>13</sup> At the Regional Conference on Refugee Protection and International Migration in the Gulf of Aden (19-20 May, 2008), the Yemeni Foreign Minister referred to 500,000 Somali refugees in Yemen.

## 4 Legal status

Although the poorest country of the Arabian Peninsula, Yemen has been welcoming towards Somali refugees, in part because of Yemen's historic trade and social relations with Somalia. Local communities and fishermen who encounter new arrivals on the shore frequently provide support, although they are very poor themselves.

Yemen is signatory to the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol, the only country on the Arab peninsula to have acceded to these international instruments. However, implementation at the national level is lacking. There is no national refugee law and no operational committee that deals with refugees. In early 2008, the Human Rights Minister proposed the establishment of an inter-ministerial drafting committee to prepare a draft refugee law. In 2000 the National Committee for Refugee Affairs (NCRA) headed by the Deputy Foreign Minister and comprising officials from ministries and administrative bodies that deal with refugee issues (Foreign Affairs, Interior, Justice, Immigration and Passports, and the Office of Political Security) was established. However, it is only a consultative body without a secretariat and has not been very active.

The Yemeni Government recognizes Somalis as *prima facie* refugees. Thus they do not need to undergo individual status determination.

Newly arrived Ethiopians are considered illegal and subject to deportation, without a distinction made between migrants and asylum seekers. Since 2006, the Government of Yemen has implemented stricter measures to control the influx of non-Somalis, mainly Ethiopians, upon arrival on the Coast. Yemeni soldiers are under orders from the Interior Ministry to arrest Ethiopians. Thus, Ethiopians, when they arrive on the shore, are afraid of being arrested and many of them move from the shore as soon as they can.

When boats arrive on the coast and the new arrivals are detected by the military, Ethiopians are usually separated from the Somalis, detained and then brought to the immigration detention centre to await deportation. UNHCR does not have general access to detained Ethiopians except in specific cases brought to its attention and to which it request access.

Ethiopians who reach the reception centres are registered and given an appointment slip and thus the possibility to present an asylum claim to the UNHCR Aden or Sana'a office within ten days.

According to UNHCR, in 2006 approximately 1,000 Ethiopians were deported. Deportation of newly arrived Ethiopians, who have a valid fear of persecution, without the possibility of presenting a case for asylum is in violation of the principle of *non-refoulement* enshrined in Article 33 of the 1951 Convention Relating to the Status of Refugees.

To address this concern, UNHCR is discussing the 10-Point Plan of Action on Refugee Protection and Mixed Migration, which, if implemented would, inter alia, provide for refugee status determination procedures and thus for the possibility of Ethiopians to present asylum claims and for UNHCR to have access to detained Ethiopians.<sup>14</sup>

### III

## Main findings



MSF team interviewing a group of Somali women and children

This report is based primarily on information from 250 interviews from 69 boats, documented in detailed questionnaires, and 17 testimonies taken with a recorder as well as on medical and counseling data. It covers the period of September 9, 2007 the time the MSF project started, to April 30, 2008. The report focuses on the boat journeys from Bossaso, the port town on the north east of Somalia from where people cross the Gulf of Aden, to the southern coast of Yemen, more specifically on arrivals along the 270-km stretch of coast covered by MSF.

Where possible, the information received was verified. However, this sometimes proved difficult, as the setting for the interviews during the mobile interventions was not conducive to in-depth interviews. MSF staff usually found groups of new arrivals waiting on the shore, alongside the road or at military checkpoints. The interviews had to take place in the open, with people sitting in groups as the refugees/migrants were waiting for the truck to take them to the UNHCR reception centre. A further constraint was access to the Ethiopians, as they, understandably, were afraid of being arrested and would try to pass as Somalis.

With the opening of the ARC, conditions for interviews improved, as MSF has a private space for interviews and is able to take more time for follow-up. This is reflected in the data gathered from March onwards.

### 1 The boat journey

The boat trip across the Gulf of Aden is one of the most hazardous parts of the journey. Given the absence of legal migration routes, the only option refugees and migrants have is to use smugglers' boats. Smugglers operating in the Gulf of Aden are notorious for their brutality and take advantage of the extreme vulnerability of the refugees and migrants. Abuses are the rule, not the exception. Boats are overcrowded, with over 100 passengers packed into eight to ten metre vessels which, under regular conditions, take 30 to 40 people at most. Passengers are forced to sit in the same position under the

<sup>14</sup> The 10 Point Plan of Action is UNHCR's attempt to adopt a more comprehensive approach to refugee protection in the context of mixed migration. The 10 Points of the Plan of Action are: 1. Cooperation among key partners. 2. Data collection and analysis. 3. Protection-sensitive entry systems. 4. Reception arrangements. 5. Mechanisms for profiling and referral. 6. Differentiated processes and procedures. 7. Solutions for refugees. 8. Addressing secondary movements. 9. Return-arrangements for non-refugees and alternative options. 10. Information strategy. See UNHCR, *Refugee Protection and Mixed Migration: A 10-Point Plan of Action*, 1 January 2007. Crisp, pp. 4, 5.

scorching sun, with a number stuck in small storage places in the hold. They are subjected to beatings and, in the majority of cases, deprived of food and water. Deaths are frequent.

The boat trip from Bossaso to the Yemeni coast takes from 28 to 72 hours, depending on weather and sea conditions and activity in the Gulf. Arrival in Yemen is fraught with dangers as the smugglers frequently take extreme measures to avoid detection by the Yemeni coast guard and military. The smugglers often do not take the most direct course but longer routes to avoid patrols on the high seas. In response to increased patrolling activities, the smugglers have shifted routes and in the majority of cases, make people disembark at night. Almost half the boats from which MSF gathered information stopped far from the shore and, in most cases, passengers are forced to jump overboard and swim to the shore. Many drown.

### 1.1 Conditions on the boats

**“We were forced to stay in same place without moving. The smugglers were beating us hard from the beginning of the trip until landing and ended by forcing us to jump into deep water”**

21-year old Oromo man from Bale region (18/02/08)

**“They beat you badly on the boat, they have guns and knives. The condition on the boat was really very bad, I preferred to die, because of the beating. We had no water and nothing to eat. It is overcrowded, people are sitting on you, you cannot move. People are sometimes passing urine and stool on you”**

50-year old Somali man from Afgoye (25/02/07)



One of the boats left behind by the smugglers

#### 1.1.1 Crowding

All those interviewed except the passengers from two small, fast boats said that their boats were extremely crowded with 90 to 120 people - in some cases up to 150 people - crammed in 8 to 10 metre structures designed to fit a maximum of 30 to 40 passengers.

**“There are so many people on the boat. We always have to be in the same crouched position. The next person is sitting right behind you with his feet in your back and sometimes they push you. If you start to move even a little bit, the smugglers beat you.”**

Group of a dozen Somali men (13/10/2007)

Because the boats are so overloaded, some people reported that they were sitting on top of each other. An 18-year old Somali patient whom we treated on 8 March 08 complained about difficulties breathing because someone sat on him.

**“Somebody sat on me and I asked him to move. He told the smugglers. Then the smugglers said to me that they would throw me into the sea if I make any problem.”**

17-year old Somali woman from Bossaso, who came on an 8-metre boat with 148 passengers on 15 Dec. 07

Many patients complained about body pains from sitting in the same crowded position without being able to move. A number of patients reported pain in their buttocks and genitals, as they had to sit in seawater and urine-soaked clothes. Men experienced skin loss from their scrotum, while the women suffered chafing between their inner thighs.



The hold of the boat, where passengers are stuck

### 1.1.2 Being put into the hold

To cram as many people as possible into the boats, smugglers put people also in the hold of the boats –small, windowless spaces normally meant for storage—. As a 61-year-old farmer from Marka remarked, “This is fish boat, there is a hold which supposed to be used for fish, but they put human beings there.” He told us that there were 30 people in the hold of his boat (12/04/08). 88% of the interviewees reported that passengers were stuck in the hold, their numbers ranging from 15 to 40, on average 25.

Conditions in the hold are worse, because people are even more crowded, sitting on top of each other. They lack air to breathe and many complained about respiratory distress to our medical team. For instance, one of our patients, a 16-year old young man, an Oromo from Gimma, told us, “I was in the lower part of the hull. I felt I was suffocating.” (18/02/08) People in the hold also suffer from the intensive heat. Some reported that they had to sit in seawater, urine, stool and vomitus. Many reported that when they could not stand it anymore and wanted to come up on deck, they were beaten by the smugglers and pushed down again. Some told us that they were forced to pay for being allowed to come on deck, while others reported that even if they paid more money, they were put back into the hold.

**“I was in the hold. It looks like a small storage room, it is just one metre. We were 20 people there. We suffered a lot inside, it was really very hot, we had no air. We were afraid that one of the people who was inside was going to die because of suffocation.”**

A 32-year old Ethiopian man (Amhara) whose leg was grazed from rubbing against the hull (09/03/08)

**“They have no mercy. I was thrown in the worst part of the boat, in the hold. Whenever I raise my head for breathing, the smugglers beat me with the butts of their rifles.”**

49-year old car mechanic from Mogadishu (07/01/08)

### 1.1.3 Lack of food and water/theft of food and belongings

Over 80% of our interviewees mentioned that they did not get any food and water during the trip. When refugees and migrants arrived on the coast, a large number were dehydrated and hungry.

A group of three Somali men in their twenties from Mogadishu told us, “Even if you were dying, they [the smugglers] would not give you water.” (05/10/07) Some of the passengers said that they were so desperate that they drank ocean water. Several passengers reported that when they asked for water, the smugglers made them pay for it, with some telling us that, even when they paid, they did not receive water.

A number of passengers indicated that smugglers took their food or the little money or other belongings they had. A Somali woman whom we counselled on 24 December 07 was upset because the smugglers stole her money. She told us,

**“On the boat, the smugglers grabbed me by the hair. When I refused to jump into the water, they discovered the money hidden under my scarf and stole it before throwing me into the sea.”**

**“They took the milk, dates, sweets I had for the children and threw them into the sea.”**

30-year-old woman from Mogadishu who had come on her own with her two children (two boys, 1 1/2 and 5 years old), (02/04/08)

### 1.1.4 Discrimination against Ethiopians

A considerable number of the Ethiopians interviewed complained about discrimination on board (the smugglers were Somali).

A 21-year old farmer from Bale told MSF, “The smugglers beat the Ethiopians badly. They sometimes threw the Ethiopians into the sea. Most of the Ethiopians were in the hold.” (02/03/08) Somali passengers also mentioned that it was frequently the Ethiopians who were put in the hold.

**“We left Bossaso on a boat with a lot of people, about 130. The Ethiopians were separated from the Somali. The Somali were treated better and were on the upper deck. We Ethiopians were at the bottom. People urinated and vomited on us. The conditions were very hard. The smugglers beat us with sticks and even belts. When we arrived close to the shore they ordered us to jump out. Some could not swim and 4 people died.”**

Group of six Ethiopians (03/10/07)



MSF doctor suturing the wound of a patient severely beaten, October 2007

### 1.1.5 Violence

#### Beatings and other forms of violence

#### **“They have no mercy, they beat us like animals.”**

22-year-old Somali man from Beletweyne (12/12/07)

Beatings are commonplace, and MSF treat victims of beatings, presenting bruises, body pains and lacerations from almost every boat. The beatings are so brutal that over half the dressings MSF staff performed on our patients were to treat the wounds from violent trauma. Only on eight out of 69 boats from which we interviewed people did the passengers report that people were *not* beaten.

#### **“The smugglers were beating us from the beginning of the trip like animals. They have no mercy even if you die in front of them.”**

50-year old Somali man from Afgoye (25/02/08)

The most common implements used are sticks, pipes and belt buckles, although passengers also mentioned being beaten with rifle butts and stabbed with knives. On some boats people reported particularly harsh beatings. For instance, all the passengers we interviewed on 13/11/07 reported being beaten with sticks and pipes. Eight out of the twelve cases who needed dressings for violent trauma had deep cuts on their heads that needed suture. Two passengers whom we interviewed separately told us that the beatings were so bad that a man who could not stand the beatings any longer committed suicide by jumping into the sea. On the boat, which arrived on March 23, 2008, 29% of arrivals, including two Somali women, experienced violent trauma, inflicted mainly from beatings with sticks.

In some cases passengers had their limbs tied. It seems that smugglers use this as a means to control passengers who, overwhelmed by their emotions, become extremely agitated. On 12/10/07 a fisherman told us that he found three dead bodies on the shore with their hands and feet tied.

In six instances, interviewees mentioned that they were tied up or that on their boats some passengers had their hands or their hands and feet tied. A 27-year old Somali farmer from Walaweyn, Dafeed, observed “I was beaten on my head. They ordered me to not move and tied my hands and feet, because I became a little crazy.” (25/03/08) He could not walk and was brought to the MSF clinic by his friends. On the boat which arrived on 11 April 08 several interviewees mentioned that one or two passengers had their hands and feet tied. A 20-year old Somali woman described the situation as follows, “Two people became crazy, because they were in the hold. They started biting the others inside. Then the smugglers brought them out and beat them. One of them was thrown into the sea, while the other person was tied up.”

### Violence against those especially vulnerable: women, children and older people

It is mostly the men who are subject to severe beatings, but MSF encountered a number of cases where women were beaten as well. In March 08, six women reported violent trauma. On 13 March 08 the MSF team treated a 20-year old woman from Mogadishu who explained, “The smugglers were beating us from the beginning of the trip. I myself was beaten with a knife.”

Even pregnant women and children on board are not spared. On 2 March 08 the MSF team treated a 22-year old woman from Mogadishu who was travelling on her own. She told us, “The smugglers were beating us, they have no mercy for any one. I am 4-month pregnant and I was beaten. I feel pain in my stomach and am afraid that something happened to the baby in my stomach.” Several children presented to our medical team with bruises and injuries from beatings, e.g. a Somali boy with a cut on his head (06/10/07) and an Ethiopian boy with severe chest pain (15/09/07).

Parents and their young children are particularly at risk. In March we interviewed three families from different boats. They described how they were beaten because their children were crying during the trip. They were afraid that the smugglers would throw their children overboard; this has been the case on some boats.

**“I came with two of my children, a girl of 2 years and a 6-months old boy. I also took with me my little sister who is seven years old, because the situation in Somalia is getting worse day after day. The condition on the boat was really very difficult for me. The smugglers were beating me without mercy, because my children were crying and they do not want to hear someone talking or crying. I was asking God to reach Yemen as soon as possible, because I was afraid that the smugglers would throw my children overboard because of the crying. The smugglers were using drugs and alcohol.”**

25-year old woman from Bossaso (09/03/08)

Old people are not spared either. On 27/03/08 we treated a 76-year old man from Afgoye who had come by himself. He was injured by beatings. He explained that he was punched in the face and beaten in the side with a club. “I said to the smugglers ‘I am the oldest man on the boat and you should respect me.’ But they insulted me and hit me in the face,” he told us.

### Sexual and gender-based violence

MSF staff heard only about few cases of sexual harassment or violence on the boats. This limited reporting could have been due in part to conditions of the interviews and the medical consultations (on the beach or along the roads, often near checkpoints).

Two interviewees who had arrived on 01/04/08 reported the death of an Ethiopian woman on their boat because the smugglers beat and raped her (interviews of 02/04 and 05/04/08). A 25-year old Amhara man from Wollo reported that when one of the smugglers on the boat approached the woman asking her to have sex with him, she refused. The smuggler came back later. As she resisted, he beat and raped her. Then another smuggler came and raped her. As the boat came towards the Yemeni coast, it stopped far off the Yemeni shore and the passengers were forced to jump. The smugglers took the woman, who was very weak and could not move and threw her into the sea.

MSF heard of several cases of sexual harassment. A 24-year-old Ethiopian (Amhara) woman from Addis travelling with her uncle, whom we interviewed on 29 Feb. 08, told us about being harassed, saying, "People were sitting on you. I was even afraid to be raped because they were touching my body and laughing." We could not ask her further questions because her uncle, who was with her, did not want her to continue to speak about this.

In some cases, some women remained on the boat after people were forced to jump into the deep sea and returned with the smugglers to Bossaso. This would put them at risk of sexual harassment or rape, as the case below indicates.

**"When people were forced to disembark, I wanted to jump, but there was a girl who asked me to take her with me, because she was afraid that the smugglers would keep her on the boat and maybe rape her because she was very beautiful. I took her with me, helped her to come to the shore. When we jumped, they [the smugglers] beat me on my head with a stick because I was helping the girl. I was bleeding."**

20-year old Ogadeni man from Jijiga (24/04/08)

#### Death threats

Many of the interviewees reported that they were threatened to be thrown into the sea if they moved or did not follow the smugglers' orders. A 20-year old Oromo farmer told us that he was beaten up and threatened to be thrown into the sea (18/01/08). The patients we counselled also were often acutely distressed by threats against their lives. For instance, during a group session on 13 Nov. 07 several people spoke of being beaten up, having guns pointed at them and threatened to be thrown into the water.

**"I was in a narrow place and wanted to move. Then I was threatened to be thrown into the sea by one of the smugglers in the middle of the trip. The five other smugglers said, 'He is a child, put him down.' Then the smugglers put me into the hold."**

15-year old Somali boy from Johwar (12/12/07)

The seriousness of these threats was obvious to the passengers, as in some instances, they witnessed that the threats were carried out and people thrown into the sea alive (see below).

#### 1.1.6 Deaths during the voyage

**“One of our friends was sick on the boat. He wanted to get up but was not allowed to do so. The smugglers beat him, his condition worsened until he died on the boat. His body was thrown overboard.”**

A group of Oromo (12/10/07)

Deaths during the boat trip are frequent as a consequence of the extreme conditions. Interviewees from more than one third of the boats told MSF staff that people had died during their voyage, the numbers ranging from one to three and in some cases up to six or eight. The causes for death were severe beatings, lack of food and water and suffocation from being in the hold of the boat. Some of our interviewees also reported killings, with the smugglers throwing people overboard.

Deaths are more frequent among those put in the hold. The boat which arrived on 15 Dec. 08, was particularly crowded with 148 people on board. All eight passengers interviewed reported to MSF that there were at least 20 people in the hold and four to eight people died during the trip.

On 18 February 08, MSF staff provided counselling to a 22-year old Ethiopian woman, an Oromo, from Gimma region, who was with her 2-year old daughter. Her husband had died on the trip, because the smugglers were beating him severely and he was in the hold. Several other passengers from that boat confirmed that one passenger died.

Several interviewees who arrived on 1 April 08 reported that up to three passengers died during the trip. A 17-year old Ethiopian farmer from Gimma told us, “I was in the hold when two of my friends died there from suffocation.”

Two Somali women (37 and 40 years old, from Baydhabo), who received medical assistance on 19/01/08, told MSF that on their boat several children died. The 37-year old woman started to cry as she explained,

**“We thought we would arrive in Yemen quickly [as they had come on a smaller, faster boat] but then our boat had a problem and we thought we would die in the middle of the sea. Six children died because we ran out of food and water. Then they threw them from the boat. The boat took 5 days for the crossing. There was also a woman who turned crazy and started to bite us, saying ‘I am hungry’.”**

She showed us the marks of biting on her leg.

### People being thrown overboard alive

While dead bodies are usually thrown overboard during the trip, several interviewees told us about people being thrown into the sea while alive, including children.

**“When the boat was still near Bossaso it hit a rock. The smugglers were afraid that the boat would sink and started throwing people overboard. They took my grandson and threw him in the water and also some others. I wanted to grab him to get him back into the boat, but the smugglers prevented them from getting into the boat and pushed them down into the water. At least three people died that way.”**

An older woman from Mogadishu, who was travelling with her son, recalling the death of her 7-year-old grandson (10/12/07)

Several of the passengers interviewed on 15 Dec. 07 recalled that among the people who died during their trip was an infant of eight months who was thrown into the sea by the smugglers in the midst of the journey because he was crying. His mother died while landing. One of the passengers told our counsellor “There was a woman with an infant of six to eight months old. The baby was crying and the smuggler told the woman to shut the baby up. The woman replied ‘I have nothing to give him, not even water. Where can I get some water?’ The smuggler took the baby and threw him into the sea, saying ‘now he can drink water.’”

Two of the new arrivals interviewed on 5 January 08 also reported that several people were thrown overboard. As a 26-year man old from Mogadishu recalled, “Three people died while crossing, one was already dead, the other two were alive and they were begging the smugglers to leave them alone, but the smugglers threw them into the sea.” A woman from Mogadishu added, “At that time the smugglers also wanted to throw a boy about 18-years-old into the sea, but some people managed to calm down the smugglers and rescued the boy.” We counselled the young man in question, who told us that in the middle of the journey he witnessed the smugglers throwing some people into the sea. Then the smugglers came and pulled him from the passengers. As they were dragging him to throw him into the sea, some people tried to calm down the smugglers and managed to rescue him.

### Suicides

A number of the interviewees told us about cases of suicides during the voyage, when people could not stand the conditions on the boat any longer and jumped into the sea. Two Somali women, whom we interviewed independently on 13 Nov. 07, described particularly harsh beatings during the trip and reported that a man committed suicide by jumping into the sea. Another case was reported to us on 15 Dec. 07 by two interviewees. One of them, a 26-year old Oromo, told us “One of them was beaten so much, he threw himself into the water and died.”

## 1.2 Conditions during landing

### 1.2.1 Landing far from the shore/ Forced to jump into the ocean

Almost half of the boats, 42%, did not come close to the shore as the smugglers tried to avoid being spotted by the Yemeni military. Passengers were forced to disembark in deep water, having to swim to the shore. But also from boats that got closer people were forced to jump into the sea. Over 80% of our respondents reported being forced to jump. “When the boat was still far from the shore,” a 28-year-old man from Mogadishu who arrived on 02/02/08 explained, “the smugglers forced people to jump. 40 refused to jump, they were thrown into the sea.”

People were beaten, threatened and, in many cases, thrown overboard, if they refused to jump because it was too far from the shore and they could not swim.

**“I was forced to jump. When I refused, they snatched my baby and threw him into the water. I jumped after him, leaving behind the two other children. Fortunately the water was not deep and I saved him and we came to the shore. But I was worried about the two other children. But then a man brought them to me on the beach, thank God.”**

A 25-year old woman from Bossaso who came with two of her children, her 2-year-old daughter and 6-month-old son, and her little sister aged 7 years (09/03/08)

**“The boat stopped far and the smugglers were forcing the people to jump. The ones who knew how to swim jumped, but as I do not know how to swim, I was afraid. Finally I was forced to jump, but I held on to the boat. The smugglers took a knife and hit me on my hands to let go of the boat. As I was holding on, they beat me again on my head. I was bleeding that time and could not do anything. My friends helped me to come to the shore.”**

18-year old Ethiopian farmer from Gimma, whom MSF treated for beatings with a knife on his hands (17/03/08)

On 3 Nov. 07 MSF staff treated several patients with bruises and wounds who were beaten because they did not want to jump into the water, including a 31-year old Somali woman with a wound on her leg and a 19-year old Somali man with many bruises and wounds on his chest, back, arms, and legs.

### 1.2.2 Deaths from drowning

Deaths from drowning are frequent as many people, especially those from the interior of Ethiopia or Somalia, cannot swim. Almost one

third of the respondents, reported deaths from drowning. The actual number of cases is most likely higher, as unconfirmed cases are not included. According to UNHCR statistics, from September 2007 to January 2008 the number of deaths and missing per month was around 200 or more. In March and April the death toll was lower. This could be in part due to the fact that more smaller, faster boats were used. When there were deaths from drowning, MSF teams frequently saw dead bodies on the shore, sometimes a few but in several cases a dozen or more.



Night arrival: MSF team providing IV fluid to a dehydrated patient, September 2007

Often the boats come towards the shore at night to avoid being spotted by the Yemeni military, which further exacerbates the risk of drowning. A woman from Mogadishu described the arrival of their boat saying, “It was too deep, dark and cold when we the boat came near the coast. Some people drowned.” (05/01/08) At that time 18 people drowned. Even when the water is not that deep, people are afraid, especially if it is nighttime. They panic, get disoriented and drown. This was the case on 18 March 08, when several passengers told us that six Ethiopians drowned, some of them because they could not swim but others, as a 17-Year old female student from Mogadishu who had come with her family put it, “because they swam into the wrong direction, as it was too dark.”

People in the hold are particularly at risk of drowning. As they have to sit in an even more cramped position without moving, they lose their mobility and are severely handicapped once in the water. Also, when boats capsize, the people in the hold usually have no chance to survive, as they are trapped underneath the boat and cannot get out.

On 13 Nov. 07 MSF counselled three people who had lost relatives from drowning. A 24-year old Somali woman, a Somali man and a 33-year old Ethiopian man. The case of the Oromo man who was mourning the loss of his wife and child was particularly shocking. He explained that he was travelling with his wife, their baby and the wife’s sister. His wife, with their baby clutched in her arms, was thrown into the sea by the smugglers. He tried to rescue both by grasping their hands but, unfortunately, more people were thrown overboard and landed on top of his wife, pushing her under water. She and the baby drowned. We were told that seven dead had been buried, including a child.



Bodies along the shore after a deadly arrival in December 2007

Grief over the loss of a loved one is one of the main reasons for individual counselling. In December 07 this accounted for 71% of all the individual counselling sessions. The reason for this extremely high percentage was that from the boat which arrived on 15 Dec. 08, only 49 out of 148 passengers survived.

On 15/12/07 MSF assisted a group of new arrivals at Hossun checkpoint near Arqa, many of them exhausted and extremely sad. Several people told us that their boat had left Bossaso with 148 passengers. The boat, an approximately 8-metre fibreglass structure, was even more crowded than usually. The MSF team counted the survivors – there were 49, which meant that almost 100 people were dead or missing. It seemed that very few of the Ethiopians on board had survived; one Ethiopian whom we interviewed said, “We were 50 [Ethiopians] when we left and now we are only eight.”<sup>15</sup> A young Oromo who travelled with a group from his village in Bale Region told us, “We were ten from our village on the boat, and now we are only three. I identified my dead brother on the beach but the other ones are missing.”

15 Later on we encountered two more Ethiopians

When the boat arrived at around midnight, the smugglers forced people to jump. A 25-year old Somali woman from Mogadishu told us, “The smugglers stopped far away and forced the passengers to jump. The passengers refused, because it was deep and asked the smugglers to go nearer. The smugglers started to beat us severely. Then most of the passengers moved to one side of the boat, and the boat capsized. Most of the people drowned as they could not swim.” When the boat capsized, the people in the lower part, at least 20, we were told, were trapped under the boat and died.

A 25-year old Somali man from Marka, who had come with his wife, 2 children, his sister and another close relative, described how he lost all his family members “It was last night that the smugglers said that they will disembark us. At that time I was telling my wife to jump together so we can rescue our children. While we were planning ways to rescue our children, the smugglers began to force the people to jump. The people started to move and the boat turned over as it was overcrowded. I and my wife swam to shore. When we reached the shore my wife died and I saw my children – they were dead.” He told us that his sister and another female relative also died.”

On the shore the MSF team saw 58 dead bodies, some with visible signs of beatings. Among them were a large number of women and five children, the youngest one MSF staff was later told was eight months old.

MSF was told by the passengers arriving on 11 April 08 there were 19 dead and some others missing. MSF counselled a 40-year old woman from Bossaso whose husband was killed by the smugglers and who came with her five children. She recounted:

**“It was deep and dark, some people could not swim, because they were in the hold for 40 hours. And you can imagine the situation in the hold. It was very crowded, people sit on you; you feel you suffocate.. Some of the people could not swim because they could not move. While landing, they died....As the boat was coming towards the shore, my husband was getting the children ready. He wanted to give them biscuits, but the smugglers threw the biscuits in the sea. Then suddenly the smugglers threw him into the sea by grabbing his legs. He resisted, holding on to the boat, but they hit him with knives. Then the smugglers threw my two daughters into the sea. I held on to my youngest son. The children were crying. But thank God there was a young man who could swim very well who helped my children to reach the shore. We slept on the shore. In the morning, I saw the dead body of my husband.”**

### 1.2.3 Shoots fired by the Yemeni Security Forces

When boats are intercepted by the Yemeni coast guard or by the military from the shore, shots are sometimes fired to deter the smugglers. We have documented 11 cases where this occurred. Some soldiers we met on the shore said that they had orders to fire shots only once people had disembarked, but this was not always the case, as passengers told us. When shots are fired, the boats sometimes return to the high sea. A Somali man, whom we interviewed on 1 Oct. 07 recounted,

**“They fired shots at the boat, we were afraid the boat would capsize. One Somali man jumped into the water when the shots were fired and we don’t know if he died. Then the boat went back away into the sea and we were lost — we did not know where we were going. We were in the sea for six more hours. We were ready to die, because they beat us many times, we were sitting in a bad position, we were thirsty—.”**

When boats are intercepted by the military and shots fired the boats sometimes return back to Bossaso with passengers on board. MSF encountered several such cases. For instance on 25 Sept. 07 the MSF team found a group of seven Somali men and a four-year old boy near Al Nusheima. They told MSF that they had arrived one hour before on a boat with between 120 and 150 passengers. When asked about the other passengers they explained that when the boat came near the shore, the coast guards fired in the air and only they decided to jump. One of them said that he took the child with him and jumped to the sea and came to the shore safely. When MSF asked them the reason why they jumped, they explained, “We all preferred to jump instead of being on the boat, because the trip was very difficult for us.”

### 1.3 Abuse after landing

**“They (the refugees) suffer on the sea and they suffer on land.”**

Fisherman in Al Nusheima (12/10/07)

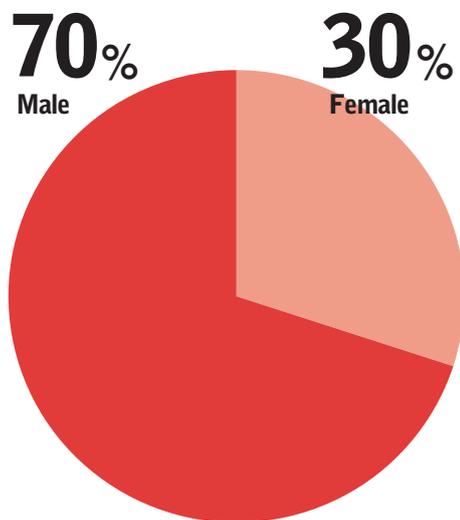
Once the refugees and migrants have arrived ashore, their plight is not over. When the Yemeni military encounter the refugees and migrants on the shore, they usually search them for weapons and drugs. If there are Ethiopians in the group of new arrivals, they are usually separated from the Somalis, as they are subject to arrest and deportation. Thus, many of the Ethiopians will start to walk soon after they arrive to avoid being apprehended by the military.

MSF documented ten cases of extortion, with Yemeni military forcing the refugees/migrants to hand over their money and/or any valuables they had left. However, in several other cases, interviewees told MSF that the military helped them, for instance shining their lights on the coast to indicate the direction of the shore in the case of arrivals at night (e.g. 15/12/07) or giving them food and water.

On 13 Oct. 07 a group of four men, one Somali and three Ethiopians told us that, as they were waiting for the truck to go to Mayfah reception centre, the military came in a car, stopped and forced them to hand over their money.

On 22 March 08 MSF counselled an 18-year old Somali woman because she was silent and afraid. She explained that she was beaten by the military, who searched her and took US\$ 50 from her. A 14-year old girl from Johwar who travelling with her brother told us that she was with the same group of five Somali women who were all searched. She recalled that she was forced to take off her clothes and beaten when she refused.

Gender of People interviewed



## 2 Composition of the new arrivals

### 2.1 Gender

Of the new arrivals we interviewed, 70% were men and 30% women. This reflects the general composition of the new arrivals on the coast.<sup>16</sup> The majority of those interviewed, 54%, were married, while 46% were single. The majority were travelling with family or friends, i.e., 57%, while 43% said they were travelling alone. Most of those travelling alone were men. The majority of the women we interviewed came either with their husbands, relatives or friends. However, a considerable number, 27%, said they came on their own.

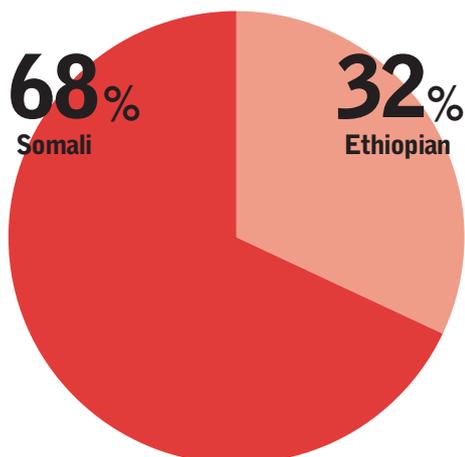
Although most women left because of conflict, a number of them left their families behind because they had no option but to go and find a job elsewhere to support their children. While the majority of those seeking to go abroad to provide for their families were men, there were also a number of women who took the perilous journey to find a job. For instance, on the first arrival the MSF team assisted on 8 Sept. 07 we spoke to a 19-year-old Somali woman who had come with her sister and another young woman of the same clan. She told us:

**“We are from Mogadishu and left our country because of the war, poverty and the difficulty to find a job. I am the oldest, there is nobody to help the family. I have brothers and sisters at home. I came to Yemen to find a job and to send money to my mother who is in a very bad situation.”**

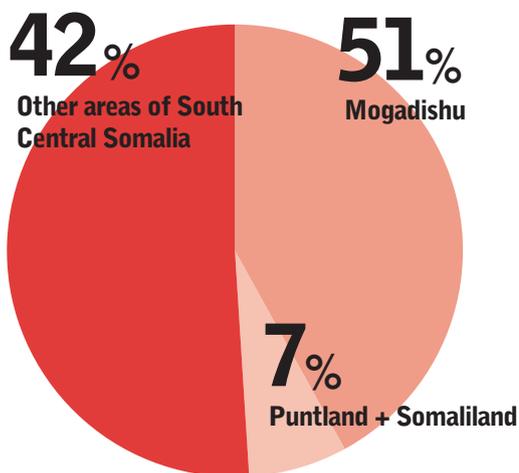
Sometimes even when they are pregnant, women risk their lives on the dangerous journey to assure the economic survival of their family. Thus, during March MSF assisted eight pregnant women at the ARC. Most of them had come without their husbands.

<sup>16</sup> According to UNHCR statistics, 79% of those arriving at Mayfah Reception Centre in 2007 were men, 21% women. For the first months of 2008, the percentage of women was slightly higher, 28%.

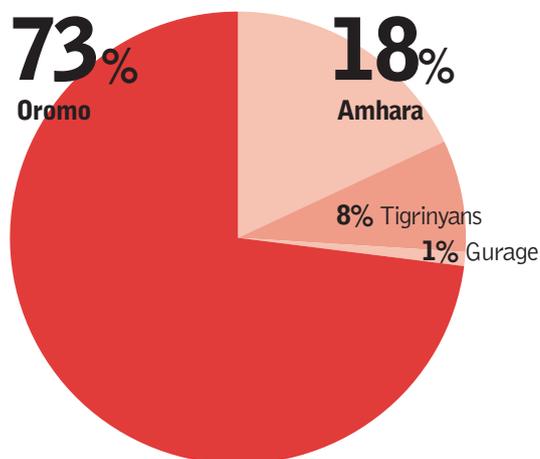
## Ethnic Origin of Interviewees



## Region of Origin of the Somalis interviewed by MSF



## Ethiopians-Ethnic Group of those interviewed by MSF



Families are frequently separated, with one or several family members taking the journey and the others staying behind, sometimes because they cannot afford to all come at the same time. On 3 Nov. 07 we spoke to a 28-year-old mother of five children from Mogadishu who had come with three of her children, aged four, five and six years, leaving her husband and two other children in Somalia because they did not have enough money for all of them to travel.

## 2.2 Age

The majority of the people taking the dangerous voyage were in their mid-twenties. There were a few older people, in their forties and fifties, and also some young children. Out of the total number of passengers MSF assisted between September 2007 and April 2008 about 1% were children under 15 years of age. The young children we encountered were with their families or, in cases where the parent with whom they were travelling had died, with relatives or friends of the family. Sometimes there were also babies on board.

A relatively large number of adolescents, the majority between 16 or 17 years old, undertook the journey to seek employment and provide for their families.<sup>17</sup> Eight percent of our interviewees were adolescents under 18, most of them 16 or 17 years old, the youngest 14. Most of them told us they left in order to find a job to support their families. As a 16-year old girl from Mogadishu, who was travelling on her own, put it, “I hope to find a job as soon as possible to support my family in Somalia, because they live in very bad conditions,” adding, “I want to bring my parents to Yemen, they do not have anything to eat.” (04/11/07)

## 2.3 Ethnic origin

Of those interviewed, 68% were Somalis and 32% Ethiopians, one was Eritrean. This percentage reflects the composition of those new arrivals MSF assisted.<sup>18</sup>

Half (51%) of the Somalis who gave information on their region came from Mogadishu, most of the rest (42%) from other regions in South and Central Somalia, with a few also from Somaliland and Puntland (7%).

73% of the Ethiopians who gave information about their region told MSF they were Oromo, the rest Amhara (18%), Tigrinyans (8%) and Gurage (1%). However, the information regarding the number and ethnic composition of Ethiopians arriving at the shores of Yemen needs to be taken with caution, as this does not include persons coming from the Somali region (Ogaden).<sup>19</sup> Ogadenis are ethnic Somali and will present as such and are likely not to specify their region. In March and April 2008 we spoke to two passengers who presented as Somali and told MSF that they came from Ogaden. It is interesting to note that in Bossaso the ethnic Somalis from Ethiopia are actually considered IDPs and not refugees by the Puntland government, UNHCR and the other organizations.

<sup>17</sup> According to UNHCR statistics, one third of those arriving at Mayfah during 2007 were under 18.

<sup>18</sup> According to UNHCR statistics, 2007 about 61% of the new arrivals were Somalis and 39% Ethiopians, while for the first 4 months of 2008, the ratio was 65% to 35%.

<sup>19</sup> Thus Ogadenis are not reflected in the graph.

### 3 Reasons for leaving

#### 3.1 Somalis

Most of the Somali respondents listed multiple reasons for leaving, with violence and/or insecurity being the main one –“the interminable attacks,” as a 20-year old student from Mogadishu put it (04/01/08). Many also noted that it was impossible for them to find or continue to work and thus support their family. Several people MSF interviewed described that they had been working at the Bakara market in Mogadishu but because of the recurring fighting they could no longer go there and thus their source of livelihood had been destroyed. Very few Somalis gave lack of employment as primary cause for leaving their country. Some Somalis mentioned that they left to go and study, as due to the war it was very difficult to get an education in Somalia.

Civilians victims of war: arbitrary detention, killings, forced recruitment and rape

Many of the Somalis, especially those coming from Mogadishu, spoke about the intensification of fighting and explosions, saying that they felt increasingly threatened and insecure. Since the beginning of 2008, MSF has received more testimonies of persons directly affected by the conflict. They described attacks on their houses or places of work, killings of family members or friends and arbitrary arrests.

**“I am from Mogadishu, I had a family there. I was working as a driver. One day, I went to work as usual and when I came back from work, I saw a lot of people who gathered around my house. A missile had fallen on my house, killing my wife, two of my children and my mother. Fortunately one of my children survived, because he was not at home that moment, he was at Quranic school. After that, I decided to leave Somalia with my son.”**

32-year old driver from Mogadishu (13/03/08)

**“Fifteen days ago we were in our house with our father. In the middle of the night we heard a knock at the door. We got very scared, because this was not a reasonable time for anyone to knock. We gathered together in one room and father went to open the door. When he opened the door, armed men grabbed him and beat him. They took him with them in their car. Later on the following morning we found father’s dead body in the neighbourhood. During these days there are a lot of dead bodies of young Somali men in the streets of Mogadishu... We felt that we will no longer be safe in Mogadishu**

## **and that is why we decided to leave. Nowadays, Mogadishu is a city of the dead.”**

17-year old Somali girl from Mogadishu who came with her brother and sister (18/02/08)

Increasingly, young Somali men leave Mogadishu because they are afraid to get arrested or drawn into the fighting. For instance, on 27 March 08 a group of nine young men from Mogadishu in their late teens and early twenties explained to us,

**“We lived in Mogadishu all our lives, but the situation is getting worse by the day. When they see us, soldiers arrest us because they think we are with the opposition and put us in jail. They interrogate and torture us. We are also afraid of the other side, because every day they are looking for young men to join them.”**

During March MSF provided medical and counselling assistance at the Ahwar Reception Center (ARC) to three women who had been raped in Somalia and interviewed two of them.

A 27-year old woman from Burkhaba told MSF staff that she had come to Yemen once before with her husband in 2001. They went to Saudi Arabia where they stayed in her husband’s mother’s house until she, and later on her husband, were deported. She described what happened to her after her return:

**“Back in Somalia I started working in a restaurant. One day, when I finished my work, I wanted to go back home, it was around 9.00 at night, three armed men, came and stopped me in the middle of the street, they took me by force and raped me one by one. I was crying that time. My husband heard about the rape and divorced me. I could not stay in Somalia after this scandal, people always talking about me.”**

(25/03/08)

Some other women feared to be raped if they stayed in Somalia. For instance, on 24 Dec. 08, MSF staff counselled a Somali woman who told us she left Somalia because the situation was getting worse. She was also afraid that she would be raped because she had heard of such incidents.

### 3.2 Ethiopians

#### Lack of work, discrimination, political persecution, conscription

The majority of Ethiopians interviewed gave lack of work and/or poverty as their main reason for leaving, most of them indicating that they wanted to go to Saudi Arabia to work.

However, one fourth of the interviewees mentioned insecurity or political reasons, with some also stating lack of work. The main reasons presented were discrimination on grounds of religion and/or ethnicity; arrests and imprisonment on grounds of belonging or suspicion of belonging to the opposition Oromo Liberation Front, or having voted for the Coalition for Unity and Democracy (CUD) in the 2005 elections, and fear of conscription into the military.

Seven interviewees (six Oromo and one Amhara) spoke about discrimination. Several spoke of persecution on grounds of religion. In April two of the interviewees, one a Quran teacher, the other a student, described persecution on religious grounds. The 40-year-old Quran teacher, an Oromo from Harrer, explained, "My two brothers were arrested by the government, they capture you without any reason. They do not like our people, the Oromo. I was teaching the Quran. I had 50 students, but day after day, I was losing some students and when I went to their families to ask them, they told me that their children were arrested by the government." (24/04/08)

Six Oromo told us that they left either because they were suspected of belonging to the Oromo Liberation Front (OLF) or because of supporting the OLF; five had been arrested and imprisoned on those grounds. A group of young Oromo described how they felt increasingly insecure. "We have no dignity. We are not respected in our own country. When we see the military we are shaking with fear." (24/04/08)

Three other Ethiopians mentioned fear of persecution related to the 2005 presidential election. A 20-year old Oromo woman from Arusi, travelling alone, reported that she and her husband were arrested after the presidential elections three years ago because they voted for the opposition Coalition for Unity and Democracy (CUD). She was released after one week because she was pregnant. Her husband was kept in prison and died there. As she could not provide for her three children, she left them with her mother and came to Yemen (25/04/08).

Also, during counselling, several other Ethiopians explained that they were being persecuted by the government for being suspected of supporting the opposition or belonging to a different ethnic group than that holding power.

Three Ethiopian men said that they left to avoid being conscripted. As a 20-year old man from Bale put it "Oromo are forced to go and fight in Mogadishu. We did not want to fight so we ran away." (15/12/07)

Arrivals from the Ogaden/Somali region normally present as Somalis, as they are ethnic Somalis and will not necessarily give more detail about where they come from. Thus, we were able to interview only two persons from that group, a 28-year old farmer who gave insecurity as reason for leaving, and a 20-year old man from Jijiga who said he left because of lack of job opportunities and insecurity.

#### 4 Travel to Bossaso – a perilous journey

The journey to Bossaso from either Somalia or Ethiopia is expensive and hazardous. People have to mobilise considerable resources to pay for the trip, with their families scraping together money for the different segments of the journey, sometimes having to sell assets or incur debt.<sup>20</sup>

Because of time and other constraints we could only ask about 80% of those we interviewed about conditions in Bossaso and during their travel to Bossaso. The majority told us that their trip to Bossaso took between a few days and two weeks. In some cases, when there was fighting along the road, or when they had to stop along the way to work to earn money to continue, it took longer.

Refugees and migrants MSF interviewed reported many abuses during the trip, including being stopped and forced to pay at numerous checkpoints along the road. They also reported attacks by armed bandits and being robbed of their money and belongings, with passengers killed in several cases.<sup>21</sup>

Since January 2008, interviewees reported an increase of checkpoints along the road from Mogadishu to Bossaso, with more people reporting that they were stopped and robbed. In March, half of the interviewees reported being stopped at checkpoints and robbed, with two of them telling us that a passenger in their car died because they were shot at. A 23-year old Somali man who was travelling with his cousins told us, “There are more checkpoints between Johwar and Bossaso. At some they were firing guns to stop the car. We managed to pass most of the checkpoints, but at one checkpoint in Bandaraley before Galgaduud region a passenger from our car was killed.” (02/03/08)

Ethiopians also reported that they encountered more problems at checkpoints and were robbed of their money. A group of three Ethiopian women whom we interviewed at ARC on 13 April 08 described how they were robbed and barely escaped sexual violence. One of them, a 20-year old Amhara from Wollo region recalled:

**“We were travelling with a group of four men. In Hartischek at the Ethiopian/Somali border we paid a truck driver to take us to Buro’o. On the way we were stopped by robbers in a small car. They were armed with pistols and knives. They ordered us to get out and took us to the bush. There, the robbers ordered the men to take off their clothes and took their money, after that they ordered us to do the same. They took our money, even the money that we had hidden inside our hair. Then the robbers ordered the women to go with them in their car. We ran into the bush, while the men were throwing**

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<sup>20</sup> ICMPD, p. 17.

<sup>21</sup> The recent report by Amnesty International, [Routinely Targeted: Attacks on Civilians in Somalia](#), AI Index AFR 52/006/2008 also refers to a number of such attacks, see pp 20-21.

**stones at the car. We were shot at, but finally we managed to escape and kept going until we reached a village.”**



Internally Displaced Person (IDP) settlement in Bossaso

## 5 Stay in Bossaso – Conditions

The boat journey across the Gulf of Aden starts from Bossaso, a big bustling port town in Puntland in the Northeast of Somalia. With 250,000 inhabitants, Bossaso is the main Somali seaport for trade with Yemen and the Gulf States. Puntland, which declared itself an autonomous region in 1998, was until recently considered relatively safe compared to the rest of Somalia. Since the outbreak of the civil war in Somalia in 1991, people from South and Central Somalia fled to Puntland, many of them to Bossaso. While a number of them continued across the Gulf of Aden, many others stayed. There are currently some 30,000 people living under harsh conditions in the Internally Displaced Person (IDP) settlements scattered throughout the town.

Since the second half of 2007 security in Puntland has deteriorated. It became more difficult for humanitarian organisations to operate, with several attacks and kidnappings of journalists and foreign aid workers, including two MSF expatriate staff in December 2007. Consequences for the displaced were reduction of expatriate presence and lack of adequate humanitarian assistance, at a time when the international community had finally decided to dedicate more resources to improve the living conditions of the displaced in Bossaso. Refugees and migrants waiting to cross have also been affected directly by increasing insecurity.

About half the interviewees said that they stayed one month or less in Bossaso, while a number said they stayed several months, and a few one year or more. In several instances people were staying longer to earn money to pay for the journey.

The majority of the newly arrived Somalis (including those coming from the Ogaden region) stayed with relatives or friends in the IDP settlements. Living conditions there are extremely precarious. The large majority of shelters in the IDP settlements are makeshift round or oval structures with a frame of wooden sticks covered by pieces of cardboard, sacks, plastic bags etc. Hygiene is very poor, with garbage, especially plastic, abundant. The lack of latrines is a problem, as landlords are resistant to the construction of solid structures. Health coverage and access are poor. There is no general food distribution and malnutrition is a major concern. A MSF nutritional survey of children under 5 years in 907 households undertaken in November 2007 found a global acute malnutrition rate of 23.3% and 4.9% of severe acute malnutrition.<sup>22</sup> A global malnutrition of over 10% indicates a crisis in food security. This means that there is neither enough food nor adequate access to any food. This corresponds to the findings from our interviews, as a number of people told us that their economic situation was very difficult in Bossaso and that they could only afford one meal per day.

<sup>22</sup> MSF and Epicentre, *Retrospective Mortality, Nutrition and Measles Vaccination Coverage Survey, Bossaso, Somalia, November 2007*, December 2007.

The situation in Bossaso is worse for the Ethiopians. The majority do not have relatives or friends to stay with and are highly vulnerable to exploitation and abuse by the smugglers. Their living conditions are harsh, with many of them staying in the port area, sleeping on cardboard on the rocky soil in an open compound. Latrines and washing facilities are lacking.

From February on, several interviewees told MSF that the situation was getting worse in Bossaso, both economically and in terms of increasing insecurity. A 50-year-old Somali man from Afgoye who had left his wife and seven children there because they did not have enough money for all of them to come explained, "In Bossaso I was working selling vegetables in the market. A group of five men came and took all the money I had. They have guns and knives. I could not do anything, because if I talk, they will kill me. After that I decided to quit Somalia." (25/02/08)

The situation was getting more difficult, especially for Ethiopians - excluding Ogadenis who are ethnic Somalis. Several of the them mentioned the increasing animosity towards them due to the presence of Ethiopian troops in Somalia. On February 5, 2008 a bomb exploded in the port area, killing 22 Ethiopians and wounding 74, many of them severely. Several of the interviewees spoke of Ethiopians feeling insecure after the bomb attack.

We assisted several Ethiopians at the ARC who had been injured by the bomb explosion in Bossaso, including a 20-year old Amhara man from Wollo. He told us:

**"When I was in Bossaso, once I went with my friends to have dinner, it was around 8:00 pm. We went to a restaurant near the port, we were all eating the dinner. I finished my dinner. I was the first one who finished and I went out, suddenly, I heard an explosion of a bomb, I saw many of my friends who died in front of me, there was a lot of blood, I was also injured on my hand and that time, I did not know anything, I found myself in the hospital where I was treated. I stayed 20 days in the hospital, after that I decided to quit Bossaso."**

(10/03/08)

Before setting out on the boat journey, people spend an average of two days and two nights on the shore near the mountains about 2 1/2 - 3 hours walking distance from Bossaso. Many reported that food was prohibitively expensive there. A few stated that they had to wait longer near the shore for the boat to fill up. A 17-year old woman who was travelling with family members told us that, "we had to wait on shore 8 days and had nothing to eat during these days waiting for the boat" (03/02/08). A few interviewees referred to violence while embarking, but we could not get more information. A 29-year old Amhara from Wollo told MSF, "Gunmen stole our money while we were waiting for the boat." (05/01/08)

The fact that people still make the perilous journey from Bossaso, notwithstanding dissuasive campaigns by International Organization

for Migration (IOM) and UNHCR pointing to the dangers of the trip, illustrates the desperate situation of the displaced. They feel they have no other option than to risk their lives on the perilous voyage. As a 20-year old man from Mogadishu told us, “I met a lot of people in Bossaso waiting to go to Yemen. They don’t want to go back to Mogadishu. They prefer to die at sea to going back to the war.” (12/12/07)

## 6 Plans for the future

Asked about their plans, many new arrivals answered, “to live in a safe place and find a job.” The majority of the Somalis said that they wanted to stay in Yemen and work, while most of the Ethiopians said they want to go to Saudi Arabia and find a job. A smaller number of Somalis also expressed an interest in going to work in Saudi Arabia. Several of those we interviewed had relatives in Yemen, and a few of them in Saudi Arabia, and said they wanted to join them. A few young Somalis said that they had come to study, since it was very hard to get an education in Somalia. Some young Ethiopians also said they left to get an education.

It was surprising to note that a substantial number of the new arrivals, most of them Ethiopians, told us that they had come to Yemen previously. A quarter of the respondents during the period from January to April 2008 told us that this was not their first time. The majority had gone once before and had been deported from Saudi Arabia. A few of them said that they had travelled this way several times. While most of the Ethiopians who responded to this question told us that they were deported from Saudi Arabia, a 20-year-old Amhara from Wollo, injured by the February 2008 Bossaso bomb blast, described how he was arrested in Yemen and deported, saying:

**“This is the third time I came. The first time, I tried to go to Saudi Arabia, but they arrested me and I was deported to Ethiopia. The second time, when I arrived in Yemen, the coast guards arrested me and sent me to Sana’a where I was in the jail for 20 days, after that I was deported to Ethiopia.”**

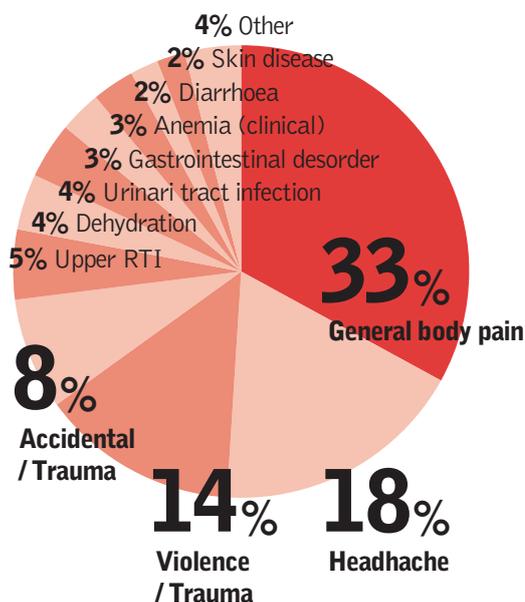
(10/3/08)

The MSF team provided counselling to him because he was concerned about his injury and afraid of being arrested again. The fact that he, like some others, took the perilous journey again, at great risk to his life, illustrates their desperate situation.

# IV Medical and humanitarian consequences

## Main pathologies among the new arrivals in MSF's project, September 2007 to April 2008

Source: MSF Spain data.



A group of refugees treated for acute watery diarrhoea in Ahwar, May 2008

## 1 Medical impact

MSF has focused on the provision of first aid and medical assistance, addressing conditions resulting from the boat journey, as well as ailments that arose during the patients' travel to Bossaso and their stay there.

Since the start of the medical activities at the arrival sites, MSF undertook 962 consultations. From 9 March 2008, when the ARC was opened until 30 April 2008, 772 medical consultations were performed. The total number of consultations includes consultations for 14 children under five years of age and for 18 pregnant women. The reasons for the comparatively higher number of consultations at ARC is due to the fact that people stay for two or three days at the ARC and thus have the opportunity to access the health services.

The profile of consultations, has been the same in both the arrival site and at ARC, with additional diagnoses identified at ARC.

During the period covered, the general trend of morbidity was: general body pain (GBP) 33%, headache 18%, violent trauma 14%, and accidental trauma 8%. All these conditions are related to the extreme hardship patients suffered during their journey (sitting in a very crowded, uncomfortable position for two days or longer, exposure to the sun without enough water and food, beatings and other forms of violence as well as the uncertainty of what was going to happen during or after the journey). Other complaints, such as dehydration, urinary tract infections, diarrhoea, skin diseases, or accidental trauma are related to conditions during the trip as well as problems encountered at disembarkation (injuries sustained when being forced to jump from the boat and on the rocks offshore).

Violent trauma, representing 14% of the diagnoses, was inflicted on passengers during the trip in the form of beatings to keep them from moving and/or force them to jump from the boat when arriving near the shore. Implements used include belts, sticks, rifle butts and knives. Furthermore, kicking to the chest was a frequent complaint from patients. In two life-saving cases the MSF team applied cardiopulmonary reanimation required in response to violent trauma.

The diarrhoea might be related as well to pre-existing conditions in the countries of origin of the new arrivals, Somalia and Ethiopia, where the problem of water availability and quality frequently causes acute watery diarrhoea outbreaks and sometimes even cholera. Anaemia and weakness may also be related to the poor intake of iron in the regular diet as well as the long trip that some have endured to reach the port of Bossaso.

The increase in the diagnosis of sexually transmitted Infections (12 cases between March and April 2008) could be an indicator of suspected cases of sexual and gender-based violence (SGBV), although none were reported to the clinic.

Two referrals were made to Al Gomhoria teaching hospital in Aden, for further investigation and more critical care (cerebral oedema due to beating and a gastrointestinal haemorrhage due to a stress-related duodenal ulcer) After improvement, the patients were taken to Kharaz camp.

As for communicable diseases, there has been only one confirmed case of cholera among the new arrivals during the time covered by

this report. However, MSF has been monitoring the morbidity profile of the places of origin and is prepared to intervene to contain potential outbreaks of cholera, malaria, measles or meningitis.

## 2 Psychological consequences

Since the opening of the project in September 2007, MSF has undertaken psychosocial activities for new arrivals providing individual and/or group counseling sessions. Psychological care is provided at the landing site and in the Ahwar Reception Centre.

Most of MSF's beneficiaries in the Ahwar project have experienced traumatic events in the past, both at their place of origin and during the journey. Those arriving often present with a series of symptoms, typical in the light of their experiences. The resulting modifications to their psychological equilibrium affect their physical health as well as their family and social lives.

The consequences of past and present distress factors are observed daily by the medical and psychosocial teams working in the Ahwar Reception Centre. The most frequent psychosocial problems encountered amongst the MSF beneficiaries are explained below.

### 2.1 Traumatic grief

Frequently, MSF teams provide counseling to people having witnessed the death of a significant person in the midst of horrific, life-threatening circumstances at the place of origin and/or during the journey. This loss of loved ones under traumatic circumstances is devastating and over time greatly complicates the grieving process.

Depressive symptoms often occur in conjunction with this complicated grieving process and include feelings of sadness, hopelessness, sleep problems (difficulty in falling asleep and premature awakening), eating problems (lack of appetite, weight loss), and profound feelings of uselessness and guilt. These extreme, negative emotions become very painful, difficult and challenging, especially for all children and adolescents who underwent the ordeals of the journey.

### 2.2 Traumatic stress

MSF teams have to deal on a daily basis with acute stress reactions caused by the violent events that led to displacement and other events that took place during the journey. Traumatic stress is caused by confrontation with helplessness and death, and a complete loss of control.

Stress reactions are expressed in different ways. Some patients express their emotions by crying, screaming or panicking. Others stay quiet, seem detached and do not show any emotional reactions. They may have difficulties or are unable to remember an important aspect of the traumatic event. Others avoid any stimulus: thoughts, feelings, activities, places and people that recall the traumatic event. However, intrusive memories continue to cause the survivor agony. Some patients may demonstrate a state of hyper vigilance, disturbed sleep, have difficulties in concentrating and are easily startled.

Many patients present to the MSF medical team with psychosomatic problems, as patients translate their suffering, distress or sadness into

physical signs and develop symptoms such as general body pain, headache, feeling of suffocation, vomiting. The expression of those reactions is regarded as normal given the situations the individual has had to confront, even if they may seem ‘inappropriate’ or ‘abnormal’, but this does not mean they are easy for the refugees and migrants to cope with.

For someone who has experienced trauma, life seems to have lost its meaning and predictability. Uprooting, the experience of being forced to leave one’s familiar surroundings, and having to settle in a new and unfamiliar environment, are common features among the new arrivals. They did not have time to absorb the shock that they have to face a new situation: they will have to continue to live in a precarious state (in the refugee camp or elsewhere, in poverty, and, for non-Somalis, illegality), leading to extreme uncertainty and anguish in facing the future.

# V

## Conclusions and recommendations

### 1 Conclusions

This report has documented the scope and intensity of the abuses suffered by the refugees, asylum seekers and migrants crossing the Gulf of Aden. Fleeing violence, conflict and extreme economic hardship, they embark on a dangerous journey. Many lose their lives. With the intensifying conflict and worsening humanitarian situation in Somalia and drought in parts of Ethiopia as well as the conflict in the Ogaden region, the number of people taking the perilous journey will continue to increase.

Refugees and migrants, in view of a lack of alternatives, have to use the services of smugglers to cross the Gulf of Aden. The brutal smugglers take advantage of the extreme vulnerability of their passengers. Since the beginning of the project in September 2007, MSF has witnessed the medical and humanitarian consequences of the abuses by the smugglers and provided assistance to those who survive the voyage. People arrive exhausted, many of them ill and emotionally shattered. MSF teams have treated patients for injuries from severe beatings, dehydration, respiratory and other problems. Many patients presented with general body pains or headaches – physical manifestations of the psychological consequences. Many survivors have not only been through traumatic events themselves but they have witnessed killings on the boat or lost loved ones from violence or drowning.

The majority of those crossing were aware of the potential risks, but told MSF that they had no choice. For them taking the dangerous trip does not constitute an option among several, but their only survival strategy to escape violence, insecurity and destitution. Thus, the common perception of migration being primarily caused by economic hardship does not correspond to the harsh realities witnessed over and over again in the interviews done by the MSF teams.

Imposition of stricter border controls cannot be the answer to an increase in the number of people fleeing. Experience from other regions – the Mediterranean, for instance – has shown that restrictive policies have contributed to the rise in smuggling of migrants, to shifts in routes entailing longer and more dangerous journeys and

an increase in abuses.<sup>23</sup> Refugees and migrants need to be provided with alternatives to putting themselves in the hands of brutal smugglers. The Migration Policy Framework for Africa adopted by the African Union in June 2006 proposes *inter alia* “developing and supporting legal avenues for economic migrants to seek employment.” The Policy Framework also recommends to “prosecute smugglers and others involved in such [smuggling] activities, while... providing humane treatment for migrants.”<sup>24</sup>

Information campaigns about the dangers of the journey<sup>25</sup> should not be used as deterrent strategies intended to dissuade people from exercising their fundamental rights to freedom of movement, to freely leave their own countries, and to seek and enjoy asylum.<sup>26</sup>

While Yemen has traditionally been welcoming to new arrivals, especially Somalis, the high influx of refugees and migrants poses a major challenge for the country. As was recognized at a Regional Conference on Refugee Protection and International Migration in the Gulf of Aden in Sana’a (19 to 20 May 2008) more international assistance is urgently needed. It was noted that measures to protect the rights and welfare should include all new arrivals regardless of their ethnicity and status.

So far, the humanitarian response to those arriving at the shore as well as to the refugees and migrants already in Yemen has been far from adequate. The response capacity of the actors currently present at the coast needs to be strengthened. At the same time, as there are few actors on the ground, more organizations should intervene to address the impact of this humanitarian crisis.

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23 ICMPD, p. 33; Grant, p. 5.

24 [The Migration Policy Framework for Africa](#), adopted by the Executive Council of the African Union, 25-29 June 2006, Doc. EX.CL/276 (IX).

25 Such campaigns are currently carried out by IOM and UNHCR in Somalia and Ethiopia, see Mixed Migration Task Force report, p. 18; and 10 Point Plan of Action for Ethiopia.

26 Human Rights Watch, International Catholic Migration Committee, World Council of Churches et al. [NGO Background Paper on the Refugee and Migration Interface](#) presented to the UNHCR Global Consultations on International Protection, Geneva, June 2001, p. 13.

## 2 Recommendations

### To the Government of Yemen

To play a stronger role regarding its responsibilities for the protection of and humanitarian assistance for refugees, asylum seekers and migrants by:

- strengthening the capacity of local and national authorities to respond to the needs of new arrivals;
- allowing non-Somalis access to asylum procedures;
- ensuring that Security Forces are aware of and respect the rights of new arrivals.

### To UNHCR

To assume a more pro-active and stronger role according to its assistance and protection mandate by:

- increasing response capacity on the coast of Yemen to intervene quickly to provide first assistance and protection to the new arrivals;
- improving protection and assistance for refugees and migrants in the Reception Centres and the Refugee Camp.

Specific recommendations for the Ahwar Reception Centre include:

- ensuring timely registration of new arrivals;
- providing new arrivals with information in their respective languages about the options available to them;
- improving the conditions of shelter;
- providing sufficient and culturally appropriate food rations;
- providing timely and appropriate transportation.

### To donor and other Governments

- To recognize the consequences of the dangerous journey on those crossing the Gulf of Aden and to take measures to address and prevent their suffering.
- To provide additional support for the Government of Yemen, UNHCR and non-governmental organizations to allow them to respond adequately to the needs of refugees, asylum seekers and migrants arriving in Yemen.

# Annex I

## MSF in Yemen

### Past interventions

MSF arrived in Yemen during 1986 and worked to improve immunisation coverage (diphtheria, tetanus, polio, pertusis, tuberculosis, measles) in all southern governorates. After unification, MSF responded to a request by the health authorities and implemented a five-year Primary Health Care project in Dhi Sufal (Ibb Governorate). From 1992-94 MSF provided medical assistance in the refugee camp (first in Sha'ab in Aden, and then in Al Kod in Abyian Governorate). In addition, MSF intervened in several emergencies (cholera in 90, bloody diarrhoea in 93, civil war in 94, floods in 96 and malaria in 98).

From 1998-2002 MSF carried out two projects with the objective to improve access of the poorest sectors of the population, particularly women and children, to health care in the mountainous district of Hazm Al Udayn in Ibb Governorate and in the urban area of Aden Governorate. In the meantime, MSF continued to provide technical support to the district of Dhi Sufal as needed and to respond to emergencies.

### Current MSF projects

In 2007, MSF returned to Yemen, working under an agreement with the Ministry of Planning and International Cooperation and a sub-agreement with the Ministry of Health. In September 2007, MSF established a project on the southern shores of Yemen to provide medical, psychological and humanitarian assistance to new arrivals. At the same time, MSF began an intervention in the North of the country (Saada region), supporting 3 hospitals.

### MSF's project on the Southern Coast of Yemen

The project has two components: providing medical, psychosocial and humanitarian assistance to refugees and migrants arriving at the coast in Abyian and Shabwa Governorates and advocacy, drawing attention to medical and psycho-social consequences of the abuse and hardship they suffer in order to seek an improvement in their situation. MSF provides first assistance to new arrivals on the coast and operates the emergency health centre in the newly established Reception Centre at Ahwar (ARC). Given the delays in setting up the ARC MSF focussed the first six months on assisting new arrivals at the coast between Shurqa (east of Aden) and Al Eyn (near Al Nusheima).

MSF covers the 270-km stretch of the coast with mobile teams and has established a system of focal points in the communities along the coast to alert MSF when boats arrive. When new arrivals are signalled, the MSF mobile teams go to the coast to provide emergency medical and psychosocial assistance, food and water and kits with non-food items. The kits include clothing such as T-shirts and sarongs for men, dresses and scarves for women, small T-shirts and shorts for children, sandals, soap, and, for women, sanitary towels. After the new arrivals reach the ARC, the MSF team screens them and provides medical and counselling support to those who need it. MSF staff also interviews some of the refugees and migrants to find out more about their background, their reasons for leaving and their journey.

From the beginning of the project in September 2007 to the end of April 2008, MSF has provided assistance to 6,087 refugees and migrants arriving at the coast of Abiyah and Shabwa Governorates. The number of medical consultations was 1,734. In March and April 2008, when MSF started to undertake systematic individual counseling sessions at ARC, 81 persons received individual counseling.

From September 2007 to February 2008, MSF could assist refugees and migrants only at the arrival site. Medical services provided were mainly general consultation, dressing of wounds, and emergencies dealing with severe cases of dehydration and the consequences of serious trauma. With the opening of the Ahwar Reception Centre, services were extended to complete outpatient services for screening, diagnosis, treatment and follow-up of infectious diseases. MSF also provides antenatal care for pregnant women. Children under age five are checked systematically and given vaccination against measles and tetanus. Women between 15 and 45 are vaccinated against tetanus. MSF provides treatment for sexually transmitted infections and a full treatment programme for SGBV survivors.

## **Main operational challenges**

One major challenge is the fact that boats arrive over a large stretch of coast, depending on weather conditions and patrolling activities. In addition, the majority of the arrivals take place at night, as the smugglers want to avoid being detected by the Yemeni security forces.

Looking at patterns of arrivals of the boats over the past years, MSF concluded that they take place at different entry points along a coastline of about 500 kilometres, starting East of Aden and going beyond Al Mukallah. MSF shares coverage of the entry points along the coast with SHS, UNHCR's implementing partner in order to ensure a better humanitarian response.

The length of the coastline and the fact that smugglers often change the points of entry represent a formidable challenge in operational terms. MSF's objective, in addition to providing medical and psychological care at ARC, is to provide emergency medical, psychological and humanitarian assistance at the arrival points on the shore within two hours of arrival. To reach this objective, MSF teams undertook daily patrols along the coast from September to December 2007. Given the fact that points of arrival vary along the coast and that most arrivals take place at night, the results of this surveillance system were only partially satisfactory.

Thus, MSF established an "early warning strategy" through designating focal points in four strategic villages along the shore. When an arrival takes place, the MSF Focal Persons, appointed in each of these villages, have two main duties: first to immediately inform the MSF teams in Ahwar and second to provide immediate humanitarian response in the form of distribution of humanitarian kits, including food and non food items. MSF has teams on standby 24 hours per day for seven days per week. After receiving the information and crosschecking the security situation, the MSF teams move to the arrival point to provide first assistance. Since the implementation of this system from the beginning of 2008, the MSF teams considerably improved their timeliness of reaction, assisting an estimated 70% of the arrivals in MSF's area of intervention within the first few hours after disembarkation.

Several security challenges have, however, affected MSF's response capacity. There have been instances where some of the tribes living along the coast have blocked access or threatened to take MSF cars, sometimes to express their discontent about the extremely high unemployment rates in the area. In order to diminish this threat, MSF has closely networked with the leaders (sheikhs) of these communities and explained MSF principles and values, improving access considerably.

In general, community acceptance has been another operational challenge. MSF's project focused on Somalis and Ethiopians arriving on the shores of Yemen, without envisaging possible support activities for the host population. After detecting this weakness in its approach, MSF decided to provide medical and logistical support to the local hospital. This, together with a local communication campaign, explaining MSF principles and work, improved acceptance at community level. This is the more important as for MSF proximity to the population is at very basis of its security strategy. In Yemen, as in other countries, MSF does not use measures such as armed escorts or armed watchmen.

In the Regional Conference on Refugee Protection and International Migration in the Gulf Region held 19-20 May 2008, MSF expressed concerns about the need for improving reaction by strengthening the alert warning system. A cholera outbreak, detected in mid-May 2008 and controlled in the MSF facilities in the Ahwar Reception Centre, illustrated the need for strengthening the emergency response capacity of the actors currently present and for additional actors ready to intervene.

The lack of responsiveness from relevant actors on sensitive issues such as the identification and appropriate and timely burial of the dead, not only has caused concerns among the communities along the coast but also affected perceptions vis-à-vis MSF. In the past, local fishermen have at times buried the dead on the shore. MSF has provided body bags, white cloth, gloves and shovels to the communities, particularly the mosques, along the part of the coast it covers. However, especially as there have been a number of landings with high numbers of dead, villagers and local authorities have become increasingly concerned. According to the law, before burials can take place, a representative of the Attorney General's office must come to the site to give permission for burial. This often takes a long time. There is a need for more flexible procedures, for designation of appropriate sites for mass graves and for a more active response regarding the logistical side.

Appropriate documentation for identification of the dead is an important concern– for the survivors who are missing loved ones as well as for their families back home. While this is not part of MSF's mandate, many survivors turned to MSF as our teams were often the first ones at the shore. It is important that a system for proper documentation with clear responsibilities is established.

# Annex II Gulf of Aden region map

- Entry point
- Departure point
- Reception Center
- Refugee Camp

