



CARE Gender and Conflict Analysis

Taiz and Aden Governorates, Republic of Yemen

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Cover page photo: Women's economic empowerment project, UNFPA

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Abbreviations

CEDAW	The Convention on the Elimination of all Forms of Discrimination Against Women
DHS	Yemen, National Health and Demographic Survey
FGD	Focus Group Discussion
FGM	Female Genital Mutilation
FHH	Female-Headed Household
GBV	Gender-based Violence
HC	Host Community
HH	Household
HRP	Humanitarian Response Plan
ICCPR	International Covenant on Civil and Political Rights
ICESCR	International Covenant on Economic Social and cultural rights
IDP	Internally Displaced Persons
INGO	International Non-Governmental Organisation
IRC	International Rescue Committee
KII	Key Informant Interview
MHH	Male-Headed Household
NGO	Non-Governmental Organisation
OCHA	The United Nations Office for the Coordination of Humanitarian Affairs
PIN	Persons in Need
UN	United Nations
UNFPA	United Nations Population Fund
YER	Yemani Rial

Executive Summary

After four years of continuous conflict, the humanitarian needs in Yemen are one of the highest in the world. The population in Yemen is approximately 30.5 million people¹, with an estimated 80% of the population (24.1 million people) requiring some form of humanitarian or protection assistance, including 14.4 million who are in acute need. Gender relations in Yemen are complex, shaped by diverse religious, cultural, social and political traditions, varying from the north and south of the country, between urban and rural areas, and between different tribes and generations.² Due to the need for responsive programming to changes in gender relations that emanate from the rapid changing context in Yemen, CARE planned to conduct a gender and conflict analysis, with the aim to understand the impact of the ongoing conflict, as well as the complex humanitarian situation on gender roles and relationships.

The study took place between July and September 2019, in rural/urban/semi-urban districts of Taiz and Aden Governorates, where CARE is currently operational. A total of 386 Household (HH) Surveys, 24 Focus Group Discussions (FGDs), 13 Key Informant Interviews (KIIs) and 8 Individual Story-Telling tools were conducted and analysed alongside secondary data sources. Results were analysed disaggregated by sex, ethnic minority, geographical location including Governorate and District type (urban and rural), household type (Residents, Returnees, Displaced population: in collective centers; with a host family and within the same area) and by the four districts surveyed (Al-Qahira, Shamayatin, Buraiqa and Sheikh Othman). Key findings are summarised below:

Gender roles and relations: This loss of income and livelihoods, combined with rising prices and shortages of food and commodities, has created high financial insecurity among respondents. Women are increasingly seeking income generating activities outside the home and men are now taking on or, at least sharing, some of the domestic work within the home. While these changes create opportunities for women, a double burden of work was noted, particularly for single-female headed households. In three of the four districts there was a trend where control and decision-making over resources is becoming increasingly shared between husband and wife, however in Buraiqa, this seemed to remain very much in a man's domain. Overall, there was a decrease in ownership of houses, land and assets (including jewellery, animals and livestock) among respondents and there were greater impacts noted for those who are displaced, particularly in collective centers.

Vulnerabilities and capacities: The top five concerns identified by respondents included: difficulties in getting a job, not having enough income to meet basic needs, not knowing how to get help, inability to move across the conflict lines, as well as inability to move safely and security in mass shelters or host families. The number of respondents noting they had a paid family livelihood has decreased since the conflict, as well as the amount of time spent on daily work, for both male and female respondents. Respondents noting 'difficulties in getting a job' were higher in Aden than in Taiz and were higher for displaced respondents. A greater proportion of female respondents highlighted that the money earned did not provide enough to meet basic needs and this was higher in rural than urban areas. Risk of recruitment or coercion by combatants was highlighted as a specific concern for men and boys.

For men and women, heightened anxiety levels, a sense of fear, emotional stress and deteriorating mental health came up consistently. A total of 74% of respondents (71% female and 77% male) felt the level of safety concerns for women and girls had increased and 67% of respondents (65% female and 68% male) felt that the level of safety concerns for men and boys had increased since the conflict began. Respondents

¹ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

² CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016

from FGDs, highlighted troubling statements regarding gender-based violence, particularly harassment, violence in the home, sexual violence and abuse which was also noted through data from the HH survey.

Key coping strategies noted through the analysis included, men and women finding alternative livelihood and income-generating opportunities. Within this, particularly for women, there were increased opportunities noted for income-generating opportunities, including work with local organisations and projects that have been established since the conflict. In addition, for men, a key coping strategy included staying neutral and distancing themselves from the conflict. There was a consistent focus on the need to engage the youth as a way to support them to cope with the impacts of the conflict. Negative coping strategies included the increased pressure on youth to join the fighting to earn money for their families, as well as child marriage, which was identified by respondents as increasing due to factors including poverty, protection concerns and risks due to displacement.

Participation in decision-making: Results from the HH survey showed that 36% of female respondents and 17% of male respondents noted a change in the level of participation in decision-making processes within the family since the conflict started. Lower levels of decision-making were seen for male and female respondents, regarding decisions concerning access to health care, deciding to visit relatives, and whether children attended school, however some findings found that changes in gender roles at the HH level, had positively impacted women's role in decision making in the household. Male and female respondents identified community leaders, local government and Sheikhs/tribal leaders in both rural and urban areas, as having the greatest influence in decision-making at the community level, with military authorities and religious leaders increasing in influence since the conflict. Overall men have remained largely in control of decision-making structures in the community. In addition to gender-disparities leading to a lack of meaningful participation of women, access to decision-making spaces was seen to be influenced by a person's level of literacy, education, status in society (including caste and IDP status), and economic status.

Access to services and assistance: The lack of security, increase in checkpoints, need for ID documents, as well as transportation costs have led to restrictions on movement for men and women since the conflict. However, this restriction is greatly compounded for women who also face pre-existing barriers based on traditions and culture that restrict their freedom of movement. With regards to health care, a lack of reproductive health services and awareness and availability of family planning was highlighted, as well as there being a lack of female staff in health centers and a lack of safe and accessible services for pregnant women. With regards to education, many families are not able to send all their children to school. Key reasons for boys not attending school included, joining the military or taking up paid employment, and for girls, reasons included dropping out early due to early marriage, taking up paid employment, concerns over the safety of girls and the need to help out in the home. The largest impact on was seen for boys and girls displaced in collective centers. Access to safe water was identified as one of the biggest challenges for both men and women. Prior to the conflict, many homes had a water source, or an available water source nearby. However, now families have to collect water from alternative sources, often far from their house. This has increased the burden of work, particularly for women and girls, as well as increasing safety risks.

This report concludes with an insight into the needs and aspirations identified by the respondents as well as a section identifying recommendations. Recommendations are grouped under the following areas: increasing opportunities for livelihoods and skills development; increasing leadership and participation particularly of women and marginalized groups, with a focus on community-level participation in decision-making spaces; an emphasis on education, mobilisation and communication; improved access to safe, appropriate services with a focus on addressing the needs, priorities and barriers of marginalized and specific groups highlighted through the analysis.

Introduction

The unification of the socialist People's Democratic Republic of Yemen in the South and the Yemen Arab Republic in the North gave rise to The Republic of Yemen in 1990. Tensions between the North and South persisted over 20 years culminating with the outbreak of the current ongoing conflict, which started in March 2015. After four years of continuous conflict, the humanitarian needs in Yemen are one of the highest in the world.

It is widely recognised that conflicts and humanitarian crises affect men, women, girls, and boys differently due to their societal roles and the deep-rooted socio-cultural and economic inequalities that exist, which can become exacerbated during crises. In general, men and boys form the vast majority of direct victims of armed conflict and associated impacts, such as forced recruitment or arbitrary detention. Women bear the burdens of running the households under extreme stress and are often exposed to different forms of gender-based violence. During emergencies, women and girls can experience significant barriers to accessing appropriate services, as well as barriers to participation in the community and in decision-making spaces that affect them and their role in the conflict. In this conflict, protection concerns are high and, the stress and chaos of the crisis, coupled with entrenched gender inequality, have left women and girls extremely vulnerable to violence, abuse and exploitation.³ Crisis and conflicts can also provide a space for opportunities, where existing gender roles and relations shift, and positive changes can be identified and harnessed, for men, women, girls, boys and marginalized groups.

Gender relations in Yemen are complex, shaped by diverse religious, cultural, social and political traditions, varying from the north and south of the country, between urban and rural areas, and between different tribes and generations.⁴ Yemen is signatory to the United Nations Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) which prohibits and requires the elimination of all forms of discrimination against women. There are also specific obligations outlined under Article 3 of the International Covenant on Civil and Political Rights (ICCPR) and Article 3 of the International Covenant on Economic, Social and Cultural Rights (ICESCR), which aim to ensure the equal enjoyment of both men and women of the rights set forth in both Covenants.⁵ Despite these commitments, since 2006, Yemen has consistently ranked last in the World Economic Forum's Gender Gap Index, and in 2017, the country was officially listed the worst place in the world to be a woman.⁶

CARE has been continuously operational in Yemen since 1992, supporting the most marginalized communities to reduce poverty, social injustice, and providing humanitarian assistance to reduce the impact of humanitarian crises. A Rapid Gender Analysis was conducted in June 2015, two months after the escalation of the conflict.⁷ This was followed by a scoping study "Different Needs, Hidden Needs"⁸ and subsequently by a comprehensive Gender and Conflict Analysis undertaken in 2016 by CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC).⁹ These regular studies have informed CARE's programming and furthered its work in promoting gender equality within its programming.

³ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016.

⁴ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016.

⁵ *From night to darker night: Addressing discrimination and inequality in Yemen*. The Equal Rights Trust. Country Report Series: 9, London, June 2018.

⁶ International Rescue Committee, *Protection, Participation and Potential, Women and Girls in Yemen's war*. January 2019. <https://reliefweb.int/sites/reliefweb.int/files/resources/yemenwomenandgirlspolicybrieffinalreadyfordissemination.pdf>

⁷ CARE, *Rapid Gender Analysis, Yemen*, June 2015.

⁸ CARE & IASC GenCap, *Different Needs, Hidden Needs? A scoping study of the inclusion of gender into assessments of the impact 2015 conflict in Yemen*. November 2015.

⁹ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016. In this study, four Governorates were

Due to the need for responsive programming to changes in gender relations that emanate from the rapid changing context in Yemen, CARE planned to conduct a gender and conflict analysis focusing on Taiz and Aden Governorates, with the aim to understand the impact of the ongoing conflict, as well as the complex humanitarian situation, on gender roles and relationships. While this study is of smaller scale, the methods and approaches used in the 2016 study have influenced the methodology of this current report.

Methodology

Objectives of the study

The specific objectives of this Gender and Conflict Analysis were:

- To better understand gender roles and relations at household and community levels, and to understand, to what extent (if any) changes have occurred since the escalation of conflict in March 2015.
- To analyse the impacts of any changes, on men, women, girls and boys at household and community levels.
- To inform CARE's gender-sensitive and responsive programming in both the immediate and long-term.

The findings of the study are expected to inform the design and implementation of the humanitarian response, early-recovery interventions, and long-term programming for CARE Yemen, as well as act as a key resource for the wider humanitarian community in Yemen and, where relevant, within the region, to ensure that women, men, boys' and girls' needs and aspirations are recognised and addressed.

Thematic scope and sampling

The study took place between July and September 2019. Data collection was conducted between 23 July 2019 and 9 August 2019 in rural/urban/semi-urban districts of Taiz and Aden Governorates, where CARE is currently operational.

The thematic scope of the assessment covered the following gender-specific domains: a) Gender roles and relations; b) Vulnerabilities and capacities; C) Participation in decision making (at community and intra-household levels); d) Access to services and assistance; e) Needs and aspirations.

A combination of Household (HH) Surveys, Focus Group Discussions (FGDs), Key Informant Interviews (KIs) and individual story-telling tools were used. The tools and methodology was based on those used in the study conducted by CARE, OXFAM and GenCap: 'Conflict and Gender relations in Yemen 2016'; although recognising that this current study is significantly smaller in scale, timeframe and resources. The analysis process triangulated qualitative and quantitative data from these tools. The team comprised of CARE Yemen, CARE Canada and Itar Foundation for Social Development; a Yemen-based Non-Governmental Organisation (NGO). The team were working, both in Yemen and supporting remotely.

Household Surveys

Different sampling strategies were used for urban and rural areas within the two Governorates. To ensure a representative sample, a random sampling method was used for the urban areas of Al-Qahira (Taiz) and

included in the analysis, including Aden and Taiz. Within this, two districts are the same as those surveyed in the current study. Buraiqa (in Aden) and Shamayatin (in Taiz), which are both rural areas.

Sheikh Othman (Aden). The towns were divided into four geographical quadrants (Northwest, Northeast, Southwest and Southeast). In each quadrant, the field team (which comprised 50% female enumerators), randomly selected and interviewed a predetermined number of households (a total of 96 HHs). In each quadrant, 24 HHs were selected (96/4). Enumerators visited every fifth HH. If no interviewee was present at the fifth dwelling, the enumerators went to the next HH and then returned to every fifth HH according to the earlier count.

In the rural areas of Shamayatin (in Taiz) and Buraiqa (Aden), a non-probability sampling method was used: snowball sampling. This selection of HHs started from a random HH near the 'centre' of the area, or a well-known location.

Based on a confidence level of 95%, and a confidence interval (margin of error) of 5, a total sample size of 384 HHs was calculated, with an actual total of 386 HH respondents in the final survey (51% female and 49% male).¹⁰ Of the respondents in this HH survey, 93% (47% female and 46% male) were between 18-60 years of age and 7% (4% female and 3% male) were over 60 years of age. No youth (below 18 years of age) were identified for the HH survey.

There was a good representation based on gender, Governorate and District type (ie. urban or rural areas). A table showing the breakdown by Governorate, District and disaggregated by sex can be found in Annex 1.

Qualitative data collection

Purposive sampling was used to select respondents for the focus group discussions and key informant interviews, as well as the story-telling. See Annex 1 for a demographic breakdown of the respondents for each of the tools.

Focus Group Discussions (FGDs)

Twenty-four FGDs (12 male / 12 female) were conducted. Separate FGDs were held with male and female community members (and separate for host communities and IDPs). Male enumerators facilitated the male FGDs and female enumerators facilitated the female FGDs. In addition, four FGDs (2 male / 2 female) were conducted with respondents who identified as Muhamasheen (a minority group in Yemen) and four FGDs (2 male / 2 female) were conducted with youth. Youth FGDs were largely conducted with respondents aged between 18-32. See Annex 1 for a demographic breakdown of the respondents for each of the tools.

Key Informant Interviews

Thirteen key informant interviews (9 male / 4 female) were conducted.¹¹ CARE Yemen assisted the enumerator team to pre-identify key respondents and facilitate meetings with the enumerator teams. Key informants comprised of local leaders, activists, individuals working as Development Experts and on Human Rights issues, Local Council representatives, Sheikhs, school principals, Chairpersons (men and women) and a member of the police force. Key informants came from rural and urban areas within Aden and Taiz.

¹⁰ The sample size was calculated by the data collection field team using Roasoft statistical calculator based on population size in the targeted governorates: <http://www.raosoft.com/samplesize.html>

¹¹ Prior coordination did take place with female key informants in Buraiqa, however the security situation prevented them from leaving their homes and attending the interviews. Therefore, this was a limitation in Buraiqa and the team met only male KIs.

Individual story-telling

Eight individual stories (3 male / 5 female) were collected. Enumerators identified interviewees for the stories as part of the HH interviews and FGDs who were willing to take part in this component of the data collection.

Cultural sensitivity

Cultural sensitivity was considered through the data collection process. FGDs were organized based on appropriate time, place and the respondent's background, to ensure individual and community acceptance of the meeting and smooth, open discussions. Facilitators and data collectors were trained on cultural sensitive approaches, prior to the data collection, and the data collectors themselves were chosen from the same areas they were deployed into.

Confidentiality and informed consent

Each participant in the HH survey, FGDs, individual story-telling and KIIs were informed about the survey goals as well as on the principles of confidentiality and anonymity, to allow each individual to make an informed decision on whether to participate. Each respondent voluntarily confirmed his or her willingness to participate. Data collectors were trained on how to ensure voluntary and informed consent was collected before starting any interview.

Limitations and challenges to the research

It is important to note that due to the sensitive security context in Yemen, the methodology aimed to reduce the team's exposure in the field. There were also a number of technical and environmental challenges within this study and the report and its analysis should be read with these in mind.

- The field team faced technical limitations related to the Kobo toolbox application that was installed on the mobile phones, as these worked with different operating systems.
- The intensity and complexity of the FGD & KII questions were seen as a challenge by the field teams and therefore a limitation in the data collected.
- There were efforts to interview female-headed households (FHH) as well as female household members who were living with husbands (ie. to ensure that female-headed households were not the only female respondents). This however, was not recorded through the HH survey and therefore it was not possible to disaggregate by male-headed households (MHH) and FHH. This leads to limitations in the analysis and would be an area for follow-up study.
- In Aden, a series of attacks took place on 1 August against a police station and military camps. A ballistic missile was responsible for the attack on 1 August in Aden during a military parade of the "security-belt".¹² The 1 August was the first day of fieldwork in Buraiqa, where the blast happened. Despite the fieldwork being conducted in a remote area and with the security situation very unstable, the field team continued. There were a number of problems noted during the data collection process. There was anxiety and tension between the participants, which impacted FGDs in host communities (particularly with men), with some not wanting to respond to the facilitators. The team therefore had to minimise time in the field and therefore some questions were unanswered. In addition, despite

¹² <https://reliefweb.int/report/yemen/press-briefing-note-yemen-6-august-2019#targetText=ISIS%20claimed%20responsibility%20for%20the,Abyan%20governorate%20on%202%20August.>
For more security analysis please see: <https://www.securitycouncilreport.org/monthly-forecast/2019-09/yemen-10.php>

prior coordination with female key informants in Buraiqa, the security situation prevented them from leaving their homes and attending the interviews. This meant that the team could only meet male key informants in that district.

- The period of field data collection and translation coincided with the Eid al-Adha holiday (in part due to the delays caused by the August attack, which delayed the process). This had additional impacts related to the co-ordination of activities, being able to speak with respondents in the community, as well as impacting the analysis and reporting process.

Context and demographic profile

The population in Yemen is approximately 30.5 million people¹³, with an estimated 80% of the population (24.1 million people) requiring some form of humanitarian or protection assistance, including 14.4 million who are in acute need.¹⁴ Even before the current crisis, Yemen faced high levels of humanitarian need, with 16 million people (61% of the population) requiring humanitarian assistance in late 2014. This was a result of years of under-development, environmental decline, intermittent conflict and the weak rule of law, including widespread violations of human rights.¹⁵ Severity of needs are deepening, with the number of people in acute need amounting to a staggering 27% higher than last year,¹⁶ making this an increase of 84 per cent since the conflict started in 2015.¹⁷ The most severe needs across multiple sectors are concentrated in areas of ongoing conflict or areas with large numbers of IDPs and returnees.¹⁸ Acute needs are highest in the conflict-impacted governorates of Hodeida, Sa'ada and Taiz, where more than 60% of the population requires assistance to survive.¹⁹

Age / Sex	Female (% of female population)	Male (% of male population)
0-4	14.6 %	14.94 %
5-9	13.26 %	13.54 %
10-14	11.97 %	12.19 %
15-19	10.94 %	11.12 %
20-24	10.56 %	10.69 %
25-29	9.09 %	9.14 %
30-34	7.24 %	7.2 %
35-39	5.53 %	5.65 %
40-44	3.83 %	3.98 %
45-49	3.17 %	2.9 %
50-54	2.77 %	2.38 %
55-59	2.18 %	2.02 %
60-64	1.71 %	1.59 %
65-69	1.35 %	1.2 %
70-74	0.87 %	0.76 %
75-79	0.52 %	0.41 %
80+	0.39 %	0.28 %

¹³ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

¹⁴ UNOCHA, Yemen, Humanitarian Response Plan, January to December 2019. <https://reliefweb.int/report/yemen/2019-yemen-humanitarian-response-plan-january-december-2019-enar>

¹⁵ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016.

¹⁶ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

¹⁷ UNOCHA, Yemen, Humanitarian Response Plan, January to December 2019. <https://reliefweb.int/report/yemen/2019-yemen-humanitarian-response-plan-january-december-2019-enar>

¹⁸ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

¹⁹ UNOCHA, Yemen, Humanitarian Response Plan, January to December 2019. <https://reliefweb.int/report/yemen/2019-yemen-humanitarian-response-plan-january-december-2019-enar>

Current statistics (shown in the table above) show that the population comprises 51.52% male and 49.48% female²⁰ with a large percentage of the population below 24 years of age (61.33% of females and 62.48% of males) with very few over 65 years (3.13% of females and 2.65% of males).

The average household size in Yemen is 6.7 people²¹ and, as of April 2018, it was estimated that women and children constitute three quarters of the displaced and are particularly vulnerable. Over one third of displaced Yemenis live in female-headed households, including many headed by female children below the age of 18.²² It is estimated that about 3% of the population have a disability.²³ Of the respondents to the HH survey, 20 households responded that they had between 1-4 females with a disability living in their house before the crisis, compared to 17 households answering as of today. Before the crisis, there were 22 HHs with men with a disability who all reported 1 male with a disability per household, however this increased to today, to 35 respondents reporting this; all with 1 male with a disability per household, except for one HH who reported having 8 members having a disability.²⁴

According to the HH survey, the number of pregnant women within the household has increased from 121 (31% of the respondents) before the crisis to 132 (34% of the respondents) at the time of the survey. When disaggregated by the 'Type of HH', the main difference was in the number of pregnant women per household today compared to before the conflict. Before the crisis, those households that did have pregnant or lactating women in the household indicated between 1 and 3 women in a household were pregnant/lactating, compared to after the crisis where respondents indicated between 1 and 8 women in the household. Those who answered between 4 and 8 were from Buraiqa (Aden) and Shamayatin (Taiz) and were all 'residents that had never left'. While these were 3 (0.7 %) of the respondents, it does highlight a rise worth noting, as this links to increased needs at the individual and household level.

Since 2015, nearly 15 percent of the entire population, 4.3 million people, have been forced to flee their homes; with 3.3 million people still displaced. More than 685,000 people have been newly displaced in the past year, the majority by fighting in Hodeida and along the western coast.²⁵ It is estimated that 48.8% of IDPs are female and 51.2% are male, 6% (3% female and 3% male) are over 60 years and 56.7% (27% female and 29.7% male) being under 17 years of age.²⁶ The majority of IDPs (73.8%) are living in private dwellings where they rent or own a house or stay with host families. Others (26.2%) are staying in hosting sites, which are either collective centers or spontaneous settlements.²⁷

This analysis surveyed across four districts with respondents from various household types, including returnees, residents who had never left, IDPs in collective centers, IDPs in the same area and IDPs in host families. In Taiz, there were higher numbers of respondents who were residents of the two districts and never left (42% in Shamayatin and 49% in Al-Qahira). This is compared to Aden where a larger proportion of the respondents had been displaced, either in a collective center (29% in Sheikh Othman; 24% in Buraiqa) or displaced in a host family (18% in Sheikh Othman; 47% in Buraiqa). This is shown in the graph below.

²⁰ Trading Economics: <http://www.tradingeconomics.com/yemen/population-female-percent-of-total-wb-data.html>.

²¹ Yemen. National Health and Demographic Survey, Key Findings, Republic of Yemen Ministry of Public Health and Population, Central Statistical Organization. 2013. <https://dhsprogram.com/pubs/pdf/SR220/SR220English.pdf>

²² UNHCR, Yemen update. April 2018. <https://reliefweb.int/sites/reliefweb.int/files/resources/Yemen%20Update%2015-30%20April%202018%20%28Final%29.pdf>

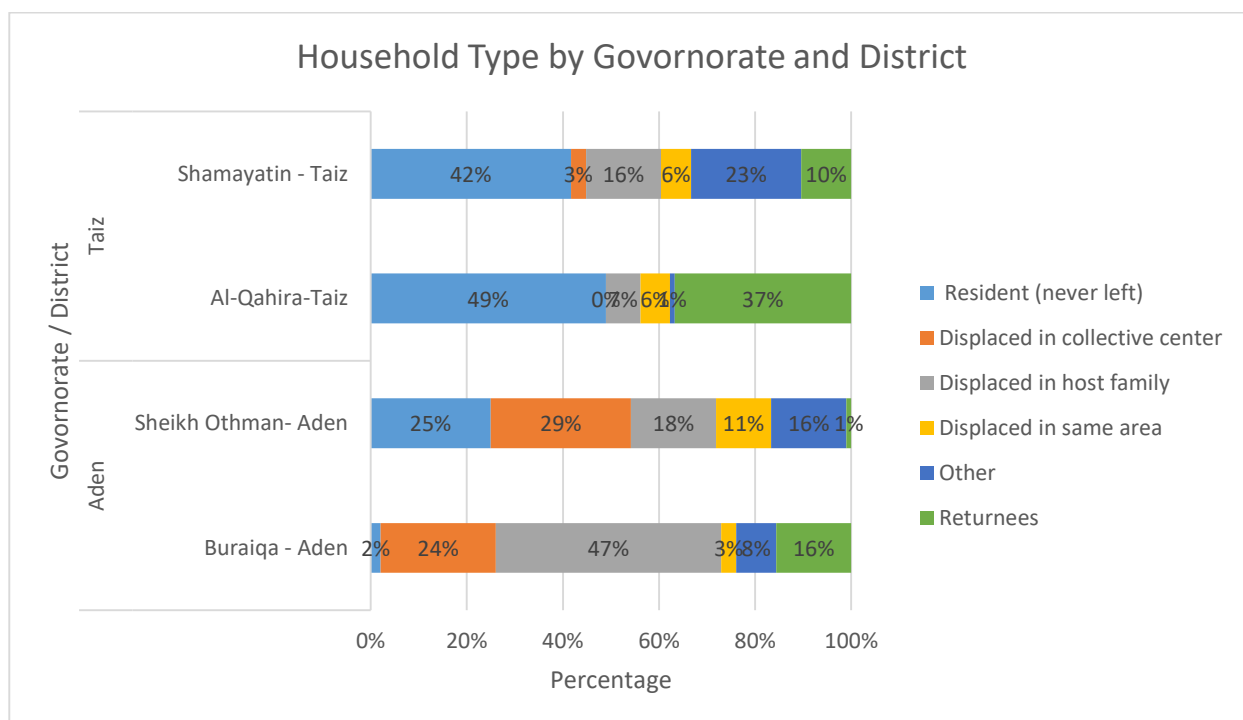
²³ Yemen National Demographic and Health Survey 2013, Republic of Yemen Ministry of Public Health and Population and Central Statistical Organization. <https://dhsprogram.com/pubs/pdf/SR220/SR220English.pdf>

²⁴ It is worth noting that this question was asked to the HH respondent of the whole survey, and not based on any self-identification of the individuals within the household. It was asked as an umbrella term, covering all types of disability, and not as a breakdown e.g. through the Washington Group questions. Therefore, more information would be needed with regards to specific data on disability.

²⁵ UNOCHA, Yemen, Humanitarian Response Plan, January to December 2019. <https://reliefweb.int/report/yemen/2019-yemen-humanitarian-response-plan-january-december-2019-enar>

²⁶ Humanitarian Needs Overview, Yemen. 2019. https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf.

²⁷ Humanitarian Needs Overview, Yemen. 2019. https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf.



To note in the figure above, those who answered 'other' (46 respondents: 21 female / 25 male) were either renting private houses, except 4 respondents (2 male / 2 female) in Buraiqa, who established their own camp in a private property.

Focus areas for this analysis

The two Governorates that formed the focus for this analysis are Aden and Taiz. Taiz has a population of 3,182,000 people, and Aden 925,000. The table below shows the sex and age disaggregated data for the two Governorates.²⁸

	Taiz		Aden	
	Female	Male	Female	Male
0-4	279,515	263,510	71,263	93,376
5-9	257,565	243,661	67,554	89,634
10-14	182,941	174,545	43,833	52,108
15-19	154,830	146,697	31,919	31,756
20-24	169,558	154,864	32,555	33,415
25-29	161,425	141,936	31,692	33,551
30-34	127,965	99,574	29,963	33,793
35-39	97,322	66,172	27,263	31,675
40-44	69,164	47,892	23,075	24,966
45-49	49,175	35,146	19,072	19,336
50-54	43,715	29,796	15,325	16,147
55-59	37,568	25,057	11,968	12,956
60-64	25,997	18,545	8,870	9,160
65-69	17,208	13,309	6,272	6,129
70-74	12,119	9,583	4,192	3,991
75-79	7,796	6,195	2,473	2,323
80+	6,137	5,516	1,712	1,685

²⁸ Source: Yemen - CSO 2017, Population Projections by Governorate & District, Sex & Age Disaggregated. These 2017 population figures are based off of projections from the Yemen Central Statistical Organization from their 2004 Census. <https://data.humdata.org/dataset/yemen-cso-2017-population-projections-by-governorate-district-sex-age-disaggregated>

Taiz Governorate

In Taiz, two districts were surveyed as part of this analysis: Al-Qahira and Shamayatin District. Al-Qahira district is located in the urban center of Taiz, home to key markets and commercial centres. It is characterised by high population density as well as a landscape of plateaus and highlands [Male, KII, Al-Qahira]. Shamayatin is a rural area and is seen as a key economic link to Aden Governorate making it an important route for trade and transport of goods. It is host to large rural markets, agricultural land, small dams and rainwater harvesting. It is seen as an important hub for educated professionals and scholars [Male, KII, Shamayatin, Professional; Female, KII, Shamayatin, Activist].

Taiz has an estimated 2.6 million people in need (PiN) with over 60% of those identified as Acute PiN.²⁹ In Taiz (HH survey), 14% of respondents (6% female and 8% male) identified as being from an ethnic or other minority group: in Al-Qahira there was 1 respondent who identified as being 'tribal', and in Shamayatin respondents identified as being tribal or Muhamasheen. The analysis in this report, in places, focuses on the specific responses on the Muhamasheen, including through specific FGDs, KII's and story-telling, as well as through disaggregation of HH data where relevant.

Aden Governorate

In Aden, two districts were surveyed as part of this analysis: Sheikh Othman and Buraiqa. Sheikh Othman is described as an urban area and a district far from the conflicts experienced by other districts in Aden. Sheikh Othman has a large population density and has become an area that hosts large numbers of IDPs, from all Governorates. It has a large commercial complex, as well as medical centers, health complex, private and government schools [Male, KII, Sheikh Othman, Activist; Male, KII, Sheikh Othman, Chairman/Activist].

Buraiqa is a largely rural coastal area³⁰, seen as a tourist area surrounded by sea and beaches. There are large amounts of agricultural land as well as fisheries, and an oil port. [Male, FGD, HC, Buraiqa]. During the conflict, Buraiqa received a high number of IDPs from various districts of Aden and Lahj [Female, FGD, HC, Buraiqa], many coming as female-headed households [Male, KII, Buraiqa, Local Leader2].

In Aden, 0.9 million people are estimated to be PiN with over 40% of those persons being Acute PiN.³¹ Of the respondents from Aden, 42% (18% female and 24% male) identified as being part of an ethnic or other minority group. These respondents were from Sheikh Othman and identified as IDPs from Hodieda or Taiz, or as Somalian.

Vulnerable groups

It is noted in previous studies, that the following populations are particularly vulnerable in the current crisis: those living in poverty, women, children, the elderly, people living with disabilities, people living without protection of their family, minority groups and survivors of human rights violations.³²

In addition, IDPs form a key vulnerable group, with many living in precarious situations, often in new environments, separated from family and social support networks. With limited shelter options, they lack privacy, face threats to their safety and have a limited access to basic services. IDP women are also prone to GBV due, in part, to their separation from social support systems.³³ In conflict and at all stages of displacement, risks to GBV are exacerbated. This can be due to compounding factors including, the chaos of displacement, family separation, and the roles women undertake, such as searching for firewood and water, as well as lack of security and privacy in shelters/collective centers. In addition, the availability and

²⁹ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

³⁰ It is worth noting that during the HH survey there were 12 respondents who identified that they were from Buraiqa but who identified their community as urban.

³¹ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

³² CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016.

³³ CARE International, Gender in Brief, Yemen, Updated April 2019.

quality of services are often weakened, as well as increased challenges in the ability of women and girls to access to these services.³⁴

Yemen's long history as a tribal society continues to govern its social structures creating social hierarchies in many parts of the country.³⁵ It was noted during this study that those with relatively less power and status within society are more vulnerable, particularly with regards to participation in decision-making at the community level. In addition to these social dynamics, there are those that face caste-based discrimination such as the Muhamasheen, who, account for up to 10 per cent of Yemen's population.³⁶ In Yemen, the Muhamasheen are a visible minority, whose caste-based discrimination is characterised by poverty and social exclusion.³⁷ The Muhamasheen live in higher states of poverty, they often lack access to basic services including water, sanitation and education, as well as experiencing high rates of unemployment. Prior to the conflict, the Muhamasheen people faced discrimination and often violence, including gender-based violence. Since 2015, the conflict has compounded the situation for the Muhamasheen, with regards to social discrimination, access to basic services and other support mechanisms. It has been noted that the Muhamasheen were some of the first to be internally displaced. Governorates such as Aden and Taiz, that have been heavily affected by the conflict, have large populations of Muhamasheen people.³⁸ FGDs with Muhamasheen highlighted that they suffer due to the conflict in relation to poverty, lack of shelter, no food, and polluted water supplies [Female, FGD, Muhamasheen, Shamayatin]. Male Muhamasheen expressed the suffering they face due to exclusion, confiscation of rights, loss of dignity and personal freedom. They felt that Muhamasheen women are also mistreated and are subject to harassment and violence [Male, FGD, Muhamasheen, Shamayatin].

The FGDs identified refugees as a vulnerable group in that they suffer from lack of clean water, services, and work opportunities [Female, FGD, Muhamasheen, Shamayatin]. Like the Muhamasheen community, refugees and migrants do not benefit from tribal or other local support mechanisms, and can be vulnerable to violence and exploitation.³⁹ According to UNHCR figures for 2019, it is thought that there are more than 282,000 refugees in the north and south of the country; the majority from Ethiopia and Somalia.⁴⁰

Findings and analysis

The findings from the FGDs, HH surveys, KIs and individual storytelling, have been analysed together under five sub-themes: a) Gender roles and relations; b) Vulnerabilities and capacities; c) Participation in decision-making (community and intra-household levels); d) Access to services and assistance; and e) Need and aspirations. Analysis was performed based on a number of variables disaggregated by sex, geographical location (Governorate and District), district type (i.e. urban and rural) household type and by whether the respondent identified as an ethnic minority.

³⁴ IASC. Guidelines for gender-based violence interventions in humanitarian settings. Focusing on prevention of and response to sexual violence in emergencies, (September 2005)

³⁵ Minority Rights Group International. Briefing. January 2016. 'Even war discriminates': Yemen's minorities, exiled at home. https://minorityrights.org/wp-content/uploads/2016/01/MRG_Brief_Yemen_Jan16.pdf

³⁶ Minority Rights Group International. Briefing. January 2016. 'Even war discriminates': Yemen's minorities, exiled at home. https://minorityrights.org/wp-content/uploads/2016/01/MRG_Brief_Yemen_Jan16.pdf. It was noted in this report that, there are no accurate figures on the number of Muhamasheen in Yemen, with different reports providing different estimates.

³⁷ Minority Rights Group International. World Directory of Minorities and Indigenous Peoples. Yemen, Muhamasheen. <https://minorityrights.org/minorities/muhamasheen/>

³⁸ Minority Rights Group International. World Directory of Minorities and Indigenous Peoples. Yemen, Muhamasheen. <https://minorityrights.org/minorities/muhamasheen/>

³⁹ Minority Rights Group International. Briefing. January 2016. 'Even war discriminates': Yemen's minorities, exiled at home. https://minorityrights.org/wp-content/uploads/2016/01/MRG_Brief_Yemen_Jan16.pdf

⁴⁰ UNHCR, Global Focus, Yemen, 2019 <http://reporting.unhcr.org/node/2647?y=2019#year>. Accessed September 2019.

Gender Roles and Relations

The Yemeni culture is highly patriarchal where men dominate in employment, education, and political participation. Pre-crisis gender roles were rooted in these traditional customs and practices. Women tended to be the primary caregivers, confined to the private domain; looking after the house, cooking, cleaning, caring for children, elderly relatives and persons with disabilities, collecting water and firewood. A man's role focused on working outside the home as the main, and usually, sole breadwinner.⁴¹ Pre-crisis, it was estimated, that 25.2% of women participated in the formal labour force, compared to 71.8% for men,⁴² with only 12% of women involved in non-agricultural employment.⁴³ Heavy and time-consuming work within the domestic sphere, along with adherence to strict gender roles, negatively impacts on women's access to education, political participation and employment.⁴⁴

Since the escalation of the conflict in March 2015, an estimated eight million people have lost their livelihoods, or are living in communities with minimal to no basic services⁴⁵ leaving entire families without any income and vulnerable to food insecurity.⁴⁶ This loss of income and livelihoods, combined with rising prices and shortages of food and commodities, has created high financial insecurity for men, women and their families. In addition to financial pressure, this has also led to men feeling that they are not able to provide for their families and fulfil their traditional role *"Being unemployed is the most crucial change for me. When I had lost my only source of livelihood, our life deteriorated. We become unable to face life's difficulties and requirements. I feel useless when my children want something and I cannot provide it for them* [Male, Individual story-telling, Shamayatin]. This pressure on men to retain their role and the idea of what it means to be a man was similarly expressed by female respondents, who said that despite women taking on additional roles of paid work outside the home, there is still often pressure on the man of the household to ensure the family needs are met. When needs are not met, the majority of the responsibility still lies with the husband [Female, FGD, IDPs, Sheikh Othman].

Another impact on income comes as a result of men being involved in the fighting, which has often led to the death of the family breadwinner, who pre-conflict, would have been the sole source of income for the family. For widows, women whose husbands are working away, for female-headed households, and women who are displaced without their husbands [Male, FGD, IDPs, Buraiqa], the need to take on both the traditional roles of caregiver and breadwinner add additional burdens [Female, KII, Al-Qahira, Local leader]. This study did not go deeper into how widows were impacted as a group, however this would be valuable for follow up analysis.

⁴¹ CARE International, Gender in Brief, Yemen, Updated April 2019.

⁴² UNDP, Gender Inequality Index, 2014.

⁴³ CARE International, Gender in Brief, Yemen, Updated April 2019.

⁴⁴ From night to darker night: Addressing discrimination and inequality in Yemen. The Equal Rights Trust. Country Report Series: 9, London, June 2018.

⁴⁵ UNOCHA (2017) The humanitarian situation in Yemen in facts and figures. Available at: https://www.unocha.org/sites/unocha/files/dms/FF_updated_11092017.pdf

⁴⁶ Women and girls paying the heaviest price in Yemen. Joint submission to the Universal Periodic Review. July 2018.

Gender roles and responsibilities – Female-headed household

“Before the crisis I lived with my husband and my children, we were living in comfort and security. My husband was a public relations officer, so our physical and moral condition was good. My husband was responsible for provision and purchase of water, food, gas, expenses, medicine and other needs. I was cooking, cleaning, washing clothes, childcare and other works inside the house. During the war my husband died; therefore, I became responsible for everything and worried about making a living, children’s study and domestic duties. After we lost the head of family, we became weak and afraid of looting and kidnapping. Before the crisis, my husband used to receive his full salary. Now, we receive a half salary with long intervals in between. This is not enough to provide basic needs. The biggest change I face now is that I bear all the responsibilities” [Female, Individual story-telling, Al-Qahira].

With husbands, not necessarily being able to be the sole provider now and income not being regular or enough to meet the family needs, women have needed to take on additional financial responsibilities to earn an income and seek alternative livelihoods for the family, outside the home. In addition to supporting the household, women are also now engaging in livelihood activities such as crafts, sewing, making incense [Male, FGD, HC, Al-Qahira] and perfume [Female, FGD, Muhamasheen, Shamayatin]; supporting in services delivery, beauty and first aid support [Female, FGD, HC, Sheikh Othman].

Alongside these changes for women’s roles, FGDs and KII highlighted that, while men are searching for work and perhaps at home more often, men are now taking on or, at least sharing, some of the domestic work within the home. This has included cleaning, cooking and caring for children when women are absent at work [Male, KII, Al-Qahira], or their wives are tired or sick [Male, FGD, IDP, Shamayatin]. It is now seen as more normalised for a man to help his wife in the household [Male, KII, Sheikh Othman, Chairman]. *“Before the war, all home chores were done by my wife, but now I am unemployed, I do some of them to help her, such as cooking and doing laundry” [Male, Individual story-telling, Al-Qahira].*

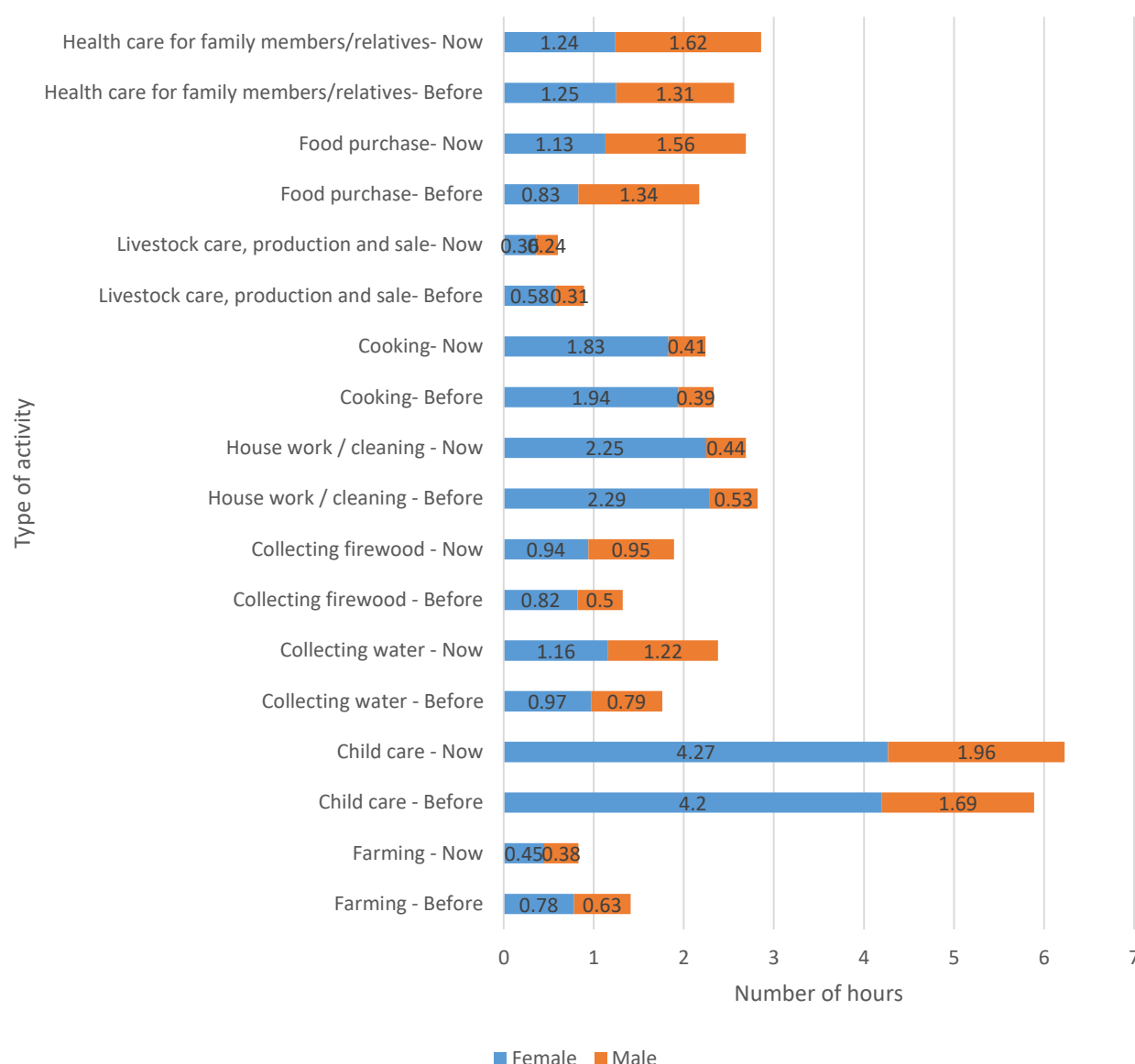
“If I am busy, he helps in taking care of childcare and food serving. As for cleaning, he does not clean.

But we each complement each other; he works outside of the house and I am inside. Work must be shared in and out (of the household). We share everything. The most important is to provide a living. The situation forced us to be one hand, because the one hand does not clap. If each of us work alone, we will not be able to provide anything” [Female, Individual story-telling, Shamayatin].

The figure below shows data, from the HH survey respondents, of daily tasks of men and women, before and after the conflict in March 2015. It displays the average number of hours spent on each task. The biggest changes in men’s roles seem to be an increase in collecting firewood and water, as well as supporting with childcare and health care for the family and relatives. For women, there has been a slight decrease in household cleaning and cooking, but also an increase in collecting firewood and water. While there was a reduction in farming and livestock care, production and sale there are a number of variables that should be considered. There is a limitation, that data on livestock care, production and sale were collected together, so we cannot identify if the roles within this, particularly comparing between districts or district types, would differ for men and women. Further, based on other analysis in this study it was noted that overall ownership and shared ownership of animals and livestock has reduced since the conflict. This was greater for those who were displaced.⁴⁷ Therefore the reduction in average hours may be a result of this impact.

⁴⁷ See page 19 for further analysis on ownership of animals and livestock.

Average number of hours spent on daily activities before the crisis and today, disaggregated by male and female respondents



Attitudes related to changing roles

Respondents noted that there were differences between families in the way households have coped with the changes, with some families being more tolerant and receptive of change than others [Female, HC, FGD, Al-Qahira]. When this change started to happen, women were often ‘derided’ for working outside [Female, FGD, HC, Shamayatin] and there was shame attached to women who wanted to start small businesses [Female, FGD, IDP, Sheikh Othman]. However, as time went on, this became more of a necessity and more the norm within the communities.

For some male respondents, the changes are expressed as merely a consequence of the context they are facing rather than a long-term change that they are accepting of. For example, male respondents suggested that the change was not a “phenomenon”, rather that all changes have been imposed by the conditions of war and the economic situation they are in [Male, KII, Al-Qahira, Activist]. Men have accepted this reluctantly as a way for their family to survive, with one FGD of IDPs being particularly vocal, saying they would not agree if their wife wanted to work. Some thought it would bring shame on them and their family

if it looks like the man cannot provide, while others questioned what their wives would do without an education, with one respondent saying *“I will accept her work if it is suitable for her limited capacity”* [Male, FGD, IDPs, Sheikh Othman].

This is leaning to the idea that if the war were to cease, they would revert to their original roles. A male respondent noted that while some women do participate more with their husbands, there are many that do not. Although some women have jobs, most are still housewives and, the respondent noted that *“there are no women who have big positions or authority in this area”* [Elderly Male, KII, Buraiqa, Local Leader].

However, there were male respondent who were agreeable with the changes, with one describing a positive effect of the conflict being that it gave women a new space to participate and enter new areas of work and responsibilities [Male, KII, Al-Qahira, Local Council].

For female respondents, some said they could not imagine a situation where the roles would completely change, as they are so rooted in custom and tradition [Female, FGD, IDP, Sheikh Othman]. However, other women within the same discussion noted that, overall there has been a change with women being encouraged to work and become more educated, so that they could take on an active role in society [Female, FGD, IDP, Sheikh Othman].

One group of female respondents unanimously commented that, that of all the changes that have happened, they wish to keep the continuation of women's work and self-reliance. However, they noted that work outside the home should not take too much of their time, which may prevent a woman from carrying out duties at home. Further, she should not provide enough income that would mean her husband can rely in her completely, or lose his role and power in the home [Female, FGD, HC, Buraiqa].

It is important to note that, for women, while these changes create opportunities in income-generation and potential knock-on effects such as increased decision-making and participation (to be discussed later in the report), there is an element of a double burden of work, particularly when their husband is also working and not able to support in the home. The idea of women having a double burden due to changes in roles was highlighted during the discussions with respondents. One group noted that now housewives go out to work, their burden and responsibilities have increased [Female, FGD, Youth, Sheikh Othman]. For women who are now female-head of HHs due to being displaced away from their husbands [Male, FGD, IDPs, Buraiqa] as well as those who have lost the family head, they now have to carry the burden of paid work along with house work [Male, FGD, IDP, Al-Qahira].

A male respondent in Shamayatin noted that in general, any changes that have helped overcome the pressure and suffering of the conflict and have not led to direct damage, are viewed positively. For example, women's participation with men in livelihood activities is positive if it is not at the expense of women's health or at the cost of depriving children of full care [Male, KII, Shamyatin].

Control over assets and resources

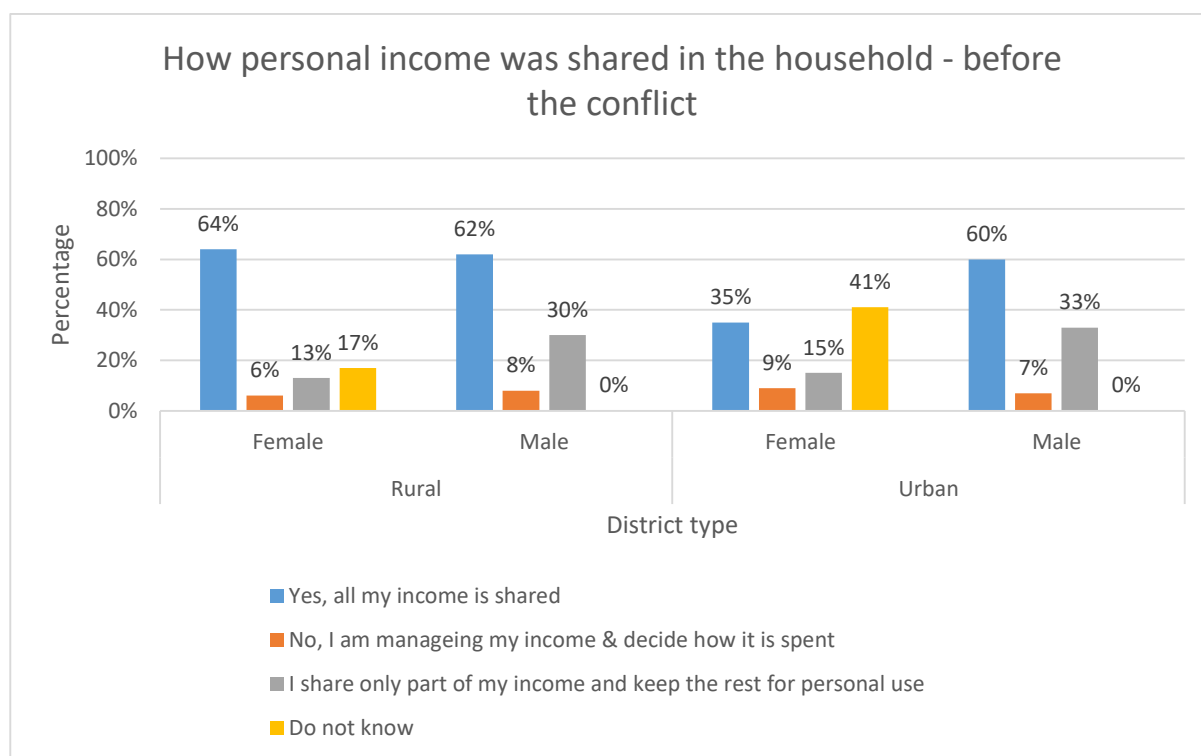
“The relationship between us and our husbands before the conflict was calm, dominated by the rule of men and control and submission of women to him. But now, it has become participatory and consultative, as each has become tolerant to the other, to avoid the loss of each other” [Female, FGD, HC, Sheikh Othman].

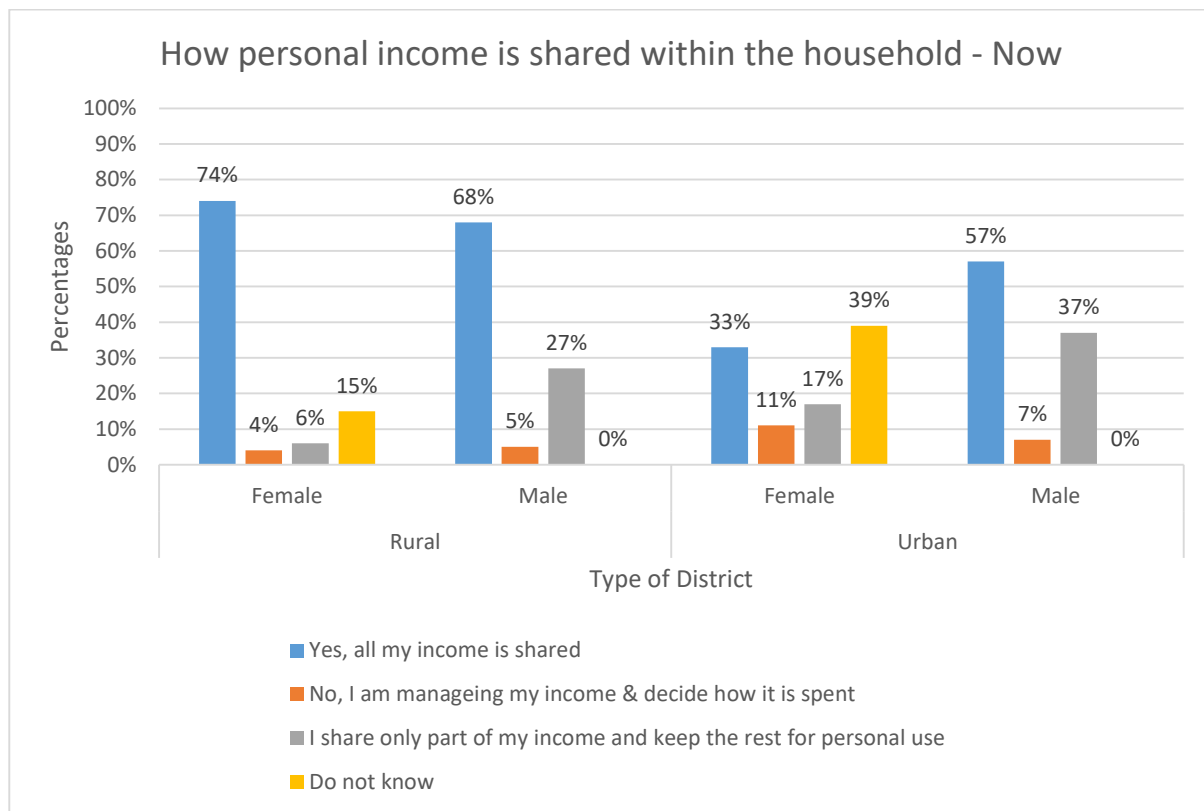
Before the conflict, in general, men had more control over resources, in terms of income, health care, water and food. One group of respondents said, that before the conflict the concept of a man was to control and shout and make individual decisions [Female, FGD, HC, Sheikh Othman]. Since the conflict, there have seen some changes in access, control and decision making in the family, with some differences noted between districts.

Since the conflict, some respondents noted that control and decision-making over resources has become increasingly shared [Male, KII, Sheikh Othman, Activist]. Female respondents from Taiz said that before the conflict, men were dominant in most areas, whereas now there has been a shift in management responsibilities of the household resources, childcare, and in sharing the responsibility to resolve life's problems [Female, FGD, HC, Al-Qahira]. In Shamayatin it was noted that before the conflict a women's role was secondary to the man in the household, and roles and responsibilities for women were limited in tradition and customs. However now, she is being seen as an essential part of the family, participating in more decisions, managing more resources [Female, KII, Shamayatin, Social Activist]. For men in Shamayatin, they said that it is better to break traditions and customs than to experience “*starvation and loss of dignity*” [Male, FGD, Muhamasheen, Shamayatin]. Unanimously in a female FGD, participants spoke of the management or control of resources, now not being limited, but that this is taken as a partnership between them and their spouses [Female, FGD, HC, Sheikh Othman].

While there were still varied responses in the three districts above, the fourth district surveyed, Buraïqa, overall noted less positive shifts in gender roles, by male and female FGD respondents. For example, women said that before the conflict, men tended to be the “commander and family decision-maker” while woman had a relatively weak role and was dependent on her husband, and that since the crisis, nothing has changed [Female, FGD, HC, Buraïqa]. Male respondents maintained that the man of the house still had the greatest role and responsibility and that control and decision-making was still with the husband [Male, FGD, HC, Buraïqa].

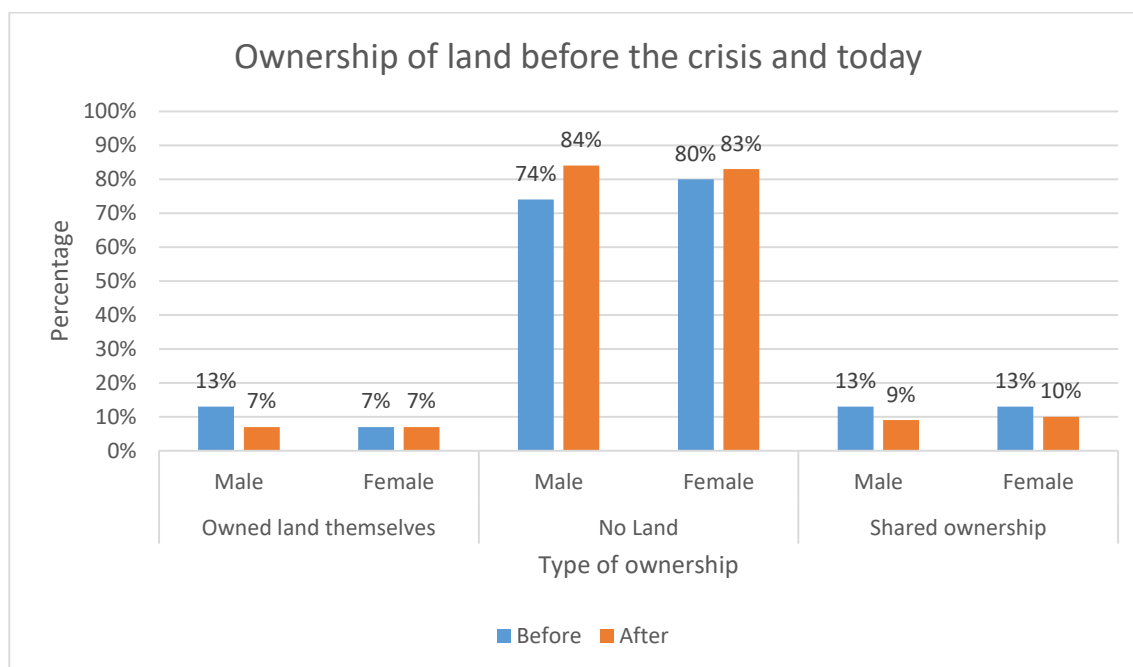
According to the HH survey, across both male and female respondents in urban and rural areas more respondents identified that all of their HH income was shared, compared to before the conflict. This increase was greater for men and women in rural areas. Interestingly none of the male respondents said they did not know how personal income was shared within the HH, whereas female respondents in rural (15% before and 17% now) and urban areas (39% before and 41% now) answered that they did not know. There was an increase in the female respondents that shared part of their income and kept some for personal use in rural areas (from 6% to 13%), however this decreased slightly for women in urban areas (from 17% to 15%).



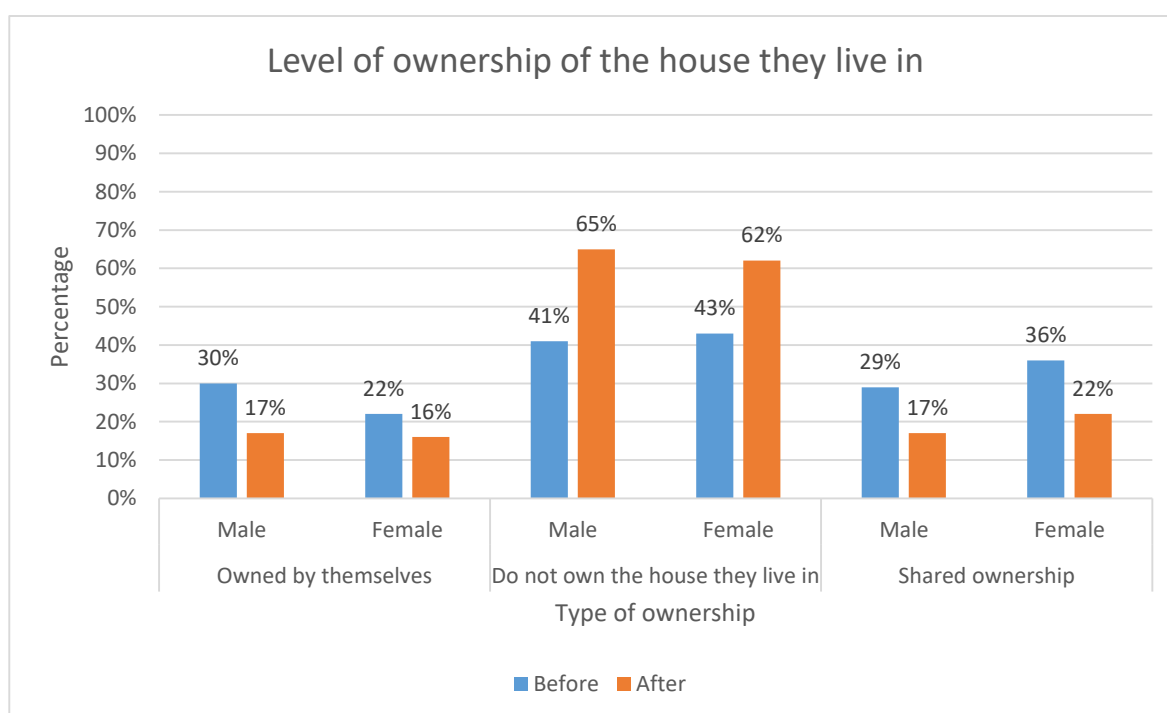


All respondents from a female FGD agreed that before the war, the man made all the decisions on how to divide the family's income. He then reserved some of the money for his private expenses and left the wife to bear the responsibility to ensure all provisions were made. However now, due to a lack of income, husbands will share decision-making with their wife in terms of who receives aid and how they spend their income [Female, FGD, HC, Sheikh Othman]. This shift was described by male respondents as being in-part due to men recognising the ability of women to manage more responsibility, their ability to save and their broader knowledge of the basic, secondary or luxury needs of the family [Male, FGD, Muhamasheen, Shamayatin].

Respondents to the HH survey were asked about their level of ownership over specific assets before and after the conflict. For ownership of land and the house they lived in, there were similar trends for male and female respondents. Those who owned no land increased by a greater proportion for men (74% to 84%) compared to women (80% to 83%), those who had shared ownership decreased for both sex's and for those who owned land themselves – decreased for male respondents (from 13% to 7%) but stayed at 7% for female respondents.

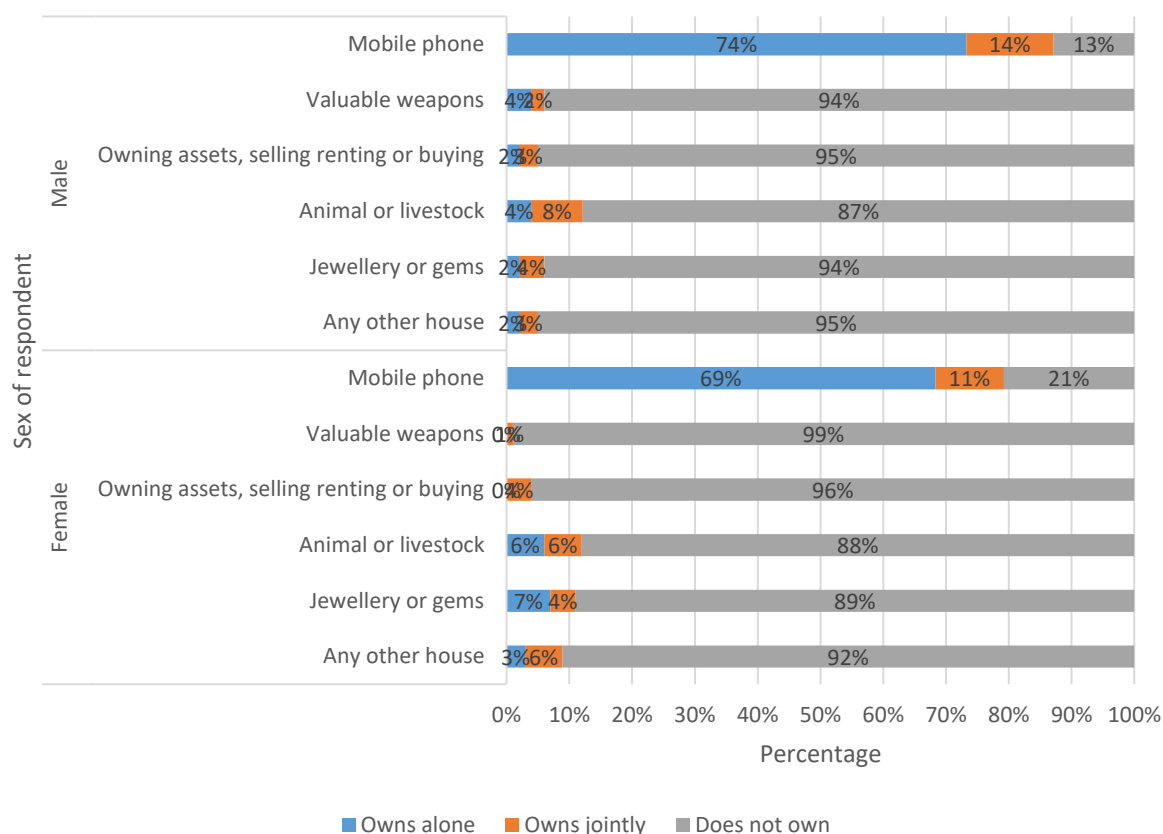


For house ownership, the differences from before to after the conflict are notable. An increase of 24% of male respondents and 19% of female respondents do not own the house they live in compared to before the conflict. Those owning houses by themselves and those in shared ownership also decreased since the conflict.



The largest difference was seen in Aden with 28% of female respondents reporting they did not own the house they lived in before the conflict, which increased to 67% today. For male respondents this increased from 30% before, to 74% to today. This is likely due to the large numbers of the HH survey respondents identifying as being displaced in Aden.

Which of the following things do you own today?



For respondents, owning any other house than the one they lived in, this did not change much with 92% (91% female / 94% male) not owning any other house than the one they live in before the crisis and this remaining relatively stable at 93% (92% female / 95% male) as of today.

Female respondents (21%) reported owning their own jewellery or gems before the conflict, which decreased to 7% today, similarly for male respondents who reported 7% before and 2% today. Highest results were for those displaced in the same area (42% females owning their own jewellery before the crisis and 17% today, and 21% male owning their own jewellery before the crisis to 7% today). A slightly larger decrease was seen for rural respondents, where 16% owned their own jewellery before which reduced to 4%, and in urban areas 13% decreased to 5%. This is supported by the FGD respondents who said that due to financial difficulties, women and girls sold their jewellery to feed their families [Female, FGD, HC, Sheikh Othman; Male, FGD, Muhamasheen, Shamayatin].

Overall ownership of animals and livestock, whether it was shared or on their own, reduced for male and female respondents and this was greater or less depending on the HH type. For displaced women, in a collective center, in a host family, or displaced in the same area, 0% reported that they owned assets themselves. This is compared to before the conflict, where 8% of those now in a collective center, 11% of those now in host families and 8% of those now displaced in the same area owned their own animals or livestock. Some had a form of shared ownership but this was less than before the conflict, however women displaced to a collective center still reported 0% shared ownership (reduced from 8% before the conflict). For male respondents, those displaced in a collective center also noted the largest change with 18% owning animals/livestock on their own, 4% having shared ownership and 79% not owning before the conflict, to 4% owning their own animals /livestock, 0% having any shared ownership and 96% reporting not having any such assets today. For female residents who never left, shared ownership of animals/livestock increased slightly from 9 to 11% and in rural areas women's overall shared ownership increased from 9 to 10%.

For male and female respondents, owning a mobile phone increased overall, both in terms of women owning on their own (66% to 69%) and men owning on their own (71% to 74%), as well as an increase in shared ownership identified by female (4% to 11%) and male (12% to 14%) respondents.

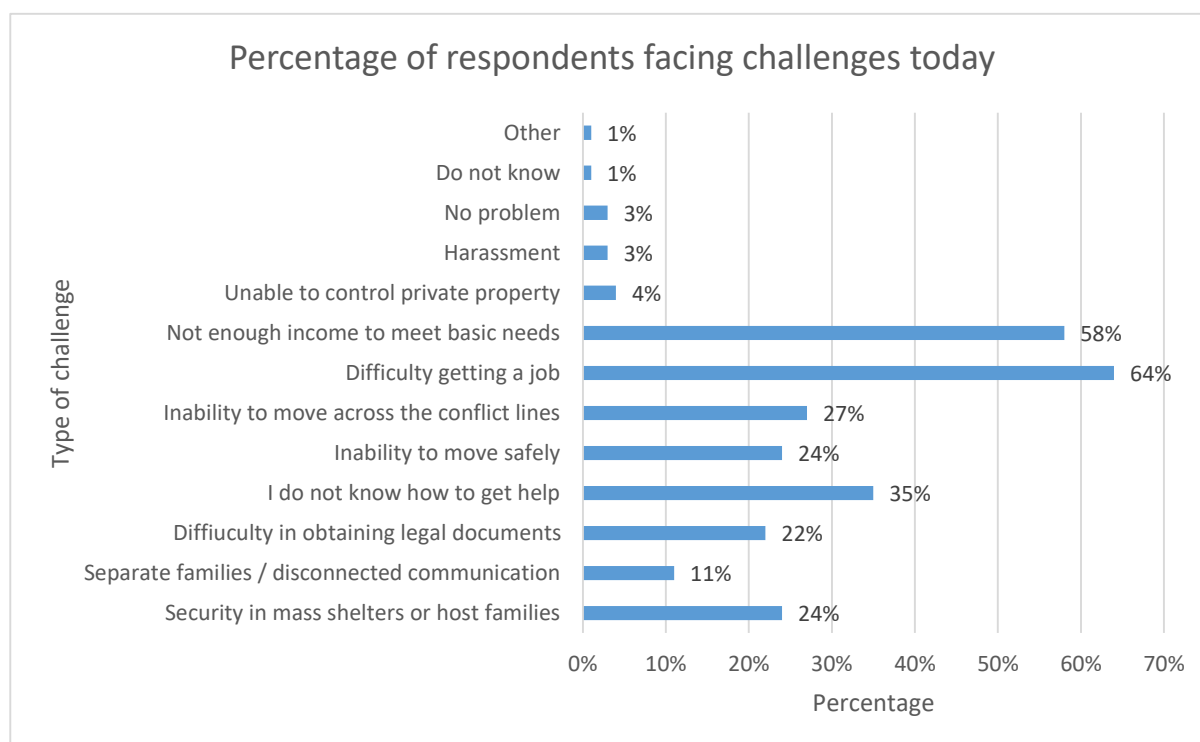
Approximately one year after the crisis (in 2016)⁴⁸ it was noted that roles and relations in the HH had begun to change, with men taking on more roles within the domestic sphere and women taking on more traditionally male roles, and perceptions of what ‘appropriate behaviour’ was for men and women had begun to shift. It was noted in the 2016 study that women engaging in certain professions e.g. butchers or chicken sellers (that were thought only to be for marginalised groups) used to be ‘shameful’ but this was becoming more accepted. A similar idea of ‘shame’ was highlighted in this study related to women starting small businesses or if men were not seen to be fulfilling their role as the provider. However, again, this has reduced over time as the conflict has continued. In 2016, women noted an increase in the time they spent collecting firewood, child-care and cooking. In this study (2019), similar trends were noted for firewood collection and child-care, but saw a reduction in cooking for female respondents. For male respondents in 2016, the trend of increased time spent on child-care, as well as firewood and water collection compared to before the conflict was a similar trend seen today, in this study.

Vulnerabilities, Capacities and Coping Mechanisms

Vulnerabilities expressed by respondents focused around livelihoods, food insecurity, education, psychological health, physical health, societal attitudes towards women, community cohesion, as well as safety and security, in relation to gender-based violence (GBV) and child marriage.

Challenges faced by the population

The figure below shows the results from respondents to the HH survey, and their indication of the main challenges they are facing today.



⁴⁸ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016.

The top five concerns being: difficulties in getting a job, not having enough income to meet basic needs, not knowing how to get help, inability to move across the conflict lines, as well as inability to move safely and security in mass shelters or host families. These are discussed further within this next section.

In 2016, similar trends were indicated by respondents, with the top three concerns including: a lack of income to meet basic needs (37%), difficulties finding employment (31%) and the inability 'to move around safely' (16%).⁴⁹

Livelihoods / income

It is estimated that almost 1.25 million civil servants, who, along with their families, represent a quarter of the Yemeni population, have only intermittently received a salary, or not received one at all, since 2016.⁵⁰ This was supported through the FGD respondents and key informants across all districts, who commented that monthly salaries were suspended for many employees [Male, KII, Buraiqa, Local Council; Male, KII, Sheikh Othman, Chairman; Male, KII, Al-Qahira; Male, FGD, Muhamasheen, Shamayatin]. Now, instead of full time employment, men are relying on daily wages [Female, FGD, HC, Sheikh Othman], which creates financial insecurity from one day to the next. For some, this has meant relying on humanitarian assistance, borrowing from neighbours or friends and getting into debt [Male, FGD, IDPs, Shamayatin].

A common vulnerability expressed by both male and female respondents during the FGDs, was their inability to provide the basic needs for their family including, but not limited to, food, clothing, repairing their houses to increase security, and buying medicine. IDP respondents, in particular, gave details of the livelihood losses they faced since the crisis, with some being out of work for a number of years. Within one FGD, respondents explained that previously some of them owned cars, which were used to transport people from Taiz to other cities, however for two respondents this has not been functioning for over 2 years. Others worked at the port, but this stopped for the past three years [Male, FGD, IDP, Shamayatin], others used to work in a hospital and a factory; both had not worked for over one year [Male, FGD, IDP, Shamayatin].

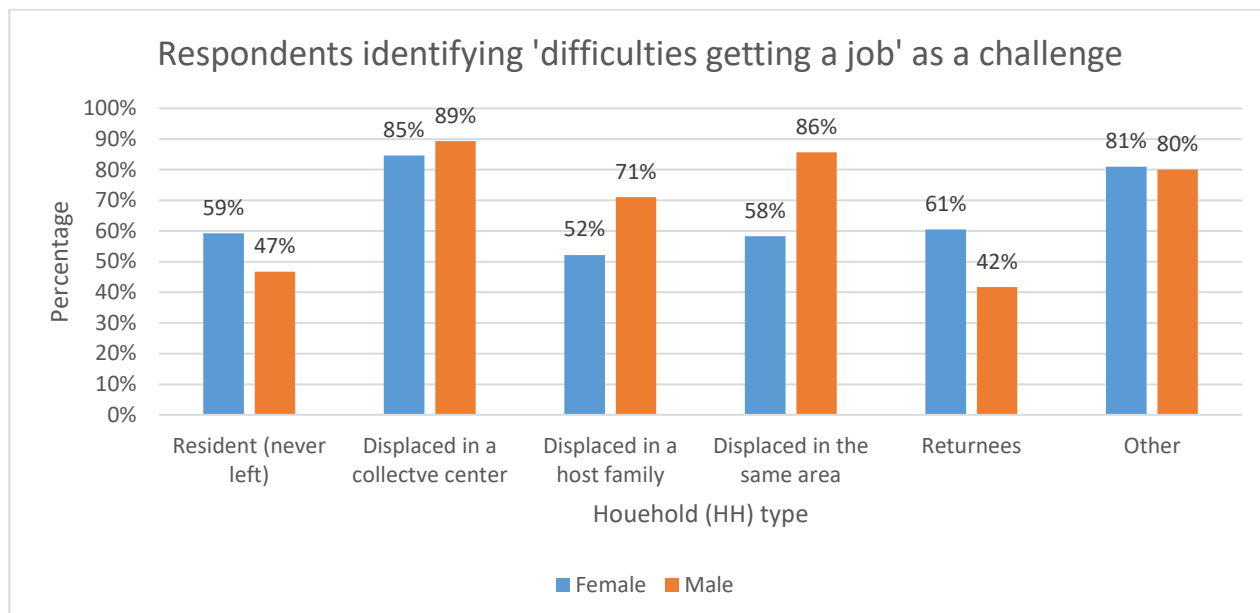
In the HH survey, 41% of respondents (47% of female respondents and 35% of male respondents) said that they had a paid family livelihood. Higher percentages of respondents from Aden said they did not have a paid family livelihood (74%) compared to respondents from Taiz (43%). For those respondents who did have a paid livelihood⁵¹ the amount of time during the day spent in daily work had decreased since the conflict. Before the conflict, 54% of male respondents and 41% of female respondents worked 'from morning to evening' which decreased to 40% of male respondents and 33% of female respondents today.

During the HH survey, when asked 'What challenges do the respondents face today?' 63% of women and 65% of men answered 'difficulty getting a job'. Responses were much higher in Aden (72% female and 80% male) than in Taiz (55% female and 50% male). Overall results were slightly higher in rural areas (67%) compared with urban areas (61%). For those respondents who were displaced, either in collective centers, displaced in host families or within the same area indicated higher results for this (this can be seen in the graph below). Residents who have never left and those who returned reported 'difficulties in getting a job', less.

⁴⁹ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016.

⁵⁰ International Medical Corps, *Mental Health and Psychosocial Support Assessment*. August 2019.

⁵¹ This was 160 of the 386 respondents (41%)



Due to the high levels of displacement, this may provide a reason as to why the results for Aden were much higher than for Taiz, as well as being lower for residents and those who returned. For IDPs especially, the move from their home district has meant a loss of their usual livelihood and difficulties re-establishing themselves in their new area. It was noted by one key informant that IDPs were trying to fit into their new environment by finding a trade or skill that was lacking, to be able to earn an income e.g. cooking at wedding parties, sewing, singing or decorating cars [Male, KII, Sheikh Othman, Chairman].

Linked to difficulties in getting a job and access to a paid livelihood, 62% of female respondents and 53% of male respondents identified a main challenge being that the money they earned did not provide enough to meet basic needs. Across the four districts surveyed, female respondents reported this as a difficulty in greater numbers than male respondents. Both male and female respondents in Buraiqa in Aden (73% female and 60% male) and Shamayatinn (73% female and 63% male) in Taiz identified this as a greater challenge than in Al-Qahira in Taiz (52% female and 46% male) and in Sheikh Othman in Aden (50% female and 44% male). This shows that the two areas with more rural populations identified this as a greater difficulty than those in urban areas.⁵²

An issue raised by many of the FGD respondents was that of Qat. This was raised by men and women as being an issue largely for men but also as a growing problem for youth and an increase in women using this [Male, KII, Buraiqa, Local Leader2; Male FGD, HC, Buraiqa]. Not only was this noted as having an impact as money is spent on this over other family needs [Female, FGD, Youth, Sheikh Othman], it also has an impact on the nutritional status of the community [Female, KII, Shamayatin]. One group identified the need to reduce the number of Qat trees and replace it with coffee trees, vegetables and fruit [Male, FGD, HC, Al-Qahira].

Although high unemployment was raised as an issue by all groups, this was an issue raised by one FGD as a high vulnerability specifically for young men. It was highlighted that young graduates are finding it particularly difficult to find work. They felt this was, in part, due to favouritism, if a person belonged to a certain party or tribe. As a result, many are joining the armed forces to provide a source of income for themselves and their families. A related problem to this, is that many are not military trained and therefore they feel this puts them at greater risk [Male, FGD, HC, Sheikh Othman]. There were also more general references made to forced recruitment for men [Male, KII, Sheikh Othman, Activist] and the recruitment or

⁵² As a combined figure, 67% of those living in rural areas reported this as a challenge, compared to 49% of respondents living in urban areas.

conscription of boys [Female, FGD, HC, Al-Qahira; Female, FGD, IDPs, Al-Qahira; Female, FGD, IDPs, Shamayatin]. Respondents to the HH survey identified risk of recruitment or coercion by combatants as a concern for men and boys (31% of respondents: 39% female and 23% male). The highest concerns were expressed in Sheikh Othman with 51% of female and 46% of male respondents identifying this as a concern, which was supported by a key informant in Sheikh Othman who cited forced recruitment as a key vulnerability [Male, KII, Sheikh Othman, Chairman].

According to the United National Office of the Special Representative of the Secretary-General for Children and Armed Conflict, as of 2018 there were 370 verified cases of recruitment and the use of children⁵³ so this is clearly an area for concern. An opportunity was highlighted in terms of programmes that target male and female youth and train them on certain professions. It was noted that these were running but perhaps not regularly enough and they are regarded as much better and more efficient than, for example, dispatching food parcels [Male, KII, Buraiqa, Local Leader 3].

While it was acknowledged that overall livelihood opportunities and a reduction of income have had detrimental impacts on families and individuals, there were respondents [Female, FGD, HC, Buraiqa] who mentioned that for some people in the community, opportunities have been afforded to them through the work of local organisations and projects that have been established due to the conflict. For those that have these opportunities, in some ways their income was seen to have improved, for example in Al-Qahira the opportunities for women to work on handicraft or projects was expressed by female key informants [Female, KII, Al-Qahira, Local leader] and was linked to being a coping strategy for women [Male, KII, Al-Qahira, Local Council]. For women there are some increased opportunities to earn an income outside of the house and to use their skills, or apply new skills to support income-generating activities for their family. Not only are there new opportunities, but an increased feeling of self-confidence expressed by some,

“Women are convinced now, that they have the ability to work, not only as a housewife, but also have a craft to earn a living, from inside their own home as well as competing in the labour market, whether through private business, entrepreneurship, working for a particular merchant, or working for organizations” [Female, FGD, HC, Sheikh Othman].

With regards to other vulnerable groups, men with disabilities were highlighted as a group that would have specific vulnerabilities in this context. Some men have been left injured or disabled as a result of fighting or being hit by mines. This has had a negative effect on their ability to earn a living. *“Some men have a disability, which makes their chances of getting job rare and may even be non-existent and thus become unemployed”* [Male, FGD, HC, Sheikh Othman]. This was linked to an additional burden being placed on women who have extra pressure to seek work outside the home, as well as taking care of the house [Male, FGD, HC, Buraiqa]. It was not raised during the discussions; however, to what extent women in the HH would be caring for husbands or relatives who have a disability, as a result of the conflict, and how this impacts their access to livelihoods. Nor was there analysis on women with disabilities and how this affects their ability to, either fulfil their traditional roles within the family or to engage in income generating activities. This would be an interesting and valuable area for further research.

A negative coping strategy noted by during one FGD was that some children are being forced to beg or work in the markets if they have parents who cannot e.g. in the case of a father with a disability [Female, FGD, HC, Sheikh Othman; Male, FGD, HC, Sheikh Othman; Male, FGD, Muhamasheen, Shamayatin]. Linked to this, it was noted by a few key informants [Female, KII, Al-Qahira, Local leader; Female, KII, Al-Qahira, Leader within a women’s organisation] that child labour has increased since the conflict, especially for boys, who had more responsibility placed on them, to work to provide for the family’s basic needs. While respondents did not go into depth on this, a report published in 2018 indicated that, due to economic

⁵³ Based on a report of the Secretary-General on children and armed conflict (A/73/907–S/2019/509) issued on 20 June 2019, <https://childrenandarmedconflict.un.org/where-we-work/yemen/>

hardships, the commercial sexual exploitation of children has increased over the past several years in Yemen. Girls were subjected to human trafficking for commercial sexual exploitation including in Aden, Sana'a, Taiz (two of which are Governorates in this study). Further, children, mostly boys, migrated to Sana'a, Aden, and Saudi Arabia, where they were engaged in forced labour for domestic work, begging, or for work in small shops.⁵⁴ For the Muhamasheen, it was noted that child labour in the form of begging is prevalent.⁵⁵

Interesting differences are noted in this study compared to the 2016 study⁵⁶ with regards to access to paid livelihoods. In 2016, 15% of respondents noted they had no access to a paid livelihood, which was higher in Taiz (21%) than in Aden (4%). In this current study, 41% of respondents identified that they had a paid income, with those who did not have a paid livelihood, being higher for those from Aden (74%) than those from Taiz (43%). This shows a large increase in those who do not have a paid livelihood. Trends were similar with regards to the number of male workers that used to work from morning to evening which dropped from 41% pre-crisis to 23% in 2016. A similar trend saw that those who had paid livelihoods today and worked morning to evening dropped from 54% before the crisis to 40% today in this study. Therefore, although a higher proportion of respondents in this study, overall reported not having access to a paid livelihood, those that did, were in work for longer hours compared to the findings in 2016.

Psychological health impacts

“I do not feel as comfortable, stable and happy as I was with my husband before displacement. Anxiety and fear don't leave me even in my bedtime” [Female, Individual story-telling, Shamayatin].

For men and women, heightened anxiety levels, a sense of fear, emotional stress and deteriorating mental health came up consistently across the focus groups: in all but one of the female FGDs (11 of the 12)⁵⁷ and all of the 12 male FGDs. The levels and types of fear differed slightly for men and women however, the psychological impacts of the conflict and the recognition of these were clear and pronounced. A common concern expressed, was fear of the current moment due to a general sense of insecurity and lack of safety, as well as, armed gangs in the street [Female, FGD, Youth, Al-Qahira; Female, FGD, HC, Buraiqa], their property being raided by armed thieves, frequent thefts [Female, FGD, IDPs, Sheikh Othman; Male, FGD, Youth, Al-Qahira], e.g. respondents spoke of women whose jewellery had been robbed [Male, FGD, IDP, Al-Qahira]. This fear was particularly highlighted in places where security services are absent [Male, KII, Shamayatin; Male, FGD, Muhamasheen, Shamayatin], where individuals felt that security was not to the same standard as before the conflict, or where people felt that there was evidence of corruption, therefore causing people to lose confidence in the authorities [Male, KII, Al-Qahira].

Women highlighted specific stress-related issues for men which included: differences in belonging to a group or party, poverty, suicide due to the psychological pressure of reality, as well as debts increasing [Female, FGD, HC, Sheikh Othman]. For women, stress was thought to be caused by divorce, being a widow or an older unmarried woman, the need to beg, spread of sexual diseases, the impact of social media and family disintegration [Female, FGD, HC, Sheikh Othman]. Psychological stress and the sense of fear was also linked, by some, to physical illness and diseases [Male, FGD, IDP, Sheikh Othman].

⁵⁴ United States Department of Labor, *2017 Findings on the Worst Forms of Child Labor - Yemen*, 20 September 2018, available at: <https://www.refworld.org/docid/5bd05aff0.html> [accessed 27 September 2019]

⁵⁵ United States Department of Labor, *2017 Findings on the Worst Forms of Child Labor - Yemen*, 20 September 2018, available at: <https://www.refworld.org/docid/5bd05aff0.html> [accessed 27 September 2019]

⁵⁶ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016

⁵⁷ The only FGD this was not highlighted in, was a FGD with Muhamasheen women in Buraiqa, however this FGD was incomplete due to misunderstandings of the purpose of the focus group and some expectations that this was for registration of relief items.

IDPs identified specific fear and anxiety of the displaced area [Female, FGD, IDP, Shamayatin], of being in areas that they do not know or feel that they belong too. Women in host communities spoke of the community being afraid that the war may keep going and people cannot return to their homes [Female, FGD, HC, Shamayatin]. There was no mention in the FGDs regarding fear of deportation back to their district of origin.

In addition to individual stress, since the conflict problems within the family and between marital relationships were noted; with male and female respondents stating that divorce rates are increasing, and there is increased stress between husband and wife [Male, KII, Al-Qahira, Local Leader; Female KII Al-Qahira, Activist]. Some said that people are just trying to survive rather than actually living together. According to the Yemen, National Health and Demographic Survey (DHS) in Yemen in 2013 (pre-conflict), only 6 percent of currently married women said their husbands have other wives.⁵⁸ However, it was also noted in this study that Polygamy had been increasing, with women marrying men who already have wives and children [Male, FGD, Youth, Al-Qahira]. This issue was also raised in line with that of early marriage; with some children having to marry men who already have other wives.⁵⁹ In addition, it was noted that woman had to succumb to the current circumstances and get married to men of lower educational level, men who are older than her or accept to be a second or third wife [Female, KII, Al-Qahira, Local leader]. It was not elaborated as to whether this was only for financial reasons, but references were made to their current circumstance and with risk factors highlighted in this study for early marriage being financial insecurity and poverty, it is likely, that this too is a contributing factor.

Psychological stress was also linked to troubling statements connecting the impacts of the conflict with the exacerbating risk of gender-based violence (see section below).

The Muhamasheen identified specific stress due to their marginalised status in society. They felt female Muhamasheen were discriminated against because of who they are, and men were being denied rights, ownership of land, and that they were seen as the property of other influential groups [Male, FGD, Muhamasheen, Shamayatin]. This was also raised in other FGDs with female respondents saying that there is a refusal to employ young people from the Muhamasheen community, they also cannot own land, a house or a private business [Female, FGD, HC, Sheikh Othman; Male, FGD, HC, Sheikh Othman; Male, FGD, Muhamasheen, Shamayatin].

“The marginalized males suffer from exclusion, confiscation of rights, degradation of dignity and loss of personal freedom and freedom of ownership. The marginalized females are mistreated and are subject to harassment and violence” [Male, FGD, Muhamasheen, Shamayatin].

The conflict is also having psychological impacts on children with focus group respondents noting that their children are afraid of the sound of bullets and rockets [Female, FGD, HC, Shamayatin], with others noting that the impacts of children seeing scenes of war every day is having an emotional effect on children [Male, FGD, Youth, Al-Qahira] and on their way of thinking; *“even their toys or games are weapons and a lot of what they talk about is fighting”* [Female, KII, Al-Qahira, Chairman].

Safety and security

“For security, our movement became restricted, we used to go out freely but now we are afraid of the outlaws. You do not know where outlaws bullets come from. We reduced our mobility to the minimum to avoid abuse or exposure to harm. Now you do not find powerful authorities to communicate your

⁵⁸ Yemen, National Health and Demographic Survey (2013, published 2015) <https://dhsprogram.com/pubs/pdf/FR296/FR296.pdf>. Page 57.

⁵⁹ A specific section on early marriage can be found further on in this report.

complaint to, like before. No one ensures your justice so we prefer to confine our freedom to save ourselves” [Female respondent, Individual story-telling, Shamayatin].

A big concern linked to the psychological and physical well-being of the respondents was the issue of safety and security. Mentioned above, the absence of security forces created a sense of fear among respondents and overall, male and female FGD respondents from rural and urban areas in both Governorates expressed feelings of insecurity since the start of the conflict.

Over time, it has become more common for people to carry weapons, which instils fear and increases vulnerability day-to-day [Female, FGD, HC, Buraiqa]. Chances of injury or death have increased, with the main risks being disagreement between two parties or individuals, or men being targeted on the street if they belong to a particular political party or group [Male, FGD, HC, Sheikh Othman]. If men are seen carrying a weapon, which may be an asset to someone else, this can also make them a target. With the absence of state authorities to provide protection in certain areas, it was noted that people are solving problems on their own, and this becomes heightened with weapons being involved [Female, FGD, HC, Buraiqa].

Women across many of the FGDs, in urban and rural areas, felt it was not safe for them to go out, feeling afraid to walk alone in the street [Female, FGD, HC, Shamayatin]. Women felt they were not safe in the markets or on public transport due to random air raids and a heightened risk of kidnapping and abductions [Female, FGD, HC, Qahira; Female, FGD, HC, Buraiqa]. Men expressed concerns over sexual harassment, assault, theft of belongings and kidnapping when women and girls go out of the house [Male, FGD, Youth, Al-Qahira] and what was referred to by one group as a “widespread phenomenon of abductions of girls and boys” [Male, FGD, HC, Buraiqa]. The deterioration of security and lack of state authorities to manage the security situation was linked by respondents to the increased risk of kidnapping of girls, which respondents said was rare before the conflict [Female, FGD, HC, Buraiqa].

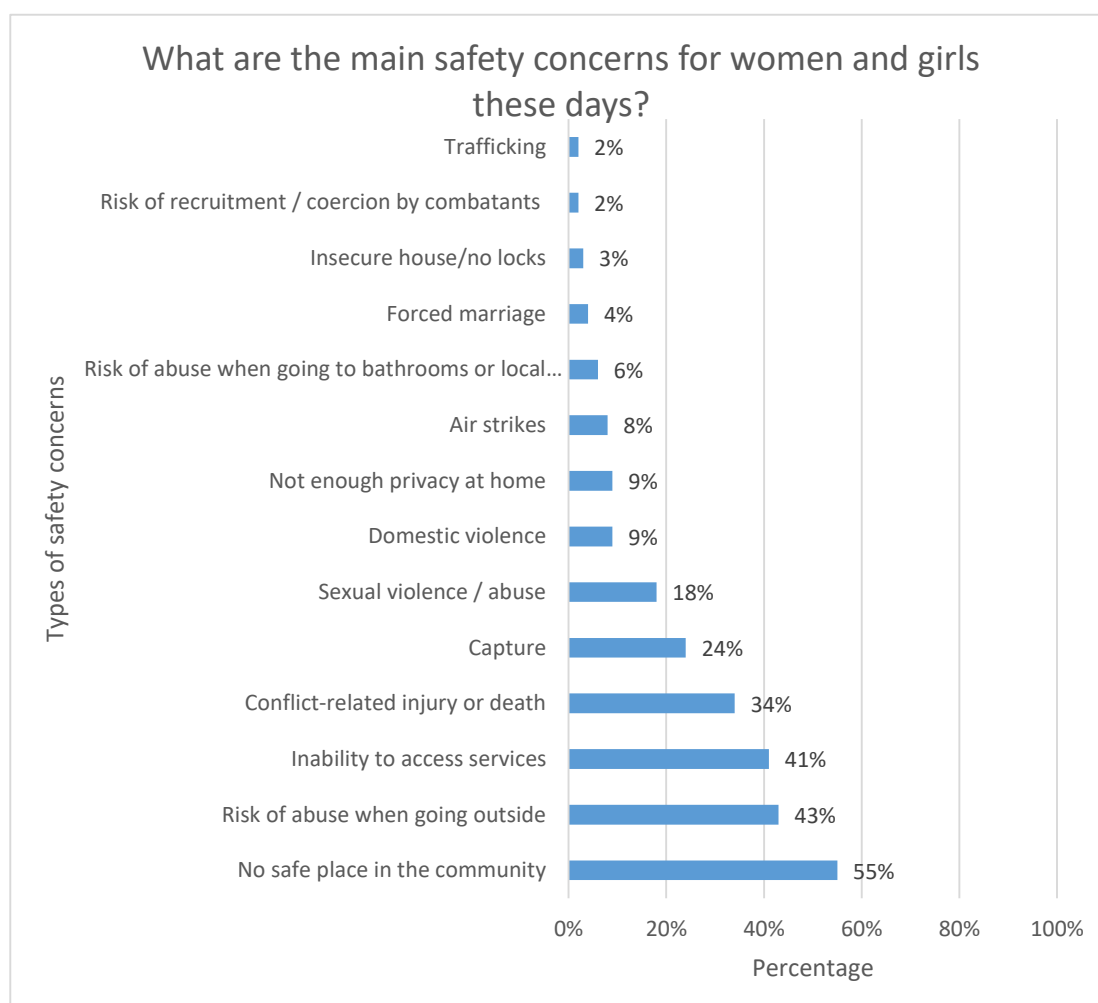
Men and women felt that homes, universities, hospitals and schools were the safest places for women, with roads and markets being the most unsafe [Female, FGD, IDP, Al-Qahira]. For men, places near the military camps were generally viewed as unsafe however, it was noted, that most of the military camps are located near civilian residences. Mothers would not let their sons and daughters go out alone nor would they let them stay out late [Female, FGD, Muhamasheen, Shamayatin].

A total of 74% of respondents (71% female and 77% male) felt the level of concerns of the safety of women and girls had increased since the bombing began in March 2015. There were differences noted between male and female respondents with a greater proportion of male respondents from urban areas (87%) compared to female respondents from urban areas (66%) expressing this. However, female respondents from rural areas identified this as a greater concern (77%) compared to male respondents in rural areas (66%). Across the districts the highest proportion of respondents who answered yes to this question, came from 96% of male respondents in Al-Qahira (Taiz) and 79% of female respondents from Shamayatin (Taiz). Of those who identified as an ethnic minority, which included tribal and Muhamasheen communities, 85% of female and 80% of male respondents said that they felt there was an increase in the level of concerns for the safety of women and girls since March 2015. These results were above the average for male and female respondents overall.

A similar proportion of respondents identified this in 2016, with 74% of respondents feeling that the level of concerns of the safety of women and girls had increased since the bombing began in March 2015. In 2016,

there was a higher proportion of female respondents (84.6%) who noted this, compared to 62.5% of male respondents.⁶⁰

The graph below, shows the main safety concerns for women and girls, reported through the HH survey (by male and female respondents)⁶¹



The greatest concern reported overall, was that there was no safe place in the community. For female respondent's, this was most significant for those displaced in a collective centre (93%) and for men's concerns for women it was largest (76%) from those displaced in host families. A greater proportion of female (80%) and male (88%) respondents from Sheikh Othman (Aden) identified this as a concern, and there was a higher percentage of female respondents (71%) and male respondents (64%) in urban areas compared to female (43%) and male (37%) respondents from rural areas.

Risk of abuse towards women and girls was raised by 43% of respondents (34% female and 52% male), with the highest percentage of female respondents noting this as a concern in Shamayatin (53%) followed by Sheikh Othman (49%). For male respondents the trend was similar with 80% raising this as a concern from Sheikh Othman and 74% in Shamayatin.

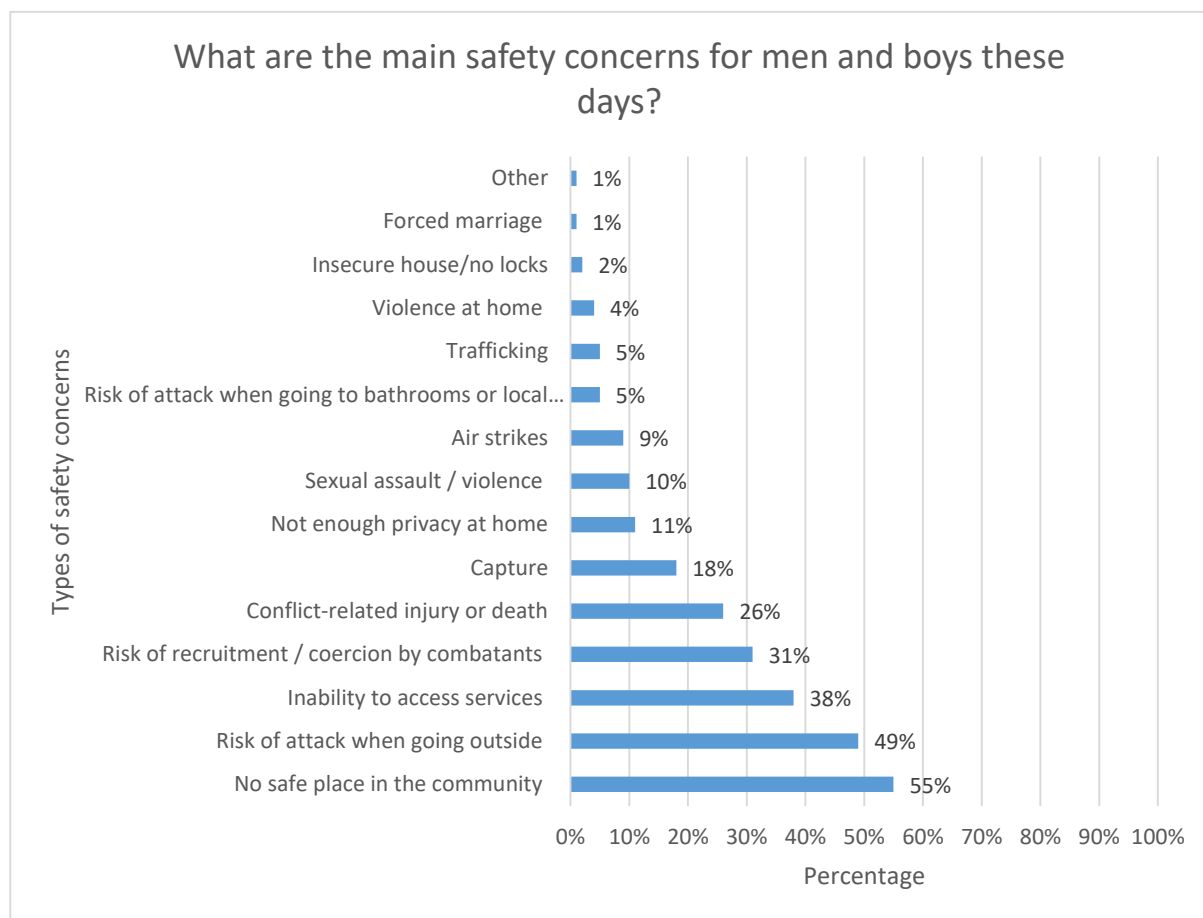
⁶⁰ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016

⁶¹ Percentages are based on those who answered 'yes' to the question before 'Is there any increase in the level of concerns about the safety of women and girls since the bombing began in March 2015?' This was a total of 74% of the sample = 285 persons (140 female and 145 male).

The insistence by men for women to have a Mahram⁶² was noted to have increased over time, as a way to protect women against kidnappings and other risks related to moving around on her own e.g. when moving to the markets and on public transportation [Male, FGD, Muhamasheen, Shamayatin; Male, FGD, HC, Sheikh Othman] or when traveling out of the house at all [Female, FGD, Youth, Sheikh Othman]. That this was specifically mentioned by men and women in Shamatyain and Sheikh Othman corresponds with the high responses of those concerned with the risks of abuse to women and girls in the HH survey.

“Women are always safe at home, but when they go out to the market, they are exposed to the risk of kidnapping and harassment by the criminals” [Male, KII, Sheikh Othman, Activist].

The graph below, shows the main safety concerns for men and boys, reported through the HH survey (by male and female respondents)⁶³



A total of 67% of respondents (65% female and 68% male) identified that they felt there was an increase in the level of concerns regarding the safety of men and boys since the conflict began in March 2015. The top five concerns included: that there is no safe place in the community, there is a risk of attack when going outside, there is an inability to access services, risk of recruitment / coercion by combatants and conflict-related injury or death.

⁶² Mahram in Sharia law and traditions in Islamic society is a male relative who needs to accompany woman in her movement

⁶³ Percentages are based on those who answered 'yes' to the question before 'Is there any increase in the level of concerns about the safety of men and boys since the bombing began in March 2015?' This was a total of 67% of the sample = 257 persons (129 female and 128 male).

These results were lower than in 2016 where 79% respondents (91% female and 66.3% male) identified that they felt there was an increase in the level of concerns regarding the safety of men and boys since the conflict began in March 2015.⁶⁴

In this current study, 55% of respondents (58% female and 52% male) identified there being no safe place in the community for men and boys. Results were much higher for those in urban areas with 76% of female respondents from urban areas noting this and 63% of male respondents (compared to 35% female and 33% male in rural areas). Looking further into the data, Sheikh Othman in Aden saw the highest percentage of responses from male (85%) and female (86%) respondents, showing similar geographical trends to the safety concerns raised for women and girls. For female respondents, those who were displaced in collective centres reported this the most as a concern they had for men and boys (85% of females residing collective centers) and for male respondents it was highest for those who resided in collective centres (75%) and with host families (72%).

Following on from this, security in mass shelters, was highlighted as a challenge for 27% of female respondents and 21% of male respondents. Due to the higher numbers of displaced persons in Aden, it corresponded that results from Aden were higher with 35% of female respondents in Aden compared to 18% of respondents in Taiz reporting this as a challenge. Similarly, 38% of male respondents from Aden and only 4% of male respondents from Taiz highlighted this as a challenge. Interestingly, while there were fewer persons displaced in collective shelters or host families in Taiz, still 32% of female respondents from Al-Qahira in Taiz identified this as a challenge. There were no differences when broken down by urban and rural area.

A total of 49% of respondents (48% female and 51% male) identified risk of attack for men and boys when going outside. These were higher for those in Shamayatin (61% of female and 72% males) and Sheikh Othman (62% female and 83% of male respondents) compared to the other two districts.

An interesting finding is that the third most reported safety concern, was the inability to access services. This was highlighted as a concern for women and girls (41%) and for men and boys (38%). It will be important to understand the specifics around why men, women, boys and girl feel they cannot access services in their specific community and if this is related more to specific groups. With this, it can then provide an opportunity to work to mitigate these factors to ensure safe access to services of all in the community.

Gender-Based Violence (GBV)

Prior to the conflict, women and girls suffered disproportionately from GBV and violations of their basic human rights by being subjected to early marriage, intimate partner violence, female genital mutilation, and high rates of sexual harassment in public spaces.⁶⁵ It has been noted that 90% of women faced sexual harassment on the street, and in a pre-conflict survey by the Ministry of Public Health, half of all interviewed women believed that a husband is justified in beating his wife.⁶⁶ The escalating conflict and displacement has continued to place women and girls at an increased risk of GBV.⁶⁷ A 2019 report by the International Rescue Committee (IRC), noted that the United Nations Population Fund (UNFPA) warned that more than 3 million Yemeni women and girls were at risk of gender-based violence, and there are 60,000 women at

⁶⁴ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016.

⁶⁵ CARE Gender in Brief, source, "From the Ground Up: Gender and Conflict Analysis in Yemen," CARE International, IASC Gender Standby Capacity Project, and Oxfam, October 2016, page 25.

⁶⁶ CARE Gender in Brief, source, "From the Ground Up: Gender and Conflict Analysis in Yemen," CARE International, IASC Gender Standby Capacity Project, and Oxfam, October 2016, page 25.

⁶⁷ Yemen Humanitarian Country Team, *Protection Strategy, 2018-2019*. (September 2018)

<http://www.globalprotectioncluster.org/wp-content/uploads/FINAL-Yemen-HCT-Protection-Strategy-Endorsed-2-Sep-2018-.pdf>

risk of sexual violence.⁶⁸ In November 2017, the UN Office for the Coordination of Humanitarian Affairs (OCHA) reported that incidents of gender-based violence (GBV) including rape and sexual assault, intimate partner violence, and early and forced marriage of girls, had increased by over 63% since before the conflict.⁶⁹ These figures should also be read with a recognition that GBV is usually under-reported, particularly in places where there are conservative cultural norms around sexual violence and social stigmatization.⁷⁰ According to an IRC internal assessment on GBV prevention and response in Yemen, it found that around 70% of survivors felt it was safer to keep silent and not seek help for fear of experiencing stigmatisation or reprisal.⁷¹

Since the start of the conflict, the breakdown of formal and informal protection mechanisms and the rule of law, together with large-scale displacement and poverty, have led to a rise in harmful cultural practices, particularly child marriage and women and girls being susceptible to sexual violence.⁷² Due to the high rates of unemployment, men and boys have been forced to join armed factions in order to obtain an income to support their families. At the same time, there has been an impact on shifting gender roles, with more women seeking paid work outside the home and more men taking on traditionally female roles within the home, which has contributed to tensions in some households. This has been noted to result in increased rates of domestic violence.⁷³ The significant percentage of female heads of households also face elevated GBV risks as they seek to provide for their families.⁷⁴

Respondents in this study expressed individual concerns regarding sexual violence and harassment and there were some troubling statements linking increased stress to exacerbated risk of gender-based violence in the household. Inside the home, there are concerns raised by women about their husbands becoming increasingly angry when they come back to the house, or comments that since the conflict, as a result of insecurity, the man has become 'tougher' with his family [Female, FGD, HC, Buraiqa]. One group of respondents noted that in situations of peace, men tend to dominate and they often dominate with violence. In the case now, the relationship may become more "symbiotic and complementary" however there are many cases where conflict, war and lack of jobs causes fights, divorce, dissonance and assault, sometimes to the point of killing. It may also lead to confiscating [a woman's] right to land or inheritance [Male, FGD, Muhamasheen, Shamayatin].

Violence in the home was identified as a concern for women and girls by 9.1% respondents (5.7% female and 12.4% male). Interestingly all the female respondents who identified this as a concern came from rural areas (11.4% of female in rural areas expressed this as a concern) and this was evenly split between the two rural areas surveyed (Buraiqa and Shamayatin). Muhamasheen women in Shamayatin [FGD respondent] pointed to the fact that now, when her husband is nervous or stressed she will stay silent. While there were no specific reasons presented as to why this was higher in rural areas, an assessment by IRC found that some of the most vulnerable women and girls in Yemen to violence are adolescent girls (particularly those living in rural areas).⁷⁵ It is important to note that this does not mean violence in the home is not occurring in urban areas (qualitative data did show otherwise), but rather to reflect the high

⁶⁸ International Rescue Committee, Protection, Participation and Potential, Women and Girls in Yemen's war. January 2019. <https://reliefweb.int/sites/reliefweb.int/files/resources/yemenwomenandgirlspolicybrieffinalreadyfordissemination.pdf>

⁶⁹ International Rescue Committee, Protection, Participation and Potential, Women and Girls in Yemen's war. January 2019. <https://reliefweb.int/sites/reliefweb.int/files/resources/yemenwomenandgirlspolicybrieffinalreadyfordissemination.pdf>

⁷⁰ CARE Gender in Brief, source, "From the Ground Up: Gender and Conflict Analysis in Yemen," CARE International, IASC Gender Standby Capacity Project, and Oxfam, October 2016, page 25.

⁷¹ International Rescue Committee, Protection, Participation and Potential, Women and Girls in Yemen's war. January 2019. <https://reliefweb.int/sites/reliefweb.int/files/resources/yemenwomenandgirlspolicybrieffinalreadyfordissemination.pdf>

⁷² From night to darker night: Addressing discrimination and inequality in Yemen. The Equal Rights Trust. Country Report Series: 9, London, June 2018.

⁷³ "From the Ground Up: Gender and Conflict Analysis in Yemen," CARE International, IASC Gender Standby Capacity Project, and Oxfam, October 2016, page 20.

⁷⁴ Yemen Humanitarian Country Team, Protection Strategy, 2018-2019. (September 2018)

<http://www.globalprotectioncluster.org/wp-content/uploads/FINAL-Yemen-HCT-Protection-Strategy-Endorsed-2-Sep-2018-.pdf>

⁷⁵ International Rescue Committee, Protection, Participation and Potential, Women and Girls in Yemen's war. January 2019. <https://reliefweb.int/sites/reliefweb.int/files/resources/yemenwomenandgirlspolicybrieffinalreadyfordissemination.pdf>

percentage of those from rural areas who identified this as a concern. Male youth from Al-Qahira (urban Taiz) for example, during the FGDs, expressed that problems can lead to husbands beating their wives [Male, FGD, Youth, Al-Qahira].

In the HH survey, 18% of respondents (12% female and 23% male) highlighted 'violence and sexual abuse' as a concern for women and girls. Similar to the concerns regarding violence in the home, this was higher for those in rural areas (16% female and 29% male) compared to urban areas (9% female and 20% male). Across the districts, the highest percentage of respondents who highlighted this as a concern came from Shamayatin for both female (21%) and male (38%) respondents identifying this for women and girls.

According to a report by IRC, displaced women, particularly in women-headed households and adolescent girls, are at a greater risk of violence, due to the lack of male presence, greater food insecurity, a lower monthly income, and the daily chores they have to perform, leaving them exposed to attacks.⁷⁶ This was also identified by key informants [Male, KII, Al-Qahira, Activist] who identified violence in the home and rape of women and girls as a vulnerability that has increased as a result of the conflict, particularly for women who may have to be displaced without her husband, leading to decreased protection and greater risk of violence, harassment and abuse [Male KII, Al-Qahira, Local Council].

With regards to other specific groups, it was noted in a study by Oxfam (2016) that Muhamasheen women had expressed that they were victims of violence, including sexual violence and frequent harassment by armed groups, particularly at checkpoints.⁷⁷ In this study male, Muhamasheen respondents felt that Muhamasheen women, especially, are mistreated and are subject to harassment and violence [Male, FGD, Muhamasheen, Shamayatin]. This is important to note, due to the caste-based discrimination this community face and their status in society, which may impact their level of risk to violence, as well as their ability to access support, information and services.

While it only came up in one of the FGDs, it is important to note a concern raised related to sexual harassment of children. Youth respondents [Female, FGD, Youth, Sheikh Othman] said this was taking place during the day and night, and that this had increased since the conflict began, due to family disintegration, children being out late on their own and often there is no street lighting.

Child marriage

Despite obligations under CEDAW to ensure states have an official minimum marriage age for boys and girls, Yemeni legislation does not impose a minimum marriage age. The Personal Status Law had previously stipulated that the minimum age for marriage for both sexes was 15, however, a 1999 amendment abolished this⁷⁸, allowing boys and girls to marry at any age. Article 15 of the 1999 amendment law states that for a marriage to be valid, the woman's male guardian must give permission and sign the contract.⁷⁹ Article 15, however also states that sexual intercourse is prohibited until girls reach puberty.⁸⁰ A recurrent issue raised by male and female respondents during this study was that of child marriage. While this was a vulnerability for girls before the conflict, due to traditional roles and customs in society, it is also now being used as a negative coping strategy as a result of the conflict. A report by UNICEF cited that 31.9% of women aged 20-24 years, in Yemen, were married before 18 years of age whilst 9.4% were

⁷⁶ International Rescue Committee, Protection, Participation and Potential, Women and Girls in Yemen's war. January 2019. <https://reliefweb.int/sites/reliefweb.int/files/resources/yemenwomenandgirlspolicybrieffinalreadyfordissemination.pdf>

⁷⁷ Oxfam, briefing paper. September 2016. Picking up the pieces: What Yemenis need to rebuild their lives in a country torn apart by conflict. <https://reliefweb.int/sites/reliefweb.int/files/resources/bp-yemen-picking-up-the-pieces-210916-en.pdf>

⁷⁸ Social Institutions and Gender Index (2019), Yemen Report, pg 2, <https://www.genderindex.org/wp-content/uploads/files/datasheets/2019/YE.pdf>

⁷⁹ For more information on the amendment of the law please visit: Manea. E, PhD, Women's Rights In The Middle East And North Africa (2009), Yemen Report, pg 9, freedom House, 2009, https://freedomhouse.org/sites/default/files/inline_images/Yemen.pdf

⁸⁰ How Come You Allow Little Girls to Get Married? Child Marriage in Yemen (2011), Human Rights Watch, December 7, 2011, <https://www.hrw.org/report/2011/12/07/how-come-you-allow-little-girls-get-married/child-marriage-yemen>

married before age 15.⁸¹ According to the HRP 2019, child marriage is estimated to have increased threefold between 2017 and 2018.⁸²

Respondents identified poverty, protection and risks due to displacement as contributing factors to family's decision on early marriage since the conflict began. Not being able to provide for all family members financially, and therefore increased poverty, was a factor across a number of respondents [Elderly Male, KII, Buraiqa, Local Leader] with one group unanimously agreeing that they would consent to early marriage at 12-15 years of age due to financial insecurity [Male, FGD, HC, Sheikh Othman]. This view was corroborated by the Muhamasheen respondents in Shamayatin who said that marginalised parents are forced to marry their daughters once they reach puberty as a result of financial burdens, as well as to avoid her from being subject to "slander and defamation" [Male, FGD, Muhamasheen, Shamayatin].

The second risk factor, was to provide protection for their daughters against kidnapping and harassment [Male, FGD, HC, Sheikh Othman]. Additionally, marriage was a way to ensure no shame is brought on the family, for example respondents from Sheikh Othman said: *"The honor of girls was sometimes under doubt without justification, due to frequent kidnappings"* [Female, FGD, HC, Sheikh Othman].

Respondents noted the impacts of child marriage including health problems in young girls, such as complications during pregnancy. Female respondents also linked early marriage to higher divorce rates as well as noting that *"nowadays, early marriage is not only for girls but also for boys"* [Female, FGD, HC, Sheikh Othman]. On the other hand, some male respondents in Al-Qahira stated that early marriage was reducing since the conflict, due to the general economic hardship and families not being able to afford marriage [Male, FGD, IDPs, Al-Qahira]. Youth respondents also noted that the youth were not getting married because it was too expensive [Male, FGD, Youth, Al-Qahira]. When discussing issues of early marriage, female youth from Al-Qahira made the comparison that early marriage occurred less often in the city compared to villages and again, mentioned the high cost of dowries [Female, FGD, Youth, Al-Qahira]. Expensive dowries had also meant there are older unmarried women, which was seen as an additional vulnerability by male respondents, for those women [Male, KII, Sheikh Othman, Chairman; Male, KII, Shamayatin].

Female IDPs placed an emphasis on displacement as a contributing factor for early marriage, due to increased poverty after displacement [Female, FGD, IDPs, Shamayatin] a similar view noted by a female key informant from Al-Qahira [Local leader]. Displacement has also created a different social make up in communities, which has meant different marriage norms existing between community groups, which has added a different dynamic [Male, FGD, HC, Sheikh Othman]. While this was not explored in depth, it does point to an opportunity to work with communities on awareness raising initiatives and understand the different dynamics and attitudes around early marriage, given the change in community structures.

Services available to support

"Now you do not find powerful authorities to communicate your complaint to, like before. No one ensures your justice so we preferred to confine our freedom to save ourselves" [Female, Individual story-telling, Shamayatin].

In general, respondents identified not knowing where to get help as a key challenge they were facing today. The graph on page 21, shows that this was the third most identified challenge identified by 35% of respondents (54% female and 46% male). This is an area where the humanitarian community can work

⁸¹ 'Child Marriage in the Middle East and North Africa – Yemen Country Brief', United Nations Children's Fund (UNICEF) Middle East and North Africa Regional Office in collaboration with the International Center for Research on Women (ICRW), 2017. <https://www.unicef.org/mena/media/1821/file/%20MENA-CMReport-YemenBrief.pdf.pdf>, Sourced from Yemen DHS, 2013

⁸² Yemen, Humanitarian Response Plan, January to December 2019, page 6

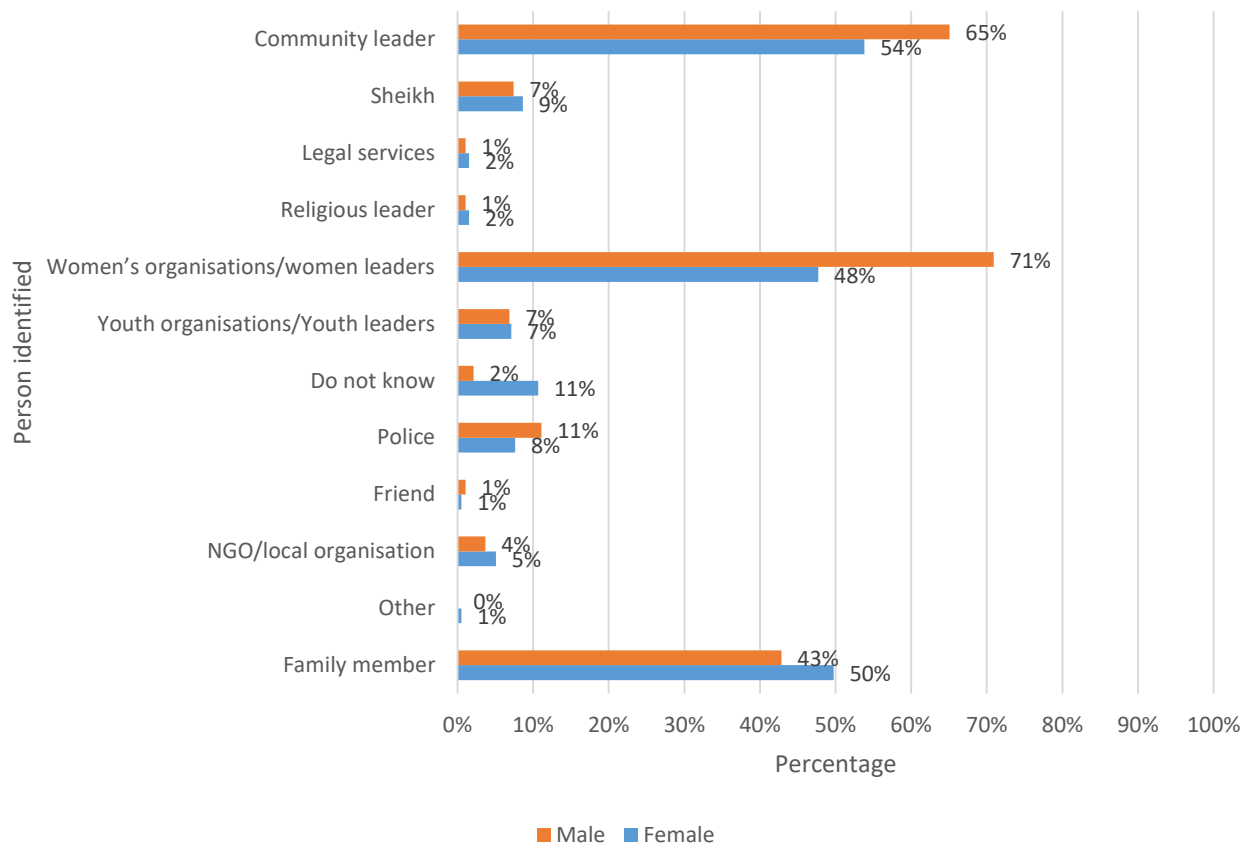
with existing local structures to ensure that there are mechanisms and services in places where communities can seek help, as well as to strengthen awareness of these mechanisms.

Pre-conflict, it has been noted, that there existed an absence of effective measures to prevent, protect against and prosecute those responsible for GBV.⁸³ The graphs below show responses from the HH survey outlining who community members most often go to for help when they are victims of some form of violence, both before the conflict and today. Before the crisis in 2015, the highest response for women was community leaders (54%), half of respondents (50%) identified family members, and this was closely followed by women's organisations and women's leaders (48%). For men, they placed women's organisations / leaders quite high in the community (71% of respondents), followed by community leaders (65%) and then family members (43%). Looking to today, these three entities still received the highest response although they have seen a decline in respondents particularly for women's organisations (52% male and 36% female) and family members (38% male and 41% female).

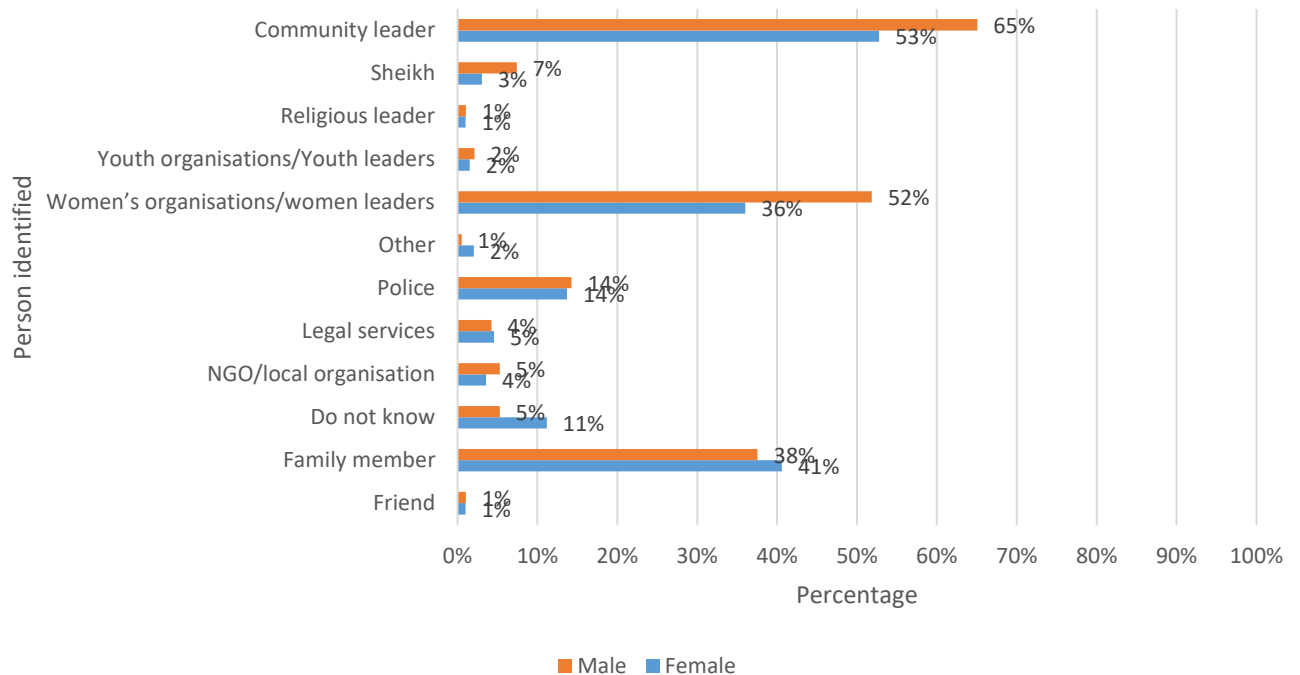
There were small increases in those seeking support from the police and legal services. Responses from FGDs highlight reservations in seeking support from authorities. Respondents from Sheikh Othman said *"even if you go to the police station to address the issue or problem, the officer does not come with you to solve the problem, unless you pay him a sum of money, so conflict increases because the role of authority and security is missing, the control of local councils is absent, if you try to solve problems with the people themselves they come out with their weapons"* [Female, FGD, Youth, Sheikh Othman]. However, others mentioned that if men and women felt insecure and needed to report concerns, they could go to the local authorities, courts, the Yemeni Women's Union, area leaders or local and international organisations [Female, FGD, IDP, Al-Qahira].

⁸³ From night to darker night: Addressing discrimination and inequality in Yemen. The Equal Rights Trust. Country Report Series: 9, London, June 2018.

Who do community members most often go to for help when they are victims of some form of violence - Before the crisis



Who do community members most often go to for help when they are victims of some form of violence - Today



Traditional attitudes and community cohesion

A vulnerability for women (expressed by both women and men) was the intrinsic attitudes that society holds about women being “less” than men” [Male, FGD, Youth, Al-Qahira]. These attitudes are discussed in the previous section with relation to roles and responsibilities in the home, paid work and the limitations these attitudes can create for women in this area. In addition to paid work, traditional attitudes that prevail in the current context leave women more vulnerable and with greater restrictions in terms of women’s representation in decision-making forums in communities, not letting girls attend school, whether men would allow women to express their opinions [Male, FGD, HC, Shamayatin], having access to inheritance and restricting movement. As an example, female respondents in urban areas said that men sometimes used safety and security risks as a way to limit a woman’s freedom [Female, FGD, IDPs, Sheikh Othman]. This idea was also supported by male IDPs from the same area, who said, “*Sometimes men oppress women to avoid her achieving her potential, under the pretext of lack of security and safety*” [Male, FGD IDPs, Sheikh Othman]. Women noted that their relative lack of power to men and the impact this has, particularly on their participation in communities was a problem. They also highlighted this to be a barrier for men, in that restricting women to move freely and participate, places more burden and responsibility on men.

Some women highlighted there were positive opportunities in terms of integrating with displaced persons in their area, to try and break negative local customs and the barriers it creates [Female, FGD, HC, Sheikh Othman], however some host community respondents highlighted this as a problem in that their customs and traditions were weakening, due to increasingly mixing with displaced populations [Female, FGD, HC, Buraïqa]. Some IDP communities said that women are “abandoning” their customs and imitating those of the new area [Male, FGD, IDP, Sheikh Othman]. Respondents were not specific regarding the specific customs they referred to, more that this was an impact to note.

The disintegration of communities was mentioned as a vulnerability. Displacement and poorer living conditions have led to more than one family or an increasing number of IDPs living together in a single household. The issue of increasing numbers of IDPs was raised by respondents from host communities in urban and rural areas where they highlighted a sense of fear as a result [Female, FGD, Youth, Sheikh Othman; Male, FGD, HC, Al-Qahira]. Before the conflict, there was trust within the communities and everyone looked out for one another. Whereas now this was seen to become less evident. Despite some fearing the increase of IDPs, others have said that displaced persons and returnees have helped the area ‘thrive’ by establishing markets, businesses and hotels [Male, FGD, KII, Shamayatin].

The separation of families due to displacement or loss of the breadwinner was also seen to impact social cohesion. There are now increases in hostility and hatred due to internal fighting, which leads to arrests, kidnapping, exclusion and marginalization based on geographical, religious and regional affiliation [Male, KII, Shamayatin].

In addition, women have said that their social relationships are being affected as a result of them not being able to travel to see friends and family. This is a result of restrictions on movement, transportation costs and not wanting to burden friends and family to host them. In addition, as people struggle to find work and focus their efforts on ensuring an income, this is reducing the free time people have to form and maintain relationships in their community.

Coping strategies

With one of the biggest and most commonly expressed vulnerabilities being a lack of livelihood, a regular income or way to support basic needs, one of the more consistent positive coping strategies mentioned by men and women across urban and rural settings was people developing their own projects to gain an income. A range of activities were being undertaken. For male respondents this tended to focus on daily

labour and construction work [Male, FGD, IDPs, Shamayatin], carpentry, blacksmith, fishing at sea, building, paving, extracting rocks from mountains. A few noted that they worked for the government in oil refinery or sanitation (particularly in Buraika) or as motorcycle drivers. For female respondents, some women are joining organisations working on protection activities, others are making and selling crafts, henna [Buraika], sewing and selling sweets, and perfumes “Bakhor” [Female, FGD, Muhamasheen, Shamayatin]. Women are involved in raising cattle, selling potatoes and ice cream [Female, FGD, IDPs, Sheikh Othman; Female, FGD, IDP, Shamayatin]. Some women and girls have become small traders through selling clothes, creams and makeup, with their businesses being supported through social media [Female, FGD, HC, Buraika].

In addition to finding work, key coping strategies expressed by men tended to focus on distancing themselves from the conflict. Male respondents mentioned strategies such as, not becoming involved in violence or affiliated with armed groups, staying neutral when the conflict was happening around them, not believing everything they see on social media, whereas before they would read the news and incidents on social media, which increased mistrust and stress within their community [Male, FGD, HC, Al-Qahira].

In addition to existing coping strategies, male and female respondents identified strategies that they felt would best help them cope with the current situation. A recurrent suggestion was to conduct awareness sessions on reducing violence against women, child marriage, educating girls, and the dangers and impacts of the conflict on persons and the community at large. This was highlighted by eight of the focus group discussions from male and female respondents, including IDPs, Youth and host communities across Al-Qahira, Shamayatin and Buraika⁸⁴.

There was a consistent focus on the need to engage the youth as a way to support them to cope with the impacts of the conflict e.g. to establish youth initiatives to encourage youth to be involved in income-generating activities [Female, FGD, HC, Al-Qahira; Male, FGD Youth, Al-Qahira; Male, FGD, HC, Shamayatin]. In some areas this was already being put into practice. In Shamayatin it was noted that there had been a focus on young people, building and developing their skills so they can have an income which had contributed to reducing youth involvement in hostilities, engaging with armed groups and reinforcing their belief in the importance of education and training [Male, KII, Shamayatin]. Respondents identified the need to open sports clubs for youth [Female, FGD, IDPs Shamayatin; Female, FGD, HC, Al-Qahira; Male, FGD, Youth, Al-Qahira; Male, FGD, HC, Al-Qahira], establish literacy classes for girls [Female, FGD, HC, Al-Qahira] and rehabilitate youth who may have been involved in the fighting [Female, FGD, HC, Al-Qahira]. Other ideas respondents had in terms of ways to cope included, working to refuse early marriage [Female, FGD, Youth, Al-Qahira; Female, FGD, IDP, Al-Qahira; Male, FGD, HC, Al-Qahira]. In addition, continuing with education and supporting initiatives to provide free education was identified in seven FGDs.⁸⁵ Enabling women to participate in decision-making and participate in local associations was identified by five FGDs.⁸⁶

Religious systems were identified as a positive coping strategy with female respondents identifying that Mosques were working to raise awareness about the dangers of war and suffering [Female, FGD, HC, Shamayatin]. Sheikhs were seen as a particularly important resource in the community to solve problems and resolve conflict between neighbours. This supports earlier data that highlighted the importance of Shiekhs in terms of who people would go to if they were victim of a form of violence as well as on page 38 in terms of key community-level decision makers.

⁸⁴ FGDs included: Male, HC, Al-Qahira; Male, HC, Buraika; Male, IDPs, Shayamatin; Male, Youth, Al-Qahira; Female, IDP, Al-Qahira; Male, IDP, Al-Qahira; Female, Youth, Al-Qahira; Female, IDPs, Shamayatin.

⁸⁵ FGDs included: Female, Youth, Al-Qahira; Female, IDP, Shamayatin; Female, IDP, Al-Qahira; Female, HC, Al-Qahira; Male, Youth, Al-Qahira; Male, IDP, Shamayatin; Male, HC, Al-Qahira.

⁸⁶ FGDs included: Male, IDP, Al-Qahira; Male, IDP; Shamayatin, Female, Youth, Al-Qahira; Female, Muhamasheen, Shamayatin; Female, IDP, Shamayatin.

Other negative coping strategies were mentioned and discussed elsewhere in this report including the pressure on youth to join the fighting to earn money for their families and early marriage.

Interestingly the impact of social media was highlighted across many of the FGDs. Men and women believed that people were misbehaving as a result of social media [Female, FGD, HC, Buraiqa]. Youth (girls and boys) were being negatively influenced by social media in the way they behave, the way they dress and that it was increasing habits such as smoking shisha, powdered tobacco, and drugs that are circulating due to a lack of presence of authorities to monitor this [Female, FGD, Youth, Sheikh Othman].

Participation and decision making

“We are in the city. Women here are teachers, nurses, human rights activists, doctors, university professors, and directors of training centres. There are women in the community in positions of power or influence in the region” [Female, FGD, HC, Sheikh Othman].

Decision making within the household

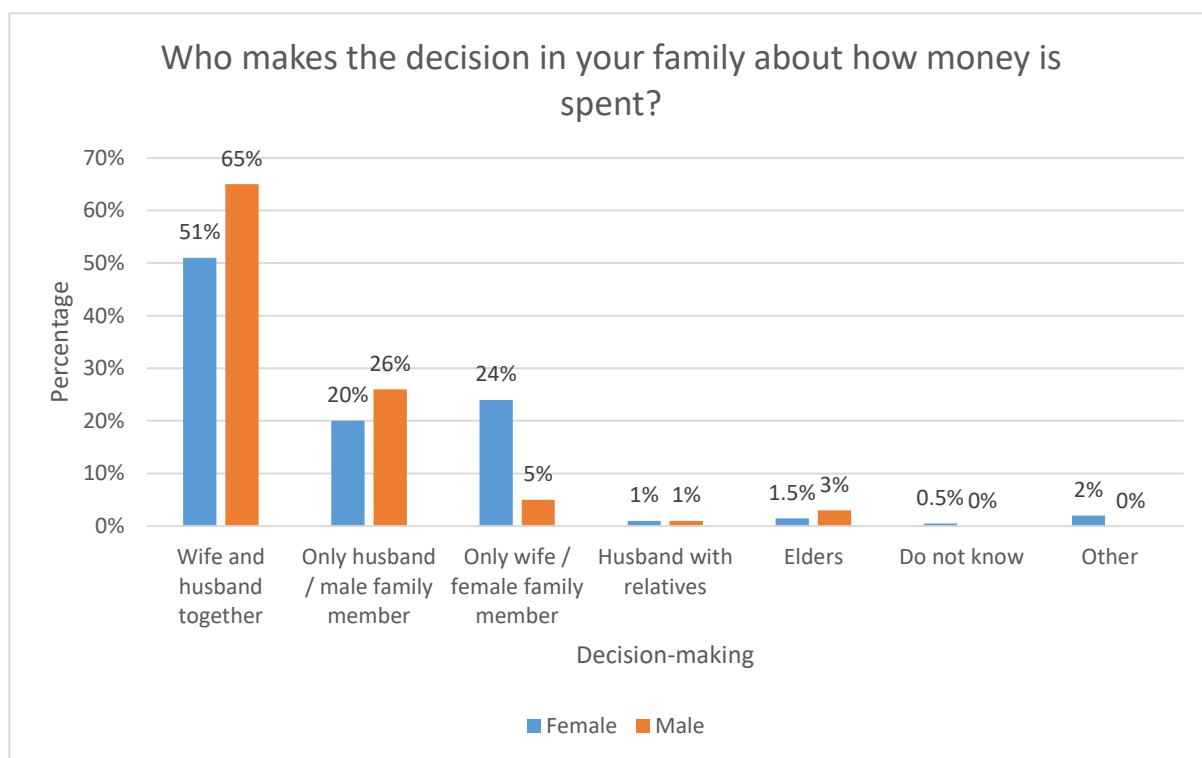
Results from the HH survey showed that 36% of female respondents and 17% of male respondents noted a change in the level of participation in decision-making processes within the family since the conflict started in 2015. There was no real difference between urban and rural areas, however a greater proportion of female respondents in Taiz (55%) reported there had been a change, compared to 17% of female respondents in Aden. For male respondents, 20% in Taiz reported that there had been a change compared to 14% in Aden. There were some differences noted in the proportions of women and men stating that they now do not participate in certain decisions compared to before the crisis. In decisions regarding health care for themselves, 6% female respondents noted this before the conflict, rising to 12% today. Similar increases were seen for female respondents who do not participate in decisions regarding health care for their children, rising from 7% before the conflict to 12% today. For both these topics 3% men reported not being involved in these decisions before the conflict, which has increased to 6% today. The percentage of respondents who were not involved in decision-making regarding whether their children attended school before the conflict was 12% for female and 6% for male respondents. This rose to 17% for women and 9% for men today. On deciding whether to visit relatives in their hometown this rose from 11% of women and 6% of men to 16% of women and 8% of men who felt they did not participate in these decisions.

At the household level, male respondents from Al-Qahira, said that men traditionally make decisions on women's mobility and on boys' and girls' education and women tend to make decisions related to household chores, and they noted that this has not changed much since the conflict started [Male, FGD, HC, Al-Qahira]. In Sheikh Othman, male respondents said that they make decisions about their wives and sisters with regards to work, education and marriage, whereas women can decide, after consultations with men, regarding reproductive care and communication with people in the region [Male, FGD, IDP, Sheikh Othman]. Female respondents supported this, noting that women need to take joint decisions with her husband regarding pregnancy, health care and communicating with relatives [Female, FGD, IDP, Sheikh Othman]. Female Muhasheen respondents from Buraiqa had similar responses and said that the man of the household is the main decision-maker who manages household resources; women would not take on this responsibility. However, Male IDPs in Al-Qahira stated through the FGDs, that women and men do share the decision-making at the HH level.

In some cases [Female, FGD, IDP, Shamayatin] it was noted that the changes seen in roles within the household, particularly related to livelihoods and income generation, impacted women's role in decision making in the household. Decisions related to distribution of food aid and food within the home is decided either between husband and wife or the wife will take charge of this. One woman spoke of her experience saying, *“In the war, we did a lot of volunteer work such as collecting food and clothes for people who were*

suddenly displaced. We cooked and sent this to the battlefronts. After doing this type of work, my brothers started consulting me with the simple things, while they never respected me in the past. Frankly, the war changed my life positively in this regard, there is a radical change; they are consulting me” [Female, Individual story-telling, unmarried, Buraïqa].

The figure below highlights who makes decisions in the family regarding how money is spent, before and after the start of the crisis in March 2015. A main change is seen in the reduction of female family members making decisions on their own, as well as an increase in husband and wife making decisions together and a slight increase in only male family members making decisions.



Decision making in the community

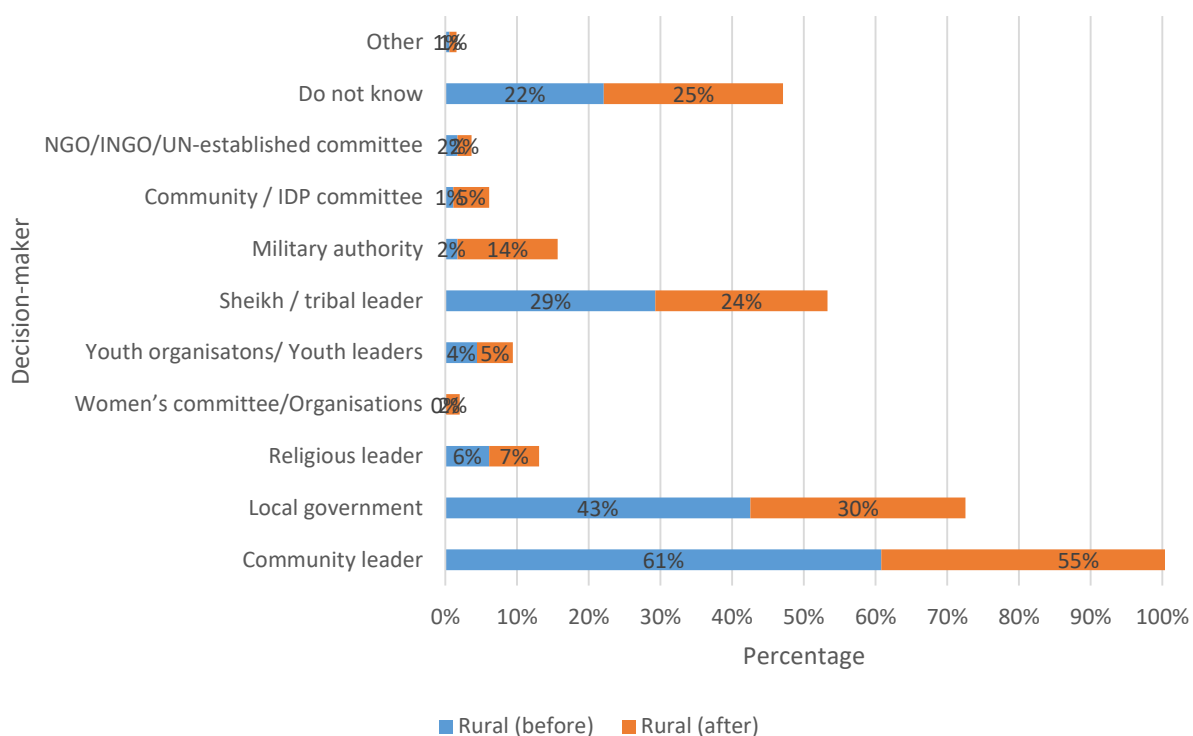
The two graphs below show results from the HH survey, and the proportion of respondents who identified key community-level decision makers, in both rural and urban areas. Those that were identified as having the greatest influence were community leaders, local government and Sheikhs/tribal leaders in both rural and urban areas. All of these were seen to reduce today compared to before the conflict, except for community leaders in urban areas, which only slightly increased. Sheikh / tribal leaders were more influential before the conflict and today in urban settings, compared to rural areas. Interestingly women's committees were identified by a very low proportion of respondents in rural and urban areas, despite them being recognised as being important structures in the community if people had a problem or concern (page 33). Military authority and religious leaders had more influence in rural areas, with this increasing today compared to before the conflict. A greater proportion of respondents in rural areas did not know who the key decision-makers were in their community both before the conflict and today compared to urban areas.

Trends are similar to those found in 2016⁸⁷ with a reduction overall in local government compared to before the conflict, as well as low numbers of respondents overall identifying women's committees as key community-level decision makers; both before the conflict and in 2016, which show similar results to this study. In 2016, for male and female respondents, Sheikhs and tribal leaders were identified as the main

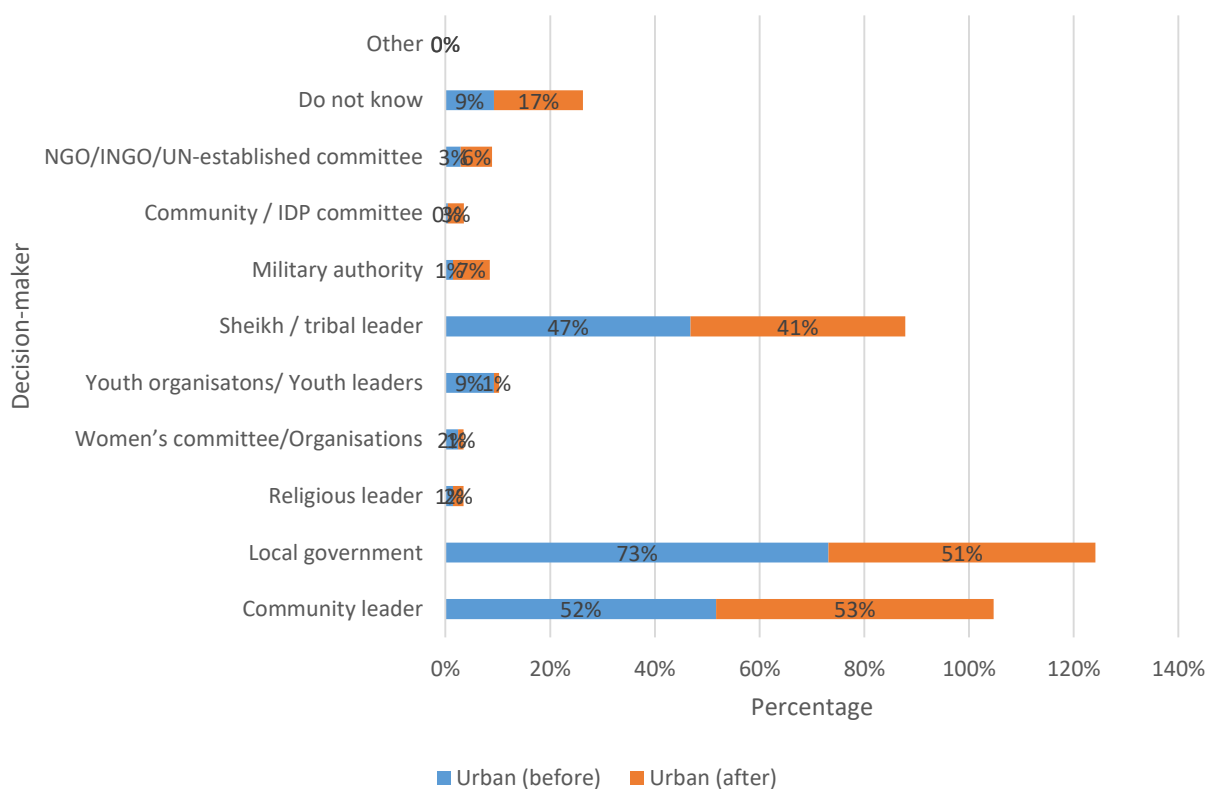
⁸⁷ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016

decision makers at community level. This shows a change to today, where local government and community leaders were identified more often than Sheikhs and tribal leaders.

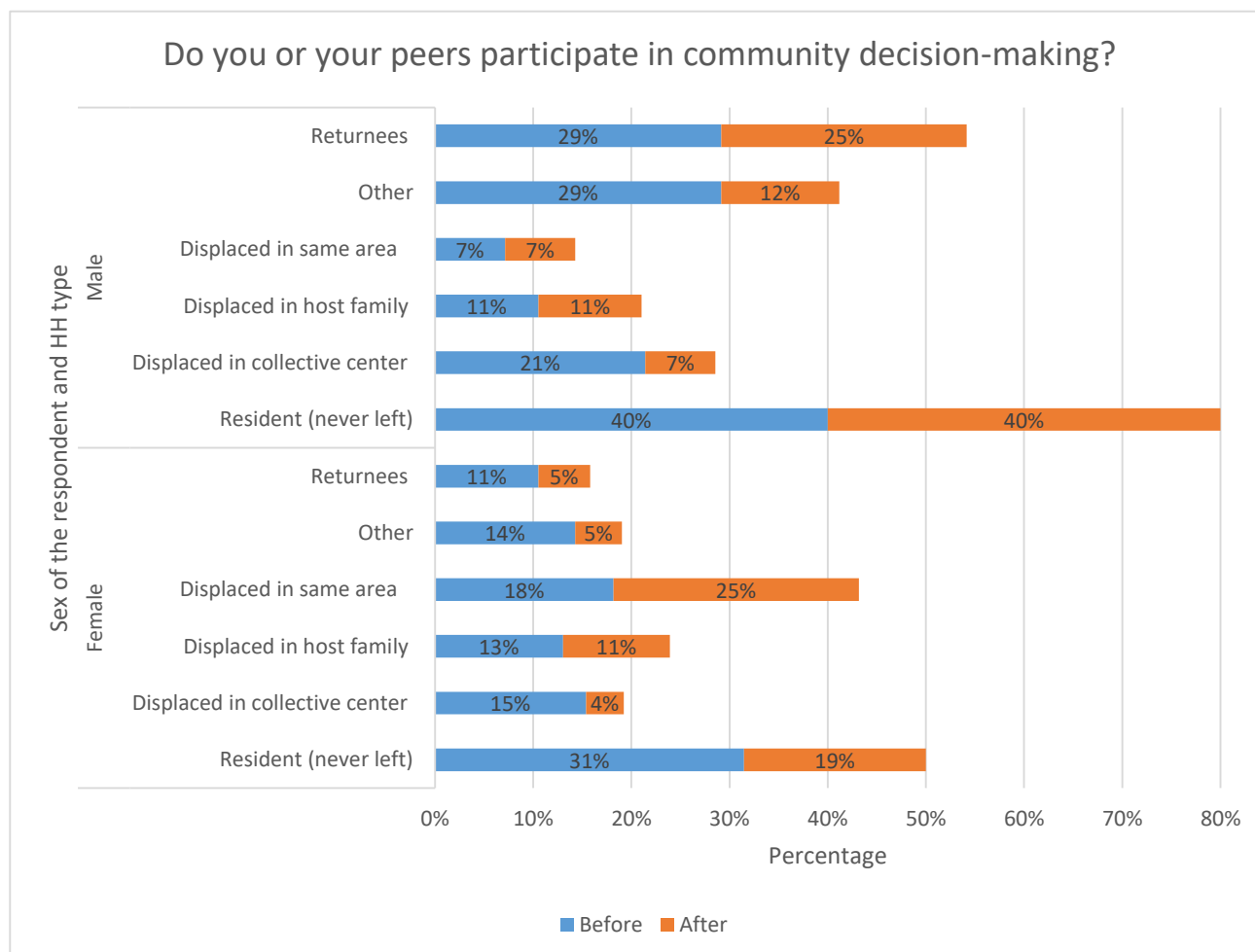
Key decision-makers in the community (Rural areas)



Key decision-makers in the community (Urban areas)



When asked the question in the HH survey, if they or their peers participate in community decision-making before the conflict, 18% of women said yes compared to 26% of men.⁸⁸ Following the conflict, this has declined for both women (11%) and men (21%). Of those who identified as an ethnic minority, 21% of those said yes they or their peers participate in community decision-making today however, this reduced from 37% before the crisis. While there was not a notable difference between urban and rural areas, there was a difference between those from Aden and Taiz. Particularly for Buraiqa where 0% of respondents and 17% in Sheikh Othman answered that they or their peers participated in community decision-making today. This is compared to 27% from Al-Qahira and 21% from Shamayatin. The graph below shows the results by HH type.



Across the FGDs there were differing views on whether decision-making spaces / forums existed in their community and to what extent different individuals could access these spaces.

In Al-Qahira, it was noted that women can hold good positions within the community. Host community women from Al-Qahira reported holding jobs such as teachers, doctors, engineers, nurses and stated that women could hold high positions in the state, political parties, and local authority. They said that in their community in Taiz there are local councils, courts and local authorities which are the main bodies used to make decisions and women can access these positions through the usual election processes, based on their position in society and how educated they are [Female, FGD, HC, Al-Qahira]. Men believed that women's representation did exist but only to a small extent [Male, FGD, HC, Al-Qahira; Female, FGD, IDP, Al-Qahira]. While some female respondents said since the conflict, women are now participating more

⁸⁸ For the analysis of this question, two answers (1f/1m) are excluded from the analysis due to errors in the form, therefore this is performed on 384 respondents.

effectively in the community than they were before the conflict [Female, FGD, HC, Al-Qahira], IDP female respondents noted that *“it is not possible for women to assume positions of power and influence because of the monopoly of men in power”* [Female, FGD, IDP, Al-Qahira]. Men from the same district [Male, FGD, HC, Al-Qahira], supported the idea that women were not able to get powerful positions before or during the conflict. The respondents did not provide further details as to why this is. However, there does seem to be a difference between IDP female representation and host community representation. It was not explicitly said as to why there is this difference, however this could be due to their acceptance in the community, knowledge of how to access spaces and their links to or positions within the social hierarchy which is mentioned as a key determinant for how people access leadership positions.

Female youth respondents in Al-Qahira felt that the decision-making spaces and structures are largely for men and that there is no specific forums for women to participate in. Men from Al-Qahira [Male, FGD, HC, Al-Qahira] said that there are no real decision-making structures in their community, and if there were, it was only rich men who were represented in these positions. A male key informant said that women are participating in community committees and delivering of humanitarian assistance. He further added that since 2017, a woman had been appointed as Undersecretary within the Governorate [Male, KII, Al-Qahira, Local Council]. It was not mentioned, however, women’s level of meaningful participation or influence over decision-making in these committees. Related to this, a female respondent from the same district noted that in terms of women’s voices being heard, *“it is weak and has no effect. Theoretically speaking, there are no structures without woman participation; the women are used to enhance the image of such structures in front of the international organizations...even if there is representation, no action is taken”* [Female, KII, Al-Qahira, Local leader]. It was noted that over time women have become more effective in the cases of social conflicts as they started to take part in social committees and in distribution of relief aids. However, it was noted that most groups do still comprise of the educated and elite in society [Female, KII, Al-Qahira, Local leader].

This points to the idea that perhaps levels of women’s meaningful engagement and influence may be limited even if they attend decision-making spaces or committees, however women are participating more in certain committees and activities run, particularly by organisations, and this may have an impact on how effective women are seen in these positions over time.

In **Sheikh Othman**, both men and women said that there were parties and movements that had emerged since the war. Both host community women and men felt that women’s representation was good in these; that they had some influence and their voice could be heard to some extent. The biggest change had been due to organisations requiring a certain percentage of jobs go to women [Male, FGD, HC, Sheikh Othman; Female, FGD, HC, Sheikh Othman]. However, IDP female respondents said that apart from initiatives for youth there are no real forums used by the community to make decisions. They also felt that there were no traditional leadership roles for women and that the conflict itself had not influenced their ability to take up positions of power and influence [Female, FGD, IDP, Sheikh Othman]. It was noted by a male respondent that for female IDPs there were no positions in the community with regards to decision-making, however there would be positions available such as teacher and secretaries for female host community residents [Male, KII, Sheikh Othman, Chairman]. Female youth said *“Giving women the right to undertake leadership positions in Sheikh Othman district is always met with obstruction and non-acceptance.”* An interesting point was noted in that, if women were educated this may negatively impact her chances of holding a leadership position, whereas a woman who is not educated may be given the chance but only so that people can manipulate her if she was in power. Youth respondents felt that men would try and prevent educated women being in power [Female, FGD, Youth, Sheikh Othman]. While they did not expand much further on this, it seems that men may see educated women as threatening, and have concerns of women competing for decision-making spaces.

In **Shamayatin**, women identified the main group within the community that held decision-making power as the police and that traditionally women did not hold such roles, although now, it was noted, that some

women have studied and work for the local council. This being said, none of the women in the FGD had access to these spaces and noted that only people who have money would gain access [Female, FGD, HC, Shamayatin]. Similarly, female IDPs commented that *“there are no official spaces or forums in which women participate in decision-making”* [Female, FGD, IDP, Shamayatin]. Male host community and male IDP FGD respondents in Shamayatin said the main spaces in the community are the village council and the community committees and that these structures are restricted to men; and within male participation, usually people with more power such as tribal Sheikhs and those with high education would be represented in these spaces. Those that have the least representation would be illiterate men and women and the Muhamasheen. However, IDP men did note a difference within their community in that host community women would have more opportunities to join the village council or start working with organisations, however they did not think that IDP women would have the same opportunity [Male, FGD, IDP, Shamayatin]. Male respondents said that the conflict itself did not have an impact on whether women took up leadership positions, [Male, FGD, HC, Shamayatin] a view similarly expressed by female respondents who noted that men remained in control of decision-making structures in the community, with men being the main participants in forums and decision-making spaces. A male key informant highlighted that *“decision-making is concentrated in the hands of influential people”* [Male, KII, Shamayatin, Local Leader].

Due to challenges in data collection in Buraika there were very few responses to this from respondents in this district. It was noted by one group, however, that there were no social or leadership roles for women in the area [Male, FGD, IDP, Buraika]. Other responses came from the Muhamasheen community in Buraika.

Male Muhamasheen respondents said there was no space for them in decision-making positions and there was also no one to represent them. Even in places where women were able to access these spaces or positions, it was thought that Muhamasheen women would not be able to [Male, FGD, Muhamasheen, Shamayatin]. Female Muhamasheen said that women do not hold any power or position in the community [Female, FGD, Muhamasheen, Buraika], and that Muhamasheen women would never get positions of leadership in their community. They also would not have access to formal or informal decision-making structures in the community due to society’s views and opinions of them [Female, FGD, Muhamasheen, Shamayatin]. It was thought that men would have a negative view of women holding positions or having influence or power [Male, FGD, Muhamasheen, Buraika].

“Nobody listens to the women because in our community women do not have an opinion about any issues. As outcasts, our voice is so weak, we cannot reach anywhere and we do not have anyone to represent us in the important places” [Female, FGD, Muhamasheen Shamayatin]

FGD participants were asked, what gives women power in this community? There were different opinions even within groups. For those who work, women respondents said that a woman will get her strength from her job, income or education [Female, FGD, HC, Sheikh Othman; Male, FGD, HC, Shamayatin]. For others they feel women only get their strength from their husbands [Male, FGD, HC, Sheikh Othman; Female, FGD, IDP, Sheikh Othman]. This was similar for both host community and IDPs in urban areas. The youth felt that women mainly get their power from holding degrees and being educated. Women mentioned that women will get their power through tribes and their family. Overall women’s power will be less than men, but they can gain relative power from the men in their lives e.g. husbands, relatives and tribal connections [Male, FGD, IDP, Shamayatin]. This idea was supported by a key informant who said women gain more power due to their social status (belonging to a particular family / clan) with power, influence and money, as well as social class, education or work [Male, KII Sheikh Othman, Activist].

Peacebuilding and conflict resolution

Women played a substantial role in the nonviolent uprising in Yemen in 2011, challenging existing gender norms and demanding political change. Following this, Yemeni women successfully challenged a system that initially excluded them, to achieve representation in the National Dialogue Conference, the six-month

peace talks that followed the uprising.⁸⁹ Women and girls are particularly affected by the ongoing conflict and it is important that women, as well as other traditionally low-status and marginalised groups are not excluded from decision-making and included peace processes and initiatives.⁹⁰

In this study, there was a general feeling that men and women wanted to ensure their communities were strong at solving problems together as a community, with particular efforts being undertaken to link and build relationships between the host and IDP communities. However, only in very few places did FGD respondents identify that there were initiatives to work on conflict and peacebuilding even though men and women both expressed interest in getting behind social change initiatives. In Shamayatin, respondents spoke of initiatives for conflict mitigation, which included identifying leaders in the community who are known for being honest and impartial [Male, FGD, Muhamasheen, Shamayatin]. Key informants also pointed to specific initiatives. In Al-Qahira for example, it was noted that there is a community-based peace-making program implemented by local organizations and community-based initiatives to alleviate the problems of conflict and violence [Male, KII, Al-Qahira, Activist], as well as there being Social Committees, Community Councils, Women Association for Peace and Taiz Women for Life [Female, KII, Al-Qahira, Local leader].

All participants in one FGD unanimously said that they were definitely prepared to support social change initiatives in their community, such as new NGOs, or the participation of women in providing humanitarian protection services, or in savings associations [Male, FGD, HC, Sheikh Othman]. There are also organizations that have contributed with projects to mitigate conflict and displacement and to strengthen resilience in the districts [Female, FGD, HC, Sheikh Othman]. There are free, voluntary youth peace-building initiatives [Male, KII, Sheikh Othman, Activist] and some projects for IDPs but these were not seen as very effective [Male, KII, Sheikh Othman, Chairman]. The fact that more initiatives were identified through key informants compared to respondents through FGDs, could be a reflection on those in the community who are aware or have access to such initiatives. For example, IDPs in Shamayatin and Sheikh Othman said there were no initiatives to promote peacebuilding in their community except for a few for the youth [Male, FGD, IDPs, Shamayatin; Male, FGD, IDPs, Sheikh Othman].

Due to the scope of this study, it did not result in a deep understanding on the current status of peacebuilding initiatives, and particularly the accessibility and participation of different groups within the community to such initiatives. However, it is recognised that this would be an area for further research, particularly taking into account the analysis in the report related to community-level participation and decision-making.

⁸⁹ Oxfam and Saferworld, Briefing Paper. January 2017. We Won't Wait. As war ravages Yemen, its women strive to build peace.

⁹⁰ CARE & IASC GenCap, Different Needs, Hidden Needs? A scoping study of the inclusion of gender into assessments of the impact 2015 conflict in Yemen. November 2015.

Access to services and assistance

Mobility

Prior to the conflict, traditional structures limited individual freedom of women, with women usually needing to be accompanied by a male relative in order to travel outside their place of residence.⁹¹ A 2010 survey of 1,993 women in Yemen⁹² found that 47% of women surveyed felt “completely restricted” in leaving their house without permission and 21% felt “completely free”. In a 2016 study, it was thought that, in rural areas, because women exercise a strong role in the economy through agricultural labour, they have enjoyed greater mobility to move about in public than urban women for whom seclusion in the home was the norm.⁹³ This idea corresponds with data (page 40) in terms of women’s inability to move around safely being greater for women in urban areas than rural areas.

Restrictions on movement has implications across all areas of life for women, such as physical mobility, choice in marriage, access to education, jobs, and healthcare, interactions with ‘strangers’ (such as police, judges, doctors), physical integrity (early marriage, GBV, female genital mutilation (FGM), economic independence and the possibility to attain decision-making positions.⁹⁴

Pre-conflict, transport was more available and affordable, whereas now respondents spoke of transport being very expensive, with petrol prices being high [Male, FGD, Youth, Al-Qahira], many of the roads are broken [Female, FGD, IDP, Shamayatin] and there are checkpoints along the way [Female, KII, Al-Qahira, Activist; Male, FGD, HC, Al-Qahira]. Due to these logistical challenges and high cost of travel, even men are not always able to use public transport and move around as freely as they did before the conflict. One group of respondents mentioned that to travel to Al Hudaydah, from Shamayatin would take 20 hours [Male, FGD, IDPs, Shamayatin].⁹⁵ There was also a sense of fear among respondents, with a key informant noting, *“Movement within the area is safe and fairly easy. Mobility outside the Governorate, however, is fraught with danger, indiscriminate shots, armed clashes, checkpoints and surveillance everywhere”* [Male, KII, Shamayatin]. Many concerns regarding checkpoints came from respondents in Taiz. These concerns are supported by a 2016 study by Oxfam who noted that men and women are particularly vulnerable to violence and harassment in Taiz governorate, given the sheer number of checkpoints manned by different armed groups and active conflict.⁹⁶

Before the war, respondents noted that it was possible to move without ID cards, but now it is hard to move to another Governorate without ID, especially for men [Male, FGD, IDP, Al-Qahira]. For IDP’s this adds another layer in terms of restrictions of movement. IDP men also highlighted a lack of knowledge of different transport available in the displaced area and the associated costs, which puts them in a vulnerable position; either having to pay more or not being aware of the options available to them.

HH survey data showed that 24% of respondents (21% female and 27% male) identified that a key challenge was the inability to move around safely. For male respondents a greater number from urban areas (43%) than rural areas (9%) identified this as a challenge. For female respondents similarly a greater number from urban areas (24%) identified this as a challenge compared to rural areas (18%). When looking district-wise, the highest percentage of respondents who identified this as a challenge (both male and

⁹¹ From night to darker night: Addressing discrimination and inequality in Yemen. The Equal Rights Trust. Country Report Series: 9, London, June 2018.

⁹² From night to darker night: Addressing discrimination and inequality in Yemen. The Equal Rights Trust. Country Report Series: 9, London, June 2018. p. 181

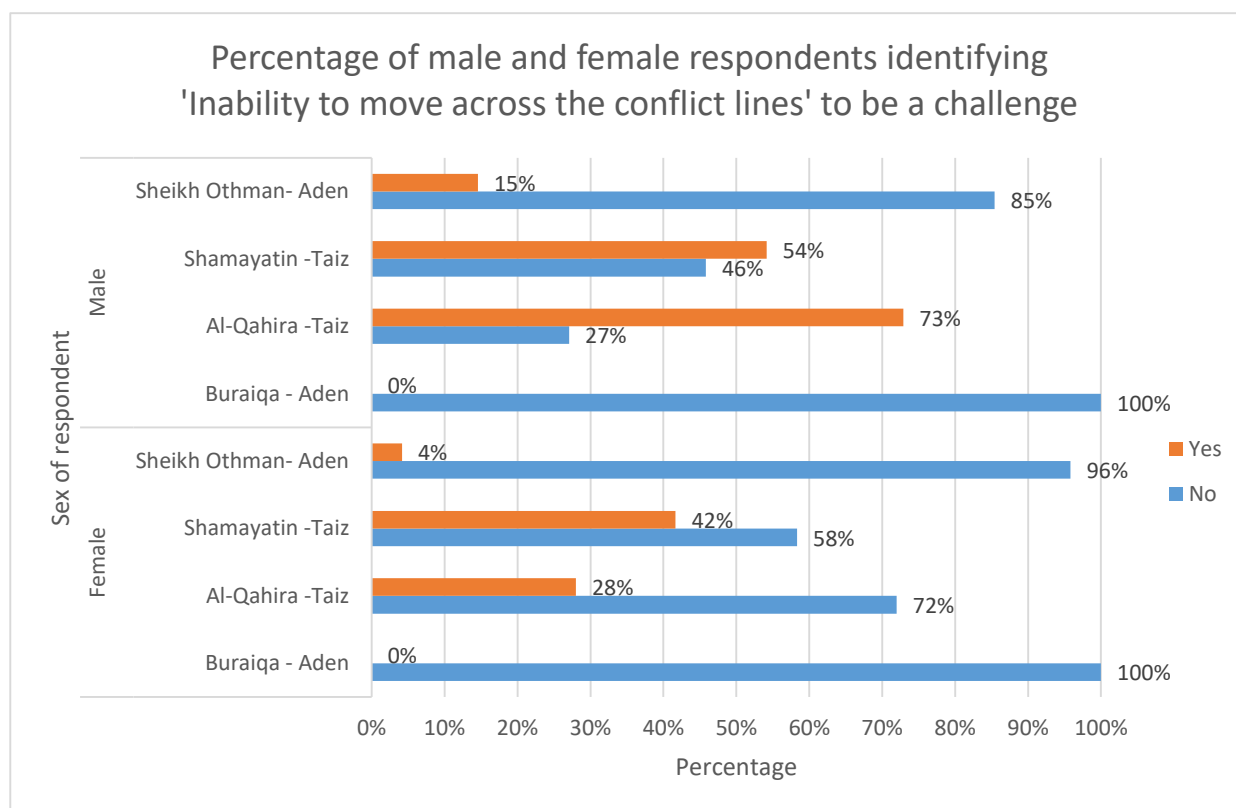
⁹³ CARE International, Gender in Brief, Updated April 2019.

⁹⁴ Al-Zwaini, L., *The Rule of Law in Yemen: Prospects and challenges*, The Hague Institute for the Internationalization of Law, September 2012: http://www.hiil.org/data/sitesmanagement/media/QuickScan_Yemen_191212_DEF.pdf

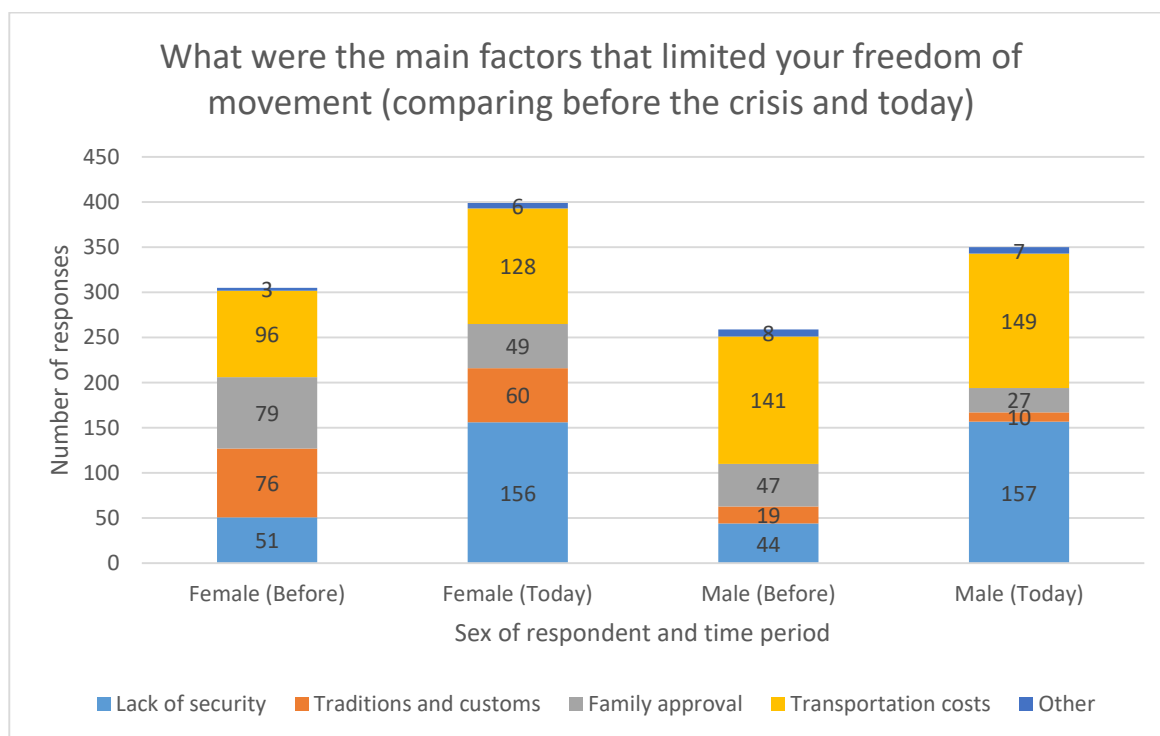
⁹⁵ While respondents did not mention how long this would take before the crisis, this can be estimated at around 3-4 hours driving.

⁹⁶ Oxfam (September 2016), Briefing paper. Picking up the pieces: What Yemenis need to rebuild their lives in a country torn apart by conflict. <https://reliefweb.int/sites/reliefweb.int/files/resources/bp-yemen-picking-up-the-pieces-210916-en.pdf>

female respondents) were in Al-Qahira in Taiz (32% female and 54% male). This could be linked with responses to a second question in terms of the 'inability to move across conflict lines' (see figure below) in which 27% of respondents (18% of female respondents and 36% of male respondents) highlighted as being a challenge. Similarly, for this, results for Al-Qahira were highest for men (73%) and Shamayatin was highest for women (42%).



Since the conflict, restrictions remain and have been compounded by it's impacts. The graph below shows the main factors that male and female respondents indicated limited their freedom of movement before the conflict and today.



The lack of security as well as transportation costs were the most cited reason for male and female respondents. Traditions and culture, as well as family approval slightly decreased for women. However, this was expressed as an issue through the FGDs and story-telling e.g. Of the female respondents who took part in the story-telling, *all* spoke of needing some kind of accompaniment, consultation or permission to travel outside their home [Female, Individual Story-telling, Shamayatin, Skeikh Othman & Al-Qahira].

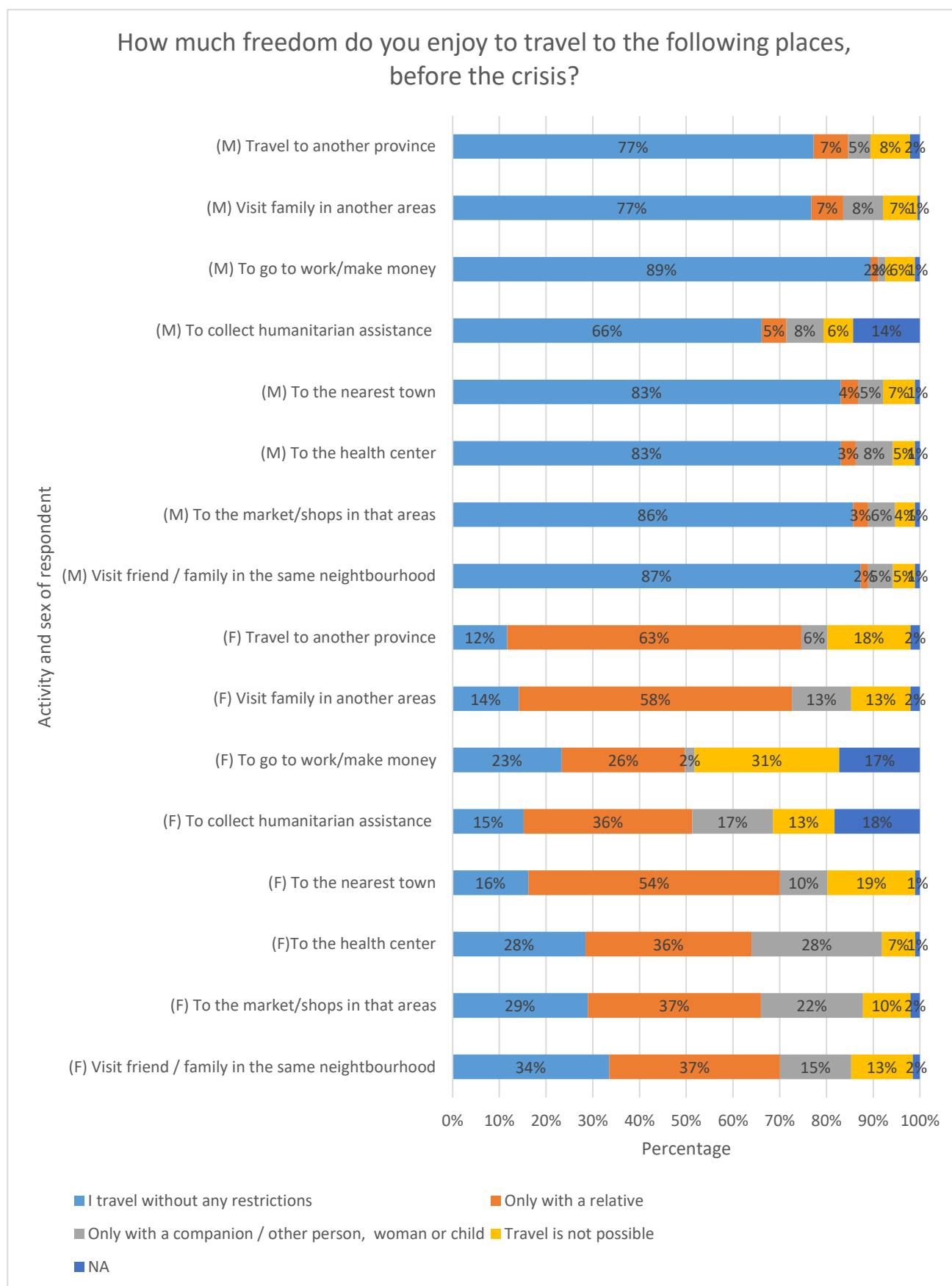
In Shamayatin, women from the host community (during FGDs) mentioned that only men can travel however in the urban areas, women said that they can move freely in their own neighbourhood but are still unable to travel outside of their city, citing reasons related to insecurity and fear due to the conflict. In Sheikh Othman, female respondents shared that there is no freedom of movement due to feelings of insecurity as well as their fathers not allowing them to travel outside of their community [Female, FGD, IDP, Sheikh Othman]. When services are in unsafe locations, this also restricts women's access as they risk facing harassment [Male, KII, Sheikh Othman, Activist]. In Buraika, it was mentioned that since the conflict, men making decisions over their wives' movement has become even more strict due to fears of kidnapping.

For men, they feel their movement has been restricted due to the conflict; however, this is due to their individual fear of the constant fighting, rather than a restriction placed on them. The man or head of the household decides who comes and goes from the house and when, so although their movement is restricted by the conflict, they have the autonomy to decide whether they do move around.

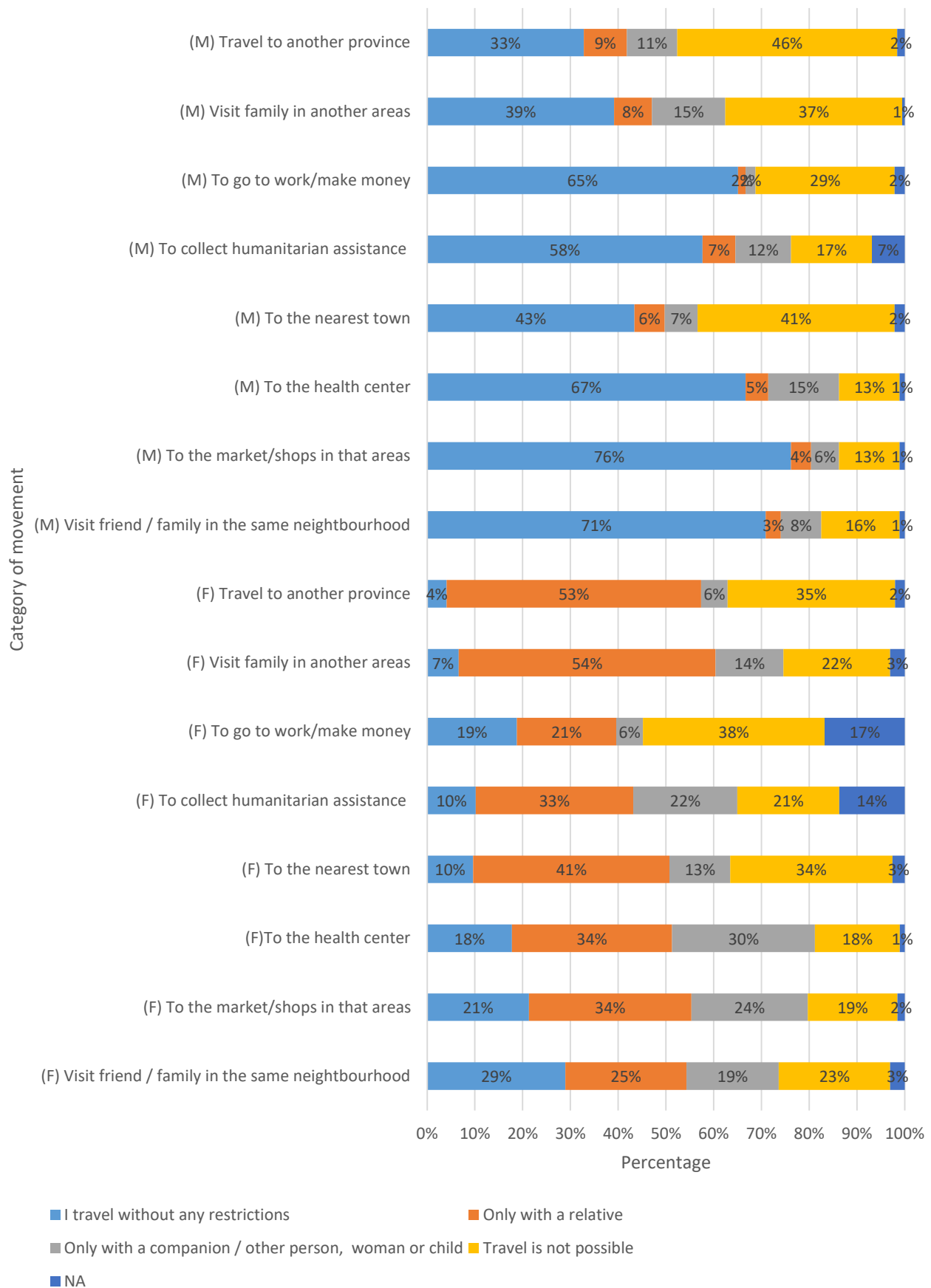
Interestingly, in both the 2016 study and today's study cultural acceptance / traditions and customs decreased as a limiting factor from before the conflict, to either 2016 or today. In 2016⁹⁷, however it was rated the highest obstacle to freedom of movement for female respondents, closely followed by lack of security and then cost of transportation, the latter two following the trends found in this study. For male respondents in both studies (2016 and this study) lack of security ranked the highest followed by transportation costs.

⁹⁷ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), *From the Ground Up: Gender and Conflict Analysis in Yemen*, 2016

The following two graphs highlight the proportion of male and female respondents to the HH survey and their level of freedom both before the crisis and today, based on a number of activities.



How much freedom do you enjoy to travel to the following places, today?



For men the greatest changes were noted in terms of their ability to travel without restriction which decreased for 'travel to another province' from 77% to 33%, and 'to the nearest town' which decreased from 83% to 43%. For the same types of travel, these saw the largest increase in restrictions for male respondents highlighting that now travel is not possible, compared to before the conflict. Before the conflict 8% of male respondents indicated that travel to another province was not possible, which increased to 46% today. Travel to the nearest town, not being possible, increased from 7% before the conflict to 41% today. For female respondents the largest changes were noted for travel not being possible 'to the nearest town', which increased from 19% to 34% as well as to 'travel to another province' which increased from, 18% to 35%. Those indicated that they travelled without restrictions also reduced across all types of travel, although results were quite low even before the conflict.

Health Care

"At the health level, the impact was catastrophic, so that most or all of the health facilities were stopped, many medicines were lacking, children and mothers were deprived of vaccines. And there emerged many diseases and epidemics such as Cholera due to the shortage of food and the absence of direct personal hygiene. The elderly, the chronically ill and pregnant women either died or suffered health relapses due to the difficulty in obtaining emergency medicines and health care" [Male, KII, Shamayatin]

Women and men spoke of high food insecurity linked with a reduction in their income, which has led to many struggling to eat a balanced diet, having enough nutritious food, and to health complications. In addition to this, average food prices are estimated to be 150% higher than before the crisis.⁹⁸ One FGD gave the example of, a bag of wheat, which used to cost 4,000 YER before the crisis and it is now at 10,000 YER.

All participants in the FGDs said that the health of the population changed from better to worse from the beginning of the crisis. Diseases such as cholera and Malaria, Dengue, Meningitis, and Malnutrition were reported; health issues that have been exacerbated since the conflict due to difficulties in accessing food, clean water, health care, as well as the rising prices and shortage of medicine, [Male, FGD, IDP, Shamayatin; Male, FGD, HC, Buraiqa], as well as increased populations living in close proximity with poor services available [Female, FGD, HC, Buraiqa]. Increases in heart disease, blood pressure, diabetes due to tiredness and psychological stress of the conflict was also raised [e.g. Male, KII, Buraiqa, Local Leader 3]. It is thought that 92% of districts in Yemen (in 21 or the 22 governorates) have been affected by cholera, leading to 1,359,504 suspected cases since 1 January 2018. The cholera epidemic has disproportionately affected IDPs living in densely crowded areas, those living in poor hygiene conditions and those from marginalized communities.⁹⁹

In a number of areas, men and women reported the lack of government run hospitals, with some private services emerging, whose costs are high e.g. in urban Aden, there are health centers that are available, however respondents said that many cannot afford this as they are now privately run [Male, FGD, HC, Sheikh Othman]. Similarly, in rural Taiz, before the conflict, men mentioned that health care was almost free and available to everyone [Male, FGD, HC, Shamayatin] and now even public hospitals are charging high prices [Male, FGD, IDP, Shamayatin]. In Al-Qahira, male respondents identified that health facilities were available, safe and clean before the conflict, but now they have deteriorated [Male, FGD, IDP, Al-Qahira]. One FGD mentioned that now people are turning to traditional ways to treat health concerns such as herbs or traditional remedies [Male, FGD, HC, Al-Qahira].

⁹⁸ Humanitarian Needs Overview, Yemen. 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

⁹⁹ International Medical Corps, August 2019. Mental Health and Psychosocial Support Assessment. Needs, services and recommendations to improve the wellbeing of those living through Yemen's humanitarian emergency.

In addition, the issue of a lack of female doctors was raised, which makes women feel embarrassed to access services [Female, FGD, HC, Sheikh Othman]. Female respondents believe that the lack of female staff is a result of a lack of understanding women's needs and the need for privacy in some facilities [Female, FGD, HC, Sheikh Othman]. Male FGD respondents also highlighted that the absence of female staff in turn, deepens the lack of understanding of women's needs and privacy in these facilities [Male, FGD, HC, Sheikh Othman; Male, FGD, Youth, Sheikh Othman].

A particular concern for many respondents was the specific health needs and the impact of the current situation on pregnant and lactating women. Respondents said that pregnant women suffered a lot in delivering because of the absence of the clean health services. There is no clean and safe delivery, treatment for complications in pregnancy, no health knowledge about sexually transmitted infections, or family planning [Male, FGD, HC, Sheikh Othman; Male, FGD, Muhamasheen, Shamayatin; Male, FGD, Youth, Al-Qahira] and lack of nutritional awareness which has led to malnutrition in pregnant women and linked to underweight babies [Female, FGD, Youth, Sheikh Othman]. It was noted that a vulnerability for women's physical health is having multiple pregnancies and early pregnancies [Male, FGD, HC, Al-Qahira; Male, KII, Sheikh Othman, Chairman]. Mobile health clinics were suggested to ensure pregnant mothers could reach the clinics, where transport is a barrier [Female, FGD, IDP, Shamayatin]. This would also support the restrictions caused by blockades on some roads, which restrict certain medicines reaching the communities and exposing people to health risks [Male, KII, Sheikh Othman, Activist]. In Buraiqa, it was noted that while there are functioning health centers there needs to be more, particularly to support access for women [Male, KII, Buraiqa, Local Leader].

A lack of reproductive health centers was noted by FGD respondents, [Male, FGD, Muhamasheen, Buraiqa], which included a lack of regulation of reproductive health services [Female, FGD, HC, Shamayatin]. Male IDPs in Al-Qahira noted that some reproductive health services were provided by organisations but it is limited and does not meet the needs. Lack of reproductive health centers and lack of awareness and availability of family planning was highlighted by men and women. The result of lack of reproductive services sometimes means women have to leave their district to go to another area. As noted previously, transportation and travelling alone for women comes with its risks and fears of safety, and is an additional high cost expense and barrier for accessing required family planning and reproductive health care services. Providing reproductive and healthcare services were also noted by key informants, as a specific health need for women [Female, KII, Al-Qahira, Local leader; Female, FGD, Youth, Al-Qahira]. In Buraiqa it was noted that a reproductive healthcare center was about to open, but this was stopped due to war [Elderly Male, KII, Buraiqa, Local Leader]. This was highlighted as a vulnerability for women but it was also noted that these weaknesses in service delivery were also present before the war [Male, KII, Buraiqa, Local leader]. Low availability of reproductive health care services, is linked to high maternal mortality rate. It has been noted that only 45% of deliveries are attended by skilled medical professionals and the maternal mortality rate is estimated as 148 deaths per 100,000 live births.¹⁰⁰ The obstacles women are facing, highlighted in this analysis, such as a lack of safe, accessible services, transport options, availability of female staff, security considerations and restrictions on movement can all contribute preventable maternal and infant deaths, unwanted pregnancies and subsequently unsafe abortions.¹⁰¹

In the HH survey, respondents were asked, do women in your community have safe access to maternal health and family planning services?¹⁰² There were increases for both male and female in terms of those who felt they could not safely access such services from before the conflict (9% female and 2% male) to

¹⁰⁰ Gender considerations in the Humanitarian Response in Yemen.

<https://www.humanitarianresponse.info/en/operations/yemen/gender-considerations-humanitarian-response-yemen>

¹⁰¹ DHS 2014, cited in Gender considerations in the Humanitarian Response in Yemen.

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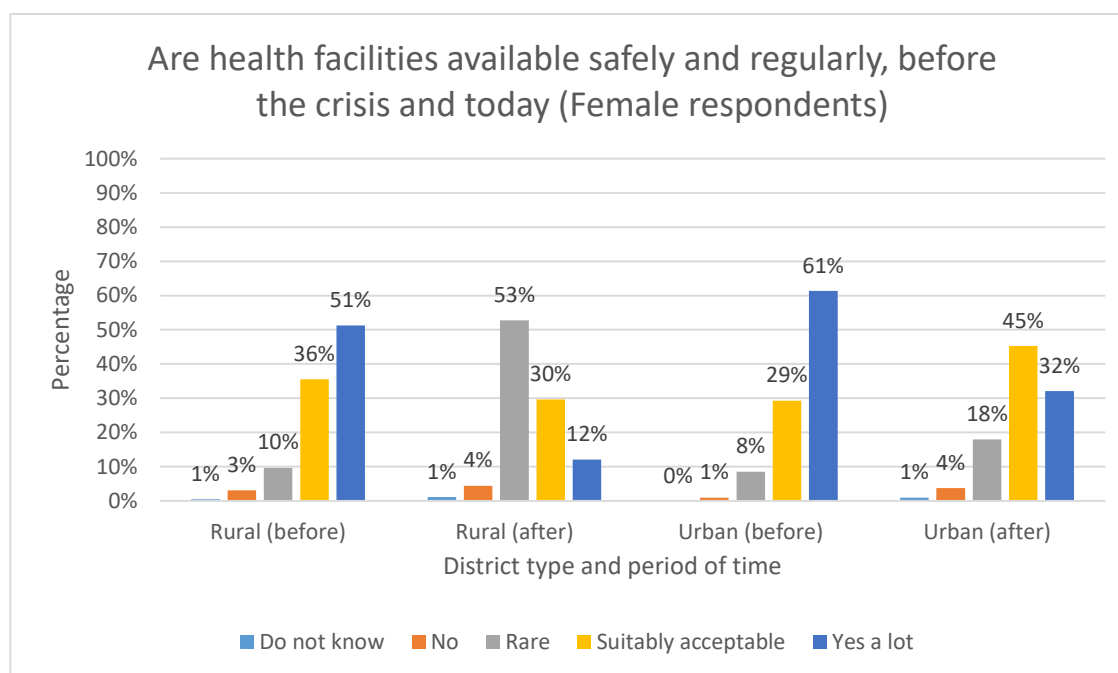
¹⁰² Due to issues during the data collection using the HH survey application, 194 blank responses were noted for responses 'Before the conflict' across male and female, and 308 blank responses for those after the conflict. No responses in Buraiqa were captured for safe access after the conflict. Therefore, the percentages are based on the active responses and not the full 386 HH respondents.

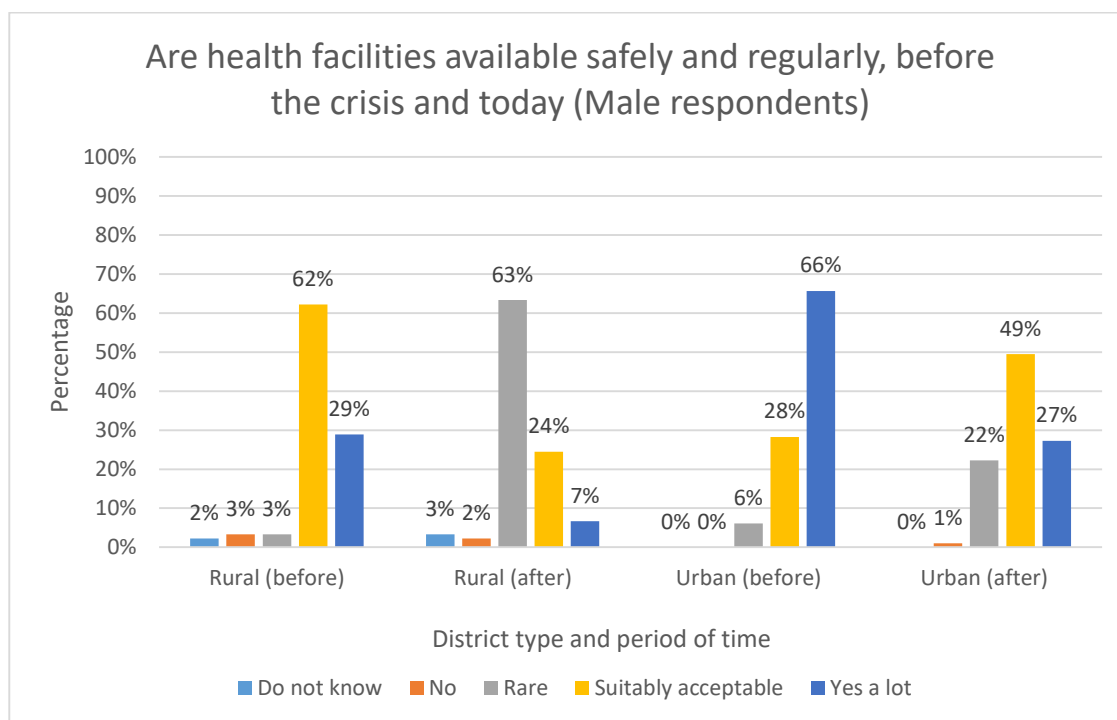
today (18% female and 3% male). Those noting 'limited access' to services increased from 5% female and 2% male, to 13% female and 12% male. Respondents who felt that they had excellent access in the past (59% female and 73% male) dropped to today (44% female and 64% male).

In Al-Qahira, it was noted that while there are negative changes in the health of the population since the beginning of the crisis, in some ways there has been a significant improvement, as there are more projects which are providing better support [Male, KII, Al-Qahira, Local Council].

Male and female respondents highlighted the need for awareness on good health, hygiene and nutritional practices (which used to be available before the conflict) [Male, FGD, HC, Shamayatin]. Many people are not aware of the importance of certain foods or those that may contain toxins when bought from the market. Currently the lack of income may restrict people from making the best choices for their family in terms of food but at least there would be an increased awareness among the community. It was also raised that specialised health care, medication and suitable food was required for those with for chronic diseases and for the elderly.

The two graphs below show the impact of the conflict on men and women's access to health services disaggregated by rural and urban areas. It shows that for female respondents, those who felt there were 'a lot' of safe and regular health facilities dropped from 51% to 12% in rural areas and 61% to 32% in urban areas. For male respondents, while it was overall less in rural areas at 29% before the crisis this still reduced to 7% of respondents identifying this today. For urban areas, for male respondents, the drop was greater with 66% respondents noting this before the crisis and 27% today.





Of the respondents who answered 'no' either before the crisis or today, the main reasons for not having access were: not having enough money to pay for treatment (6 responses), the road is risky (6), there are no health services in the area providing maternity or family planning services (6), no transportation (2) and no female doctors (2).¹⁰³

Education

It is estimated that 2 million children are out of school with 2000 schools damaged or occupied by IDPs or armed groups.¹⁰⁴ Lack of access to and availability of education was identified as a concern across the respondents. Key problems included schools being closed, the lack of materials such as textbooks not being available, as well as a lack of consistent teachers, often due to teachers not receiving their salaries or due to displacement [Male, FGD, HC, Shamayatin; Female, FGD, HC, Shamayatin]. The quality and consistency of education is being disrupted due to a lack of oversight of the schools [Female, FGD, IDP, Al-Qahira]. Women and men identified that the rising costs of education, transport and the additional security risks, all contribute to additional barriers specifically for women and girls to continue their education [Male, FGD, IDP, Sheikh Othman; Male, FGD, HC, Sheikh Othman]. Some respondents did identify a change in attendance of girls, due to a reduction in girl's schools available as well as female teachers and staff. Male respondents in Shamayatin mentioned that IDPs have needed to use the schools for shelters, making it difficult to continue with regular schooling [Male, HC, Shamayatin; Male, KII, Shamayatin].

For IDP families an additional challenge noted was the inability to obtain identification documents that they would require to enrol children in school; many families had their papers lost, damaged due to the displacement or had left them back in their homes [Female, FGD, IDP, Shamayatin]. According to the HH survey, difficulty in obtaining legal documents was a common issue across all types of families with 22% of respondents (16% female and 29% male) identifying obtaining legal documents as a challenge. More female respondents identified this as an issue in Aden (20%) over Taiz (16%) compared to more male respondents in Taiz (35%) identifying this as a problem compared to male respondents from Aden (29%).

¹⁰³ This is based on multiple response, multiple choice answers from 20 respondents.

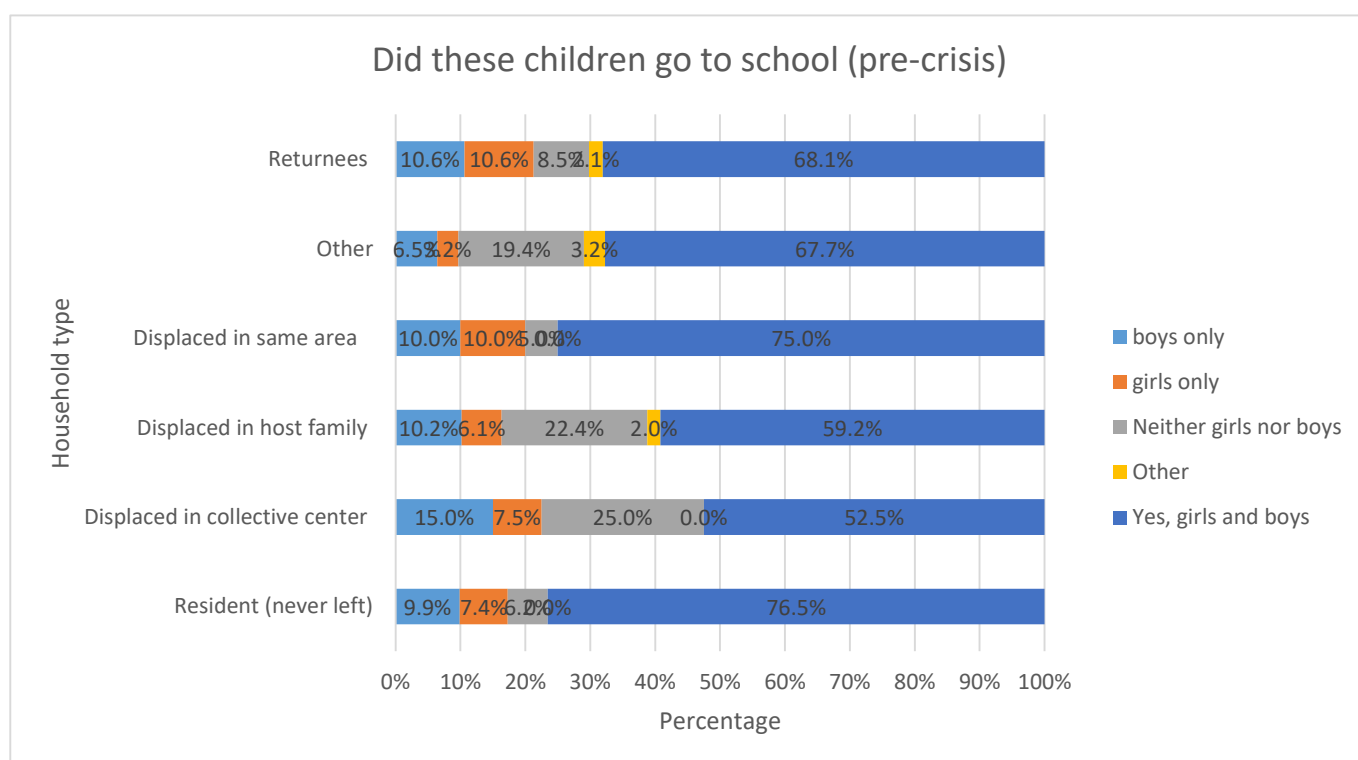
¹⁰⁴ Humanitarian Needs Overview, Yemen. 2019.

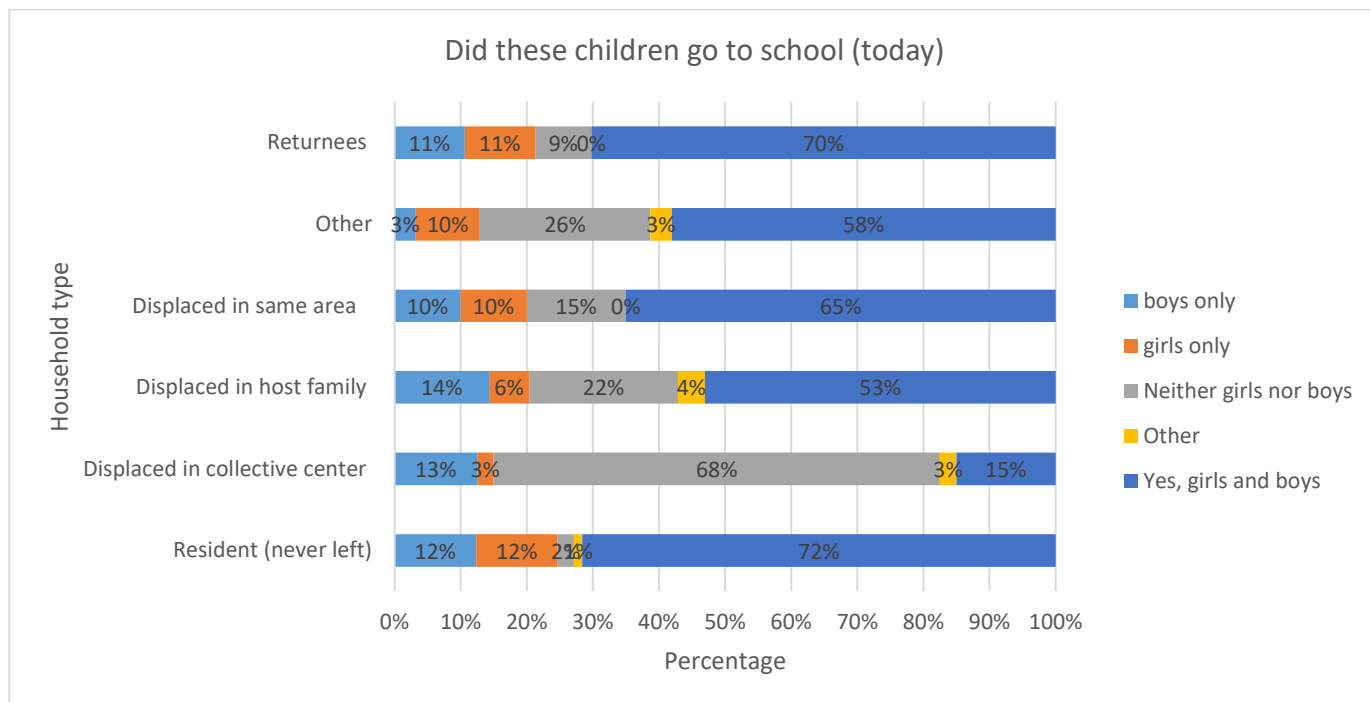
https://reliefweb.int/sites/reliefweb.int/files/resources/20190402_Yemen_HNO_2019_Summary_V1.pdf

In addition to practical challenges, children studying during conflict creates challenges to the emotional well-being of the child. It was expressed that children are fearful on a daily basis, so when they do attend school their learning is negatively impacted, *“The students are studying at schools and the fear is full of their hearts”* [Male, FGD, IDP, Shamayatin].

Of the respondents in the household survey, 69% had children of school age in the family. One question asked whether boys and girls in their family attended school before compared to after the conflict started. One main difference as to whether girls and boys attended seemed to be due to the type of household, rather than based on geographical location.

For those who did not send their children to school, the top reasons for not sending girls to school included not having enough money to send all children (7 responses) and that it was not safe for girls to attend school (5 responses). Reasons given for not sending children (boy and girls) was that there was not enough money to send their children (53 responses) and that it was not safe for children to attend school (9 responses). For boys, it was not enough money to send them all (5 responses) and boys needing to work at home (3 responses). Further to these reasons, FGDs respondents expressed concerns that boys and girls were not continuing school if they were at an age to get paid work, as this was the priority for the family [Female, FGD, HC, Shamayatin]. For boys, this was largely due to them joining the military or taking up paid employment, and to a lesser extent early marriage [Female, FGD, HC, Buraika]. For girls, key reasons included dropping out early due to early marriage, [Female, FGD, HC, Buraika] to take up paid employment, the safety of girls going to and from school, the need to help out in the home and families not having enough money to send girls [Male, KII, Sheikh Othman, Activist].





The two graphs below show the breakdown according to HH type. The largest impact was seen for boys and girls who were displaced in collective centers, with returnees slightly increasing the numbers of children who attended. For residents, while the number of both boys and girls reduced, sending only boys or only girls increased, pointing to perhaps families needing to choose fewer children to send.

A final issue raised, related to female single-headed families. Since the conflict, due to the absence of males in the household due to displacement or missing fathers in the conflict, young boys and girls now need to be taken to schools and health facilities by their mothers. Restrictions on women's movement therefore not only restrict the woman herself, but is having the effect of limiting both boys and girls of access to education and health services. This was raised by key informants and through the FGDs [Male, FGD, HC, Sheikh Othman].

Similar trends were noted in the 2016 study¹⁰⁵, when comparing attendance of girl and boy children at school to before the conflict. In 2016, the main reasons for not sending girls to school included that it was unsafe, especially in rural areas, followed by the need for girls to work at home. Reasons for not sending boys included that the household did not have enough money to send all the children to school. In addition, both studies noted that boys (and in this study, girls), needing to work for money as a reason for not sending children to school.

Adult education / training opportunities

Prior to the conflict, it was reported that 48.5% of adult women were literate in 2011, compared to 82.1% of their male counterparts.¹⁰⁶ For young people (15-24), literacy rates ranged from 96.4% for young males to 76% for young females. In terms of primary school enrolment, this was reported to be at 80% for male and 66% female.¹⁰⁷ According to the HH survey, 32% of male respondents from Taiz had university-level education compared to 17% female. In Aden, 1% of male and 1% of female had university-level education. The gender difference was most notable for respondents from Aden who had no formal education, 61% female compared to 49% male respondents. Female respondents also highlighted limitations of education,

¹⁰⁵ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016

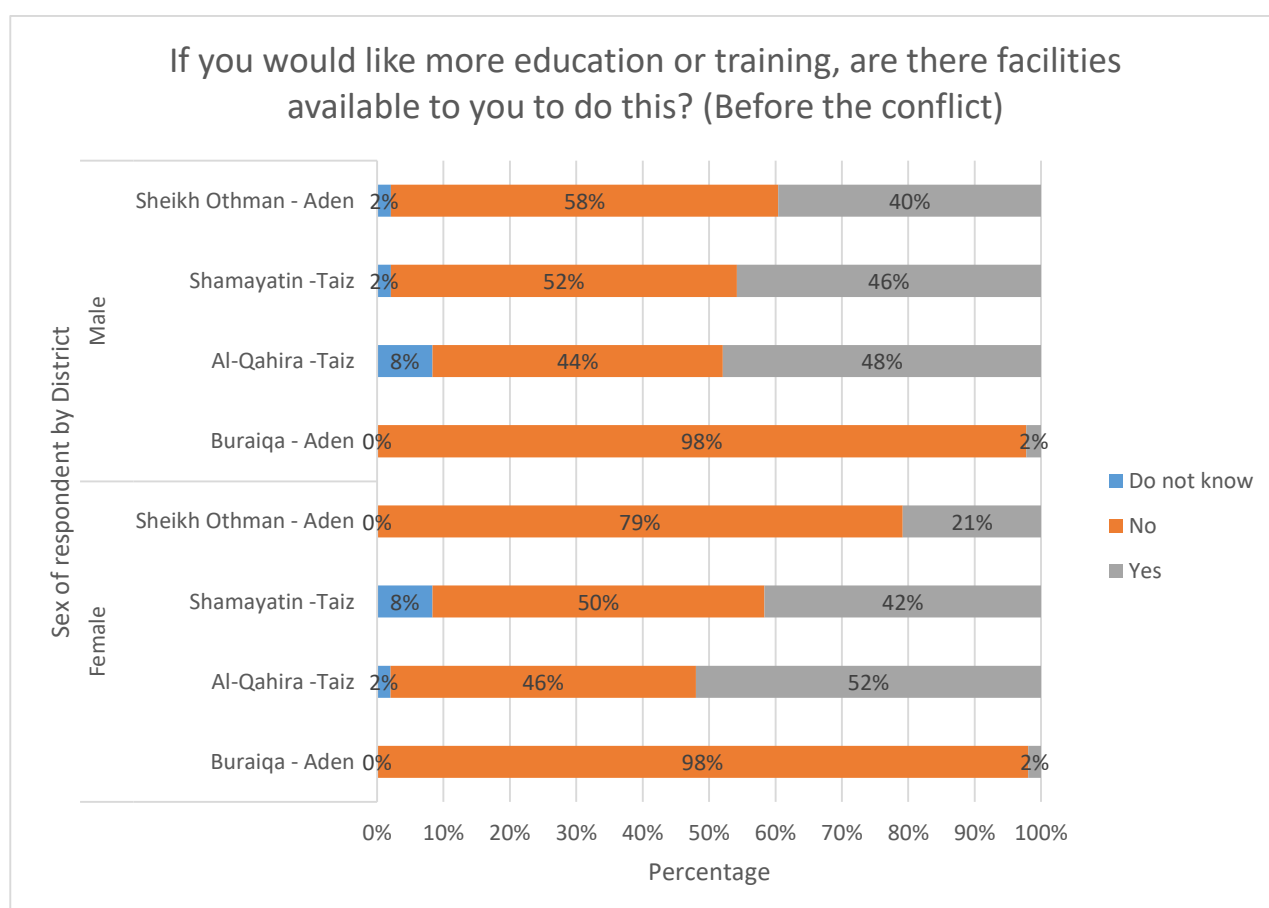
¹⁰⁶ Central Intelligence Agency, The World Factbook — Yemen, 2011

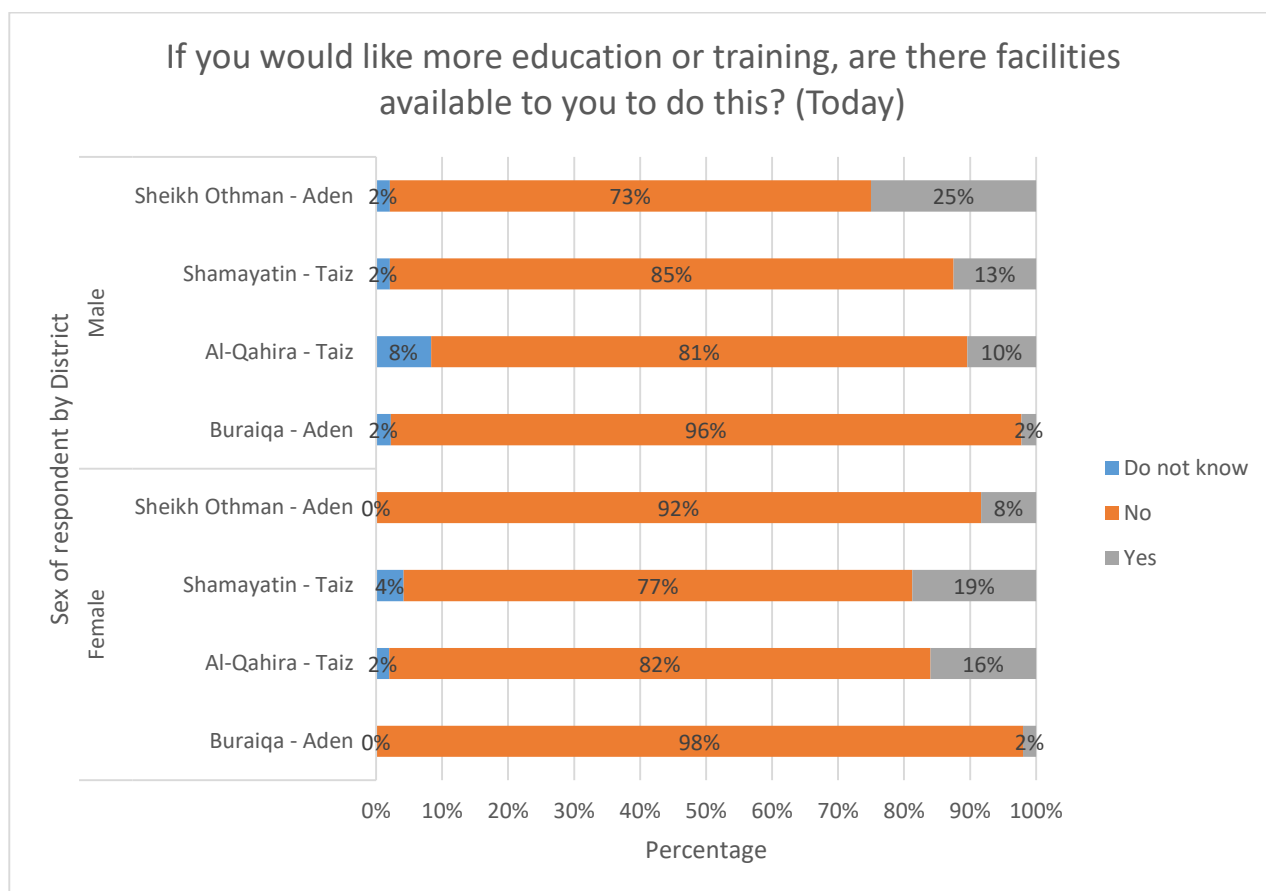
¹⁰⁷ UNICEF, Annual Report — Yemen, 2013

in the changing gender roles between women and men. For women, who are now accessing the paid workforce, not being educated or being illiterate is creating a barrier, which limits the type of work they can do outside the home, therefore the onus is still on the man of the household to provide [Female, IDP, FGD, Sheikh Othman]. Female youth respondents in Al-Qahira said that one of the positive changes related to the new work opportunities being sought by women, has been that society also now seems more aware of the importance of girl's education; particularly now, as low levels of education and illiteracy have been a barrier for women to access certain jobs and occupations.

It was noted by respondents in Sheikh Othman that prior to the conflict the Skills Development Fund, which is under the authority of Ministry of Technical Education and Vocational Training, supported skills building activities, however since the conflict this has ceased due to lack of funding. The reduction in opportunities for training and education was also noted through the household survey responses.

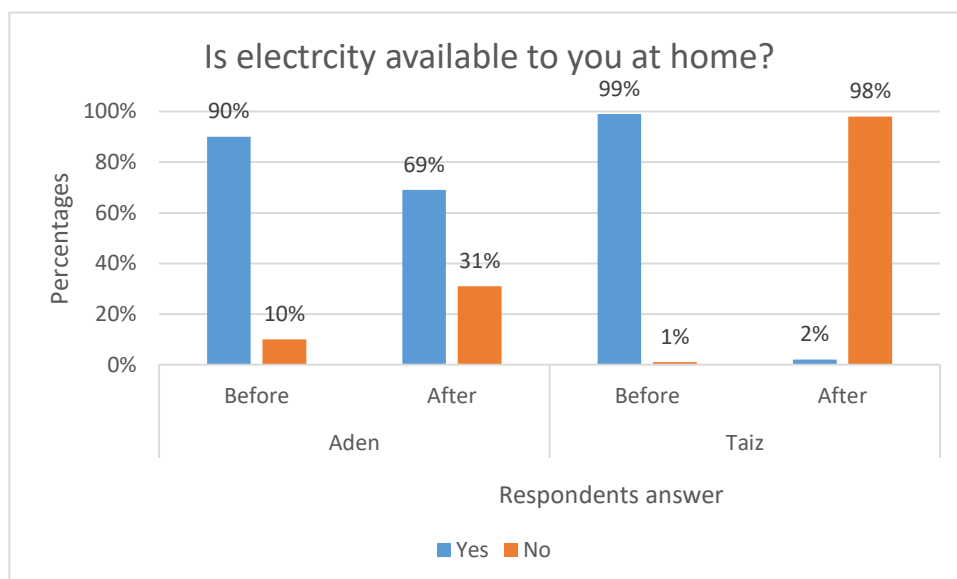
The graphs on the next page, showed that the Taiz Governorate had more education and training opportunities before and after the conflict for men and women, although both Governorates saw a decrease in opportunities overall. Buraiqa (Aden) had the lowest opportunities before the conflict for men (2%) and women (2%) as well as after, where there was no change in the number of responses. The graphs below show the responses disaggregated by sex for before and after the conflict. For those who identified as an ethnic minority, 36% stated that they felt they could get this before the conflict and this dropped to 16% after the conflict. While there was a decrease, this seems similar to the general trends.





Electricity and fuel

Access to electricity has decreased significantly since the conflict in 2015. The graph below shows the results from the HH survey comparing the access to HH electricity before and after the conflict, in Aden and Taiz. Comparisons were made between districts, comparing rural and urban areas, as well as disaggregation by gender, however the largest changes were noted at the Governorate level.



There were also reductions in the number of hours of electricity available during the day from before the conflict to today. This was reported by respondents in the HH survey and outlined in the table below.

Governorate / Number of hours	< 4 hours		5-12 hours		>12 hours	
	Before	After	Before	After	Before	After
Aden	20%	36%	54%	57%	26%	7%
Taiz	2%	50%	48%	25%	51%	25%

Results from the HH survey showed that prior to the conflict, the male in the household would largely be responsible for buying and bringing fuel (gas) to the house. Before the crisis in rural areas, 76% of men and 15% of women, 8% boys and 1% girls, were responsible for buying and bringing fuel to the house. In urban areas there was a similar trend (73% men, 17% women, 9% boys and 1% girls). Today, 65% of men and 22% of women in rural areas (10% boys and 3% girls) and 66% men and 21% women in urban areas (11% boys and 1% girls) are responsible. Therefore, there is a slight shift with more women, in both urban and rural areas taking on this responsibility. This was supported in the FGDs, where it was noted that the role of the man pre-conflict was to bring bottles of gas to the house, whereas now women have taken more of this role [Male, FGD, IDP, Shamayatin]. It was noted that women queue for long periods of time but this is necessary as women are given priority within these lines over men, so they need to go. Further, if families need to buy a gas bottle in the black market the price can reach to 6000 thousand YER, while at the official points, its price is 2500 -3000 YER [Male, FGD, IDP, Shamayatin; Female, FGD, IDP, Shamayatin].

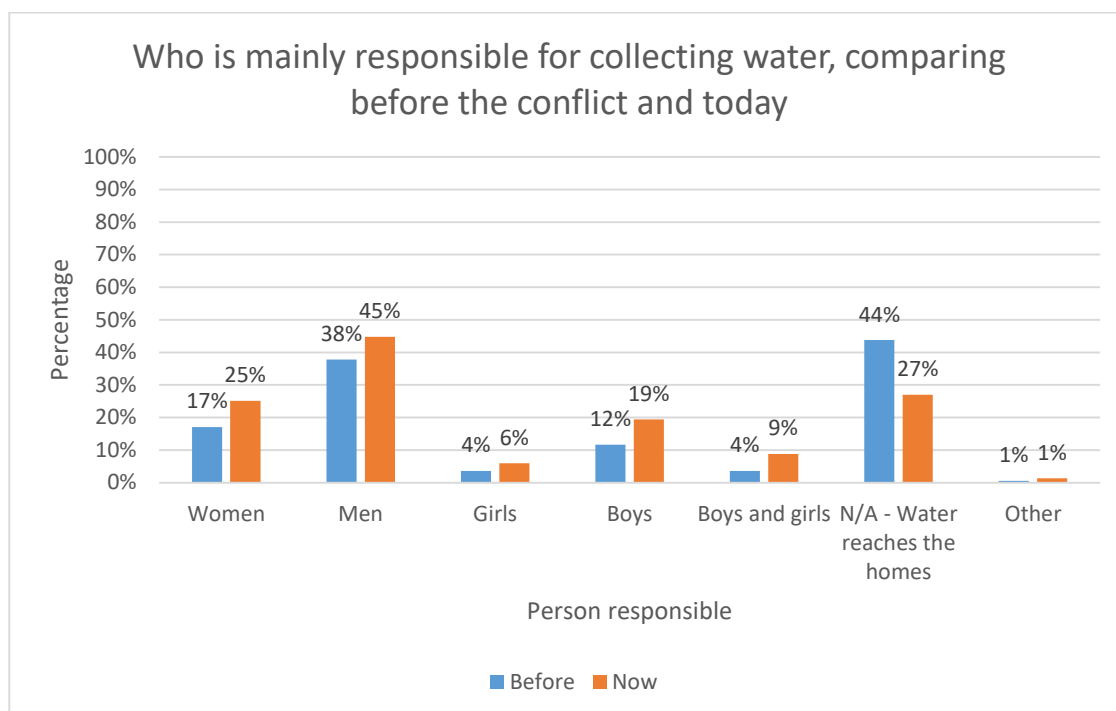
Overall, there were less references to women bringing firewood but it was noted that in the absence of gas, women would be forced to adapt and use firewood [Male, FGD, IDP, Sheikh Othman]. Whereas a man may have done this before the crisis, women are taking on this role now [Male, FGD, IDP, Shamayatin; Male, FGD, IDP, Al-Qahira].

Water

The deterioration of water services in Yemen has led to reduced water supplies, increased environmental pollution, disease and epidemics with Yemen currently experiencing what is reportedly its worst cholera epidemic in history.¹⁰⁸ According to the HRP 2019, only 22 % of rural and 46 % of urban populations are connected to partially functioning public water networks and less than 55 % of the population has access to safe drinking water.¹⁰⁹ According to the HH survey, today, in Aden (both Buraiqa and Sheikh Othman) a shared water tap with neighbours was the most common water source (41% of respondents), for Taiz, in Al-Qahira 49% of respondents used water transport trucks, and in Shamayatin 54% of respondents used a water pipe connected to their home. For male and female respondents, the trends for each district were similar in terms of the most common to least common water sources.

¹⁰⁸ International Medical Corps, August 2019. Mental Health and Psychosocial Support Assessment. Needs, services and recommendations to improve the wellbeing of those living through Yemen's humanitarian emergency.

¹⁰⁹ Yemen, Humanitarian Response Plan, January to December 2019, page 6



Before the conflict, 44% of people had water reach their homes, therefore overall less people had to go out to collect water. This had dropped to 27% to today, which has led to an increase in the responsibility of women, men, boys and girls in collecting water.

During the FGDs, availability and access to safe water was identified as one of the biggest changes for both men and women. Prior to the conflict, each home had a water source, or an available well or water source nearby. However, now families have to go and collect water from various alternative sources, this is often far from their houses [Male, FGD, Youth, Al-Qahira], of higher costs, e.g. either needing to buy water tanks or receiving water from organisations [Male, FGD, IDP, Al-Qahira], as well as there not being enough water to meet the needs of the people.

In Shamayatin, respondents mentioned that water availability was sporadic due to water cuts in the area and the water is polluted which causes many diseases. In Sheikh Othman, people often had to collect water from elsewhere and even then, it was not always available, however they noted that those particularly vulnerable were displaced people in camps or marginalized groups in other areas of Sheikh Othman [Male, KII, Sheikh Othman, Activist]. In Buriqa, water supplies have been suspended however, it was noted that the lack of services and infrastructure existed before the crisis also [Male, KII, Buriqa, Local Leader]. In Al-Qahira, water was highlighted as the main suffering. Before the crisis, men would buy water tanks but now women and children queue up for water provided by organisations and stand in crowded lines for hours [Male, FGD, HC, Al-Qahira].

People indicated that they will collect water from wherever they can that is nearest to them, which could be from a Mosque, neighbours house, a charity water point or if they have money they can buy a tank of water [Female, FGD, HC, Sheikh Othman]. Women mentioned that they find it difficult in urban areas to bring water back to the home, filling and carrying multiple bottles. This also may involve waiting in line for long periods of time when they already have a double burden of work.

According to the HH survey, before the crisis, 13% of female respondents and 19% of male respondents calculated that it took them more than 60 minutes to collect water. This increases to 42% of female and 54% of male respondents today taking more than 60 minutes. Similar results were noted in 2016 where

55% of the respondents at the time identified that it took them more than one hour to collect water and in that study, that it often needed to be done several times a day.¹¹⁰

A full breakdown of time spent collecting water by sex is shown in the table below.

	Before		After	
	Female	Male	Female	Male
Less than 30 minutes	26%	19%	12%	6%
Between 30-60 minutes	13%	17%	16%	12%
More than 60 minutes	13%	19%	42%	54%
Do not know	1%	3%	2%	3%
NA - Water reaches the home	46%	42%	28%	25%

The fact that it is taking longer to access water points, and that women are taking on a greater role in collecting water, causes restrictions to other vital roles that women and children should play in their daily lives, in particular carrying out economic activities, accessing education or paid work.¹¹¹ In addition, women and men are having to travel much further and potentially to a number of different water sources. Travelling to collect firewood (mentioned above) and to collect water, potentially to areas unknown, far away and considered unsafe, can increase women's risk of harassment and to GBV.¹¹² This is particularly notable when considering the proportions of women who highlighted risks regarding safety when moving outside, risks of attack when moving in and outside the community and the additional limitations on movement for women and girls.

Before the conflict, 82% of female and 94% of male respondents said that the nearest water point to them was safe. Now 74% of women and 84% of men found this to be the case. Results were slightly lower in rural areas (71% female and 83% male) compared to urban areas (76% female and 85% male). There are some mitigation strategies women and men are taking if they do not feel the water point they are going to is safe, and this is shown on the graph below.¹¹³ While women will identify the best time of day (37%) or go in groups with other men (12%) for 35% of men and 15% of women they responded that they did not do anything specific.

¹¹⁰ CARE International, Oxfam Great Britain and the Gender Standby Capacity Project (GenCap) of the Inter-Agency Standing Committee (IASC), From the Ground Up: Gender and Conflict Analysis in Yemen, 2016

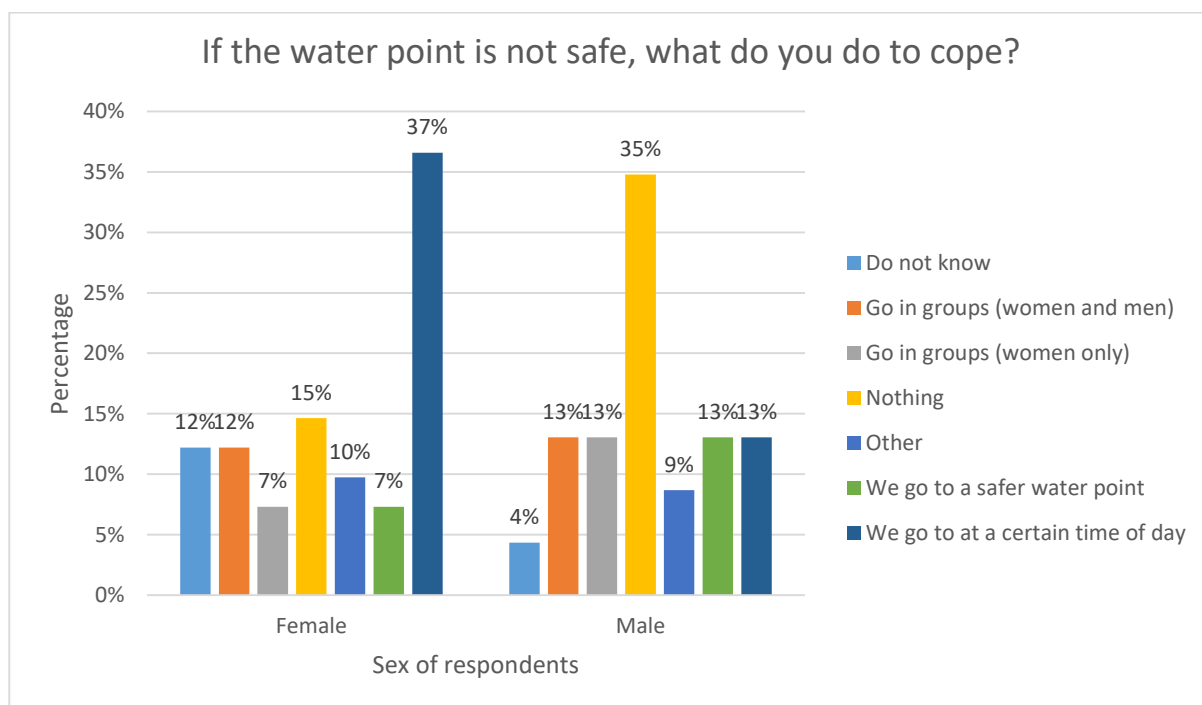
¹¹¹ Gender considerations in the humanitarian response Yemen.

<https://www.humanitarianresponse.info/en/operations/yemen/gender-considerations-humanitarian-response-yemen>

¹¹² Gender considerations in the humanitarian response Yemen.

<https://www.humanitarianresponse.info/en/operations/yemen/gender-considerations-humanitarian-response-yemen>

¹¹³ This question was answered by 64 respondents, 41 female and 23 male.

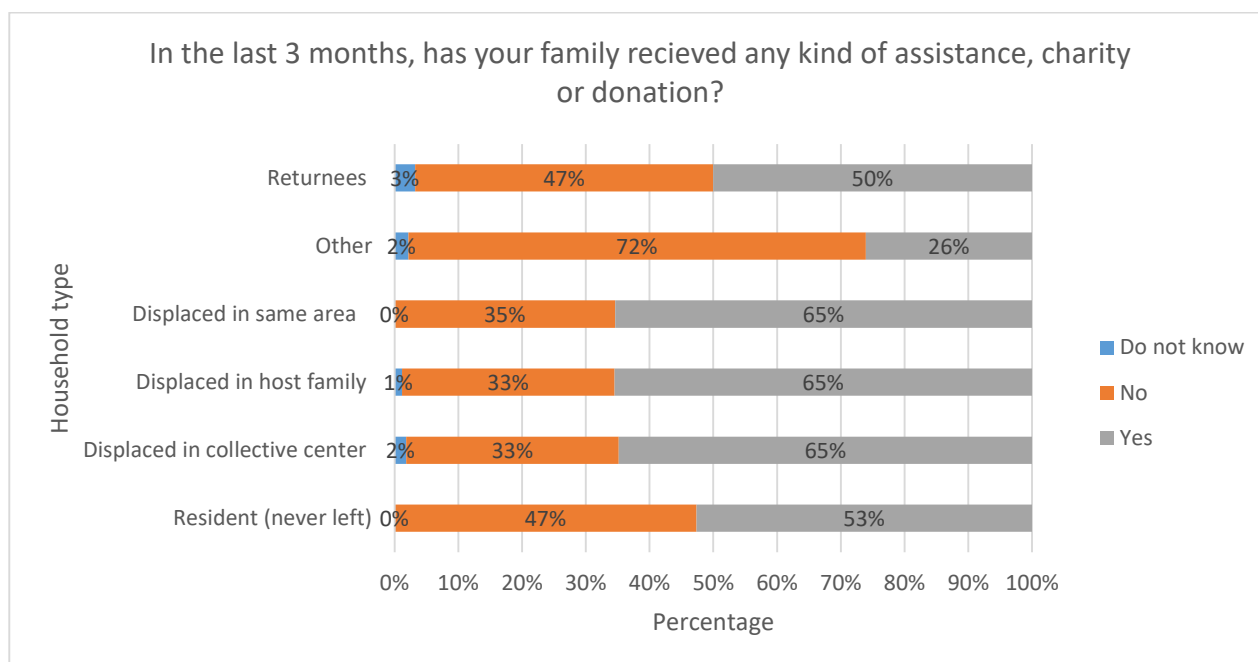


“Water was available for 24 hours from the state project, gas was found at any station. Also, children were going to school safely. Hospitals and private health centers were open for 24 hours. Now, everything is very difficult. I go to fetch two yellow water bottles that are not suitable for drinking from, from the well or the tank. I stand in a long queue for two or three hours. We buy water for drinkin and we suffer to get a gas. We only get one every month or two months by the head of our neighbourhood. If you want to buy it from another place, that will cost you six thousand in addition to transportation fee. Sometimes, we use firewood to cook if we don’t have gas, but for that we need permission from the owner to cut the tree” [Female respondent, individual story-telling, Shamayatin]

Access to humanitarian aid

The figure below shows responses from the HH survey, looking at how many respondents received some form of assistance in the previous three months. Results are consistent amongst those who are displaced, either in the same area, with a host family or in a collective center. Results are fewer for those residents who have never left, as well as returnees. For those who fall under ‘other’ – these are 46 respondents who were either renting private houses or who established their own camp in a private property. It would be key to find out why they are not accessing support, and if this is required. One issue that may link to challenges for displaced populations, is the inability or challenges people are facing in accessing legal documents, as mentioned in the previous section. Lack of official papers are an obstacle for women, boys and girls to be registered and be entitled to food distribution.¹¹⁴

¹¹⁴ Gender considerations in the humanitarian response Yemen
<https://www.humanitarianresponse.info/en/operations/yemen/gender-considerations-humanitarian-response-yemen>



There were slight differences based on those in rural areas (49%) and those from urban areas (60%) who received assistance, as well as district-wise with the following responding yes that they had received assistance: Al-Buraiqa (66%), Al-Qahira (72%), Shamayatin (38%) and Sheikh Othman (42%). Only 45% of those who identified as being an ethnic minority, which included tribal and Muhamasheen individuals reported receiving assistance. Of the respondents who identified as being part of an ethnic group and answered no, these respondents were from Shamayatin and Sheikh Othman. This was supported during the FGDs, with respondents who identified as Muhamasheen felt there was some discrimination in them accessing aid. Looking at previous reports, an Oxfam assessment in Aden and Hajjah highlight that the Muhamasheen and other marginalized groups were excluded from aid delivered by international non-governmental organizations (INGOs) or Gulf-funded charities.¹¹⁵

Female FGD respondents from the host community in Sheikh Othman unanimously confirmed that it is the husband who receives food aid on behalf of the family. After which, the husband and wife are the ones who share in the decision on how the aid is used, or it could be the wife on their own. In terms of accessing humanitarian aid there were references to some groups not being able to access aid or the right aid and levels of discrimination towards some groups. Male respondents mentioned that humanitarian aid existed but is not reaching everyone in need [Male, FGD, Youth, Sheikh Othman]; particularly in areas with high numbers of IDPs, where there was not enough food to go around. There were numerous references to larger families, single-headed households and less well-off families, in that they require more food assistance per household and this did not seem to be taken into consideration [Male, FGD, IDPs, Shamayatin; Female, FGD, IDPs, Al-Qahira]. One group noted that while it was customary for the elderly, children and pregnant and lactating women to get the largest share of the food, in many cases, men get the largest share of food, and food of the highest quality. After, the rest of the household members get what is left [Male, FGD, Muhamasheen, Shamayatin]. Referring back to the figures on pages 48 and 49 when asked 'how much freedom male and female respondents enjoy with regards to collecting humanitarian assistance today', only 10% of female respondents responded that they could travel without restriction, compared to 58% of male respondents. The largest response from female respondents was their need to travel with a relative (33%) followed by 'only with a companion, other person, a woman or a child' (22%) and thirdly, that 'travel is not possible' (21%). These results indicate potential challenges for women in the

¹¹⁵ Oxfam, briefing paper. September 2016. Picking up the pieces: What Yemenis need to rebuild their lives in a country torn apart by conflict. <https://reliefweb.int/sites/reliefweb.int/files/resources/bp-yemen-picking-up-the-pieces-210916-en.pdf>

household accessing humanitarian aid, which should be considered in terms of how and where humanitarian aid is given.

Since the conflict in March 2015, according to respondents, it was noted that there was an absence in the role of the local authority in providing services to the community, as well as an absence of responsibility to provide such services [Female, KII, Al-Qahira, Activist]. It was highlighted that political affiliation has an impact on a person's access to services with those most marginalized not able to access [Male, KII, Al-Qahira, Activist], as well as the poor in society, which was seen to be due to unfair distributions [Female, KII, Al-Qahira, Activist]. In Sheikh Othman there was an emphasis through the key informants that IDPs were in a situation where they lacked access across services such as education, health, and work opportunities.

For those who were able to access humanitarian assistance, it was noted by one key informant that while salaries of the employees were cut off for a long period of time, the families of these employees were affected less, because of the humanitarian and relief assistance that included many people in the city and its suburbs and on an ongoing basis [Male, KII, Shamaytin].

Needs and aspirations

At the end of each Focus Group Discussion and Key Informant Interview, respondents were asked about the opportunities they see to build on current social change within the community. The majority of responses, as discussed below, focused on the shifts in gender roles with women taking on more responsibility outside the home and men taking on greater roles within the home. The discussions focused largely around attitudes around these shifts, as well as the opportunities to build on existing changes including where specific gaps remain. While respondents noted that opportunities did exist, there were still gaps in education and employment opportunities, psychosocial support, awareness programming and protection.

While there has been a change and shift in gender roles and relations, which was noted to different degrees by male and female respondents across the districts, it was noted, particularly by respondents from Buraiqa that the situation remains patriarchal [Female, FGD, IDP, Buraiqa]. The society was described as one still governed by customs and traditions, which leads to a lack of opportunities for women [Male FGD, Muhamasheen, Buraiqa]. Even if women do take on certain roles and positions they are few, and their chances of reaching higher positions in society was slim [Female FGD Muhamasheen, Buraiqa; Male, FGD, HC, Buraiqa]. Part of this was identified to be due to a sense that men in the community are unhappy with women "competing" with them in decision-making [Male, FGD, IDPs, Buraiqa]. In Buraiqa, while there were some respondents who mentioned existing interventions such as handicrafts, sewing and IT for women and electrician and air conditioning programmes for men [Male, KII, Buraiqa, Police] many respondents from Buraiqa, identified an overall lack of programmes available.

Respondents from the other districts, noted that while the changes in roles were difficult for some [Female, FGD, Youth Al-Qahira] the culture has changed for the positive [Male, KII, Al-Qahira, Local Council]. One group of male respondents said we need to "enable the woman to continue her journey" [Male, FGD, HC, Shamayatin]. This sentiment was supported by a number of other male and female respondents who spoke of the need to support women's role in the paid workforce e.g. in occupations such as engraving, hairdressing and sewing [Male, FGD, HC, Sheikh Othman; Male, FGD, IDPs, Sheikh Othman; Female, FGD, HC, Sheikh Othman; Male, FGD, HC, Al-Qahira], to encourage women to start their own businesses, to increase their participation in decision-making [Female, FGD, HC, Shamayatin; Female, FGD, HC, Al-Qahira], and to offer courses and training for women [Female, KII, Al-Qahira; Male, KII, Sheikh Othman, Activist; Male, KII, Sheikh Othman, Chairman],

The majority of respondents from FGDs identified education and training opportunities for women as key interventions that were still needed, to work towards the empowerment of women and a way to support the relationship between men and women. This was explicitly mentioned in fourteen FGDs with male and female, host community, IDP and Muhamasheen respondents from Sheikh Othman, Shamayatin and Al-Qahira. Key informants specifically mentioned education and skills building classes, including literacy for elderly women [Male, KII, Sheikh Othman, Chairman; Male, KII, Sheikh Othman; Activist]. One group noted the importance of women understanding and realising their rights, particularly with regards to employment rights [Female, FGD, Youth, Sheikh Othman].

In addition to work opportunities and skills development, respondents also focused on supporting attitudes and behaviour change as well as conflict resolution within the family and in society. This included conducting individual and joint awareness sessions to solve problems in the family, to support reducing gender discrimination [Male, FGD, HC, Shamayatin; Male, FGD, HC, Al-Qahira; Female, KII, Shamayatin, Activist] and providing support to guide families through the changing roles men and women may take on as a result of the conflict e.g. looking at how to support children if routines are disrupted, nutritional education, hygiene awareness [Male, FGD, IDP, Shamayatin; Male, KII, Shamayatin, Development Expert]. There was a need to focus not just on education for women and girls but on educating the wider society to raise awareness of changes occurring in society, impacts of the conflict and how society can work together [Female, FGD, HC, Al-Qahira; Female, FGD, IDP, Al-Qahira].

Respondents identified that employment itself for men and women is a way to avoid thinking about the conflict. However, in addition to this, it was felt that psychosocial support was required for women and men who have been affected by war, as a way to support them in seeking other initiatives e.g. life skills and employment opportunities [Male, FGD, Youth, Al-Qahira; Female, FGD, Youth, Al-Qahira; Female, KII, Al-Qahira, Local leader].

Building on this, a few respondents highlighted the need to ensure a holistic approach to any intervention. In addition to psychosocial interventions, other basic needs must be met. It is important to have water sources closer by, ensuring the availability of fuel [Female, FGD, IDPs, Shamayatin; Female, Youth, Al-Qahira] and ensuring a protective environment. One key informant expressed the importance of mitigating the negative impacts to women if they take on these roles: *"It is impossible to continue the change in women's participation in livelihood activities, if women are subjected to violence, exploitation or harassment in this new role. In addition, man and society then become increasingly convinced that women cannot play such a role"* [Male, KII, Shamayatin, Development Expert]. Protection from violence for women who take on income generating roles, was also raised by other respondents from Shamayatin [Male, FGD, HC, Shamayatin; Male, FGD, IDP, Shamayatin] and from Al-Qahira [Female, IDPs, Al-Qahira].

In Al-Qahira and Shamayatin, there were references to the need to increase women's social and political participation. An important point raised was the need to support female candidates to run in elections including ensuring women know their right to participate [Female, FGDs IDPs, Al-Qahira; Female, FGD, HC, Shamayatin; Male, FGD, IDP, Shamayatin], supporting more women to participate and be involved in decision-making in the community at all levels, focus on ensuring participation of women in higher positions [Female, KII, Al-Qahira, Local leader; Female, KII, Al-Qahira, Principle; Female, FGD, HC, Shamayatin; Female, FGD, Muhamasheen, Shamayatin], and ensure women's increased participation in local and international organisations [Female, FGD, IDPs, Al-Qahira].

It was noted that, while there are some opportunities, those that exist are not yet available for everyone [Female, KII, Al-Qahira, Principle]. It was expressed that there is a need to expand the types of interventions that seek to enhance the participation of women in work. One group noted that interventions do not cover

all the regions that need it and many initiatives support limited interventions e.g. sewing¹¹⁶ [Male, FGD, Youth, Sheikh Othman]. There was also a call to have projects targeting lower income families and all social classes [Female, KII, Al-Qahira, Principle; Female, KII, Al-Qahira, Local leader]. The need to target specific groups and to ensure a fairer coverage of interventions was highlighted by a number of respondents. The Muhamasheen specifically said that the “marginalised” require training on crafts and the opportunity to be involved in work. They also noted that they need protection from violence and oppression from others in society [Male, FGD, Muhamasheen, Shamayatin].

It was noted that in some areas the same people are targeted multiple times which leaves others without assistance [Male, KII, Buraiqa, Police]. It was noted that as interventions continue, it is important to ensure they fully meet the needs of communities, linking them more closely with local stakeholders and local financing plans adopted by the local authority in order to become more effective and sustainable [Male, KII, Shamayatin, Development expert].

Recommendations

Overarching recommendation

This Gender and Conflict Analysis was conducted in two Governorates and within an emerging complex humanitarian situation. There were limitations to the scope of the study and the ability, in some areas, to collect comprehensive data due to conflict escalation in some of the areas surveyed. Therefore, the results of this report need to be considered with these limitations and within the timeframe of the study. Therefore, it is important to continue to develop up-to-date analysis of shifting gender dynamics within the affected communities. This will allow for more effective and appropriate programming and will ensure humanitarian assistance is tailored to the specific and different needs of women, men, boys and girls. It is recommended that CARE Yemen continue to invest in gender and conflict analysis, that programming is adapted to the changing needs and that new reports are continued to shared widely.

Recommendations

One of the key findings in this gender and conflict analysis is that there remain gaps in terms of addressing the gender-specific needs, aspirations, priorities, barriers, safety and protection concerns of women, men, boys, girls and specific groups, in the communities identified within this analysis. The following recommendations relate to programming recommendations that can be adopted by CARE Yemen, as well as wider recommendations that may require multi-sector and multi-actor approaches.

Livelihoods and skills development

- Provide increased opportunities for women to develop life skills. This would involve opportunities to build on their existing skills and learn new skills to diversity opportunities, with the aim to increase access for women to engage in income-generating activities and to support women’s economic empowerment and agency building.
- Build on CARE Yemen’s engaging men and boys’ approaches and ensure that within all interventions, specific approaches are taken to work with young men (youth) and male adults, with regards to awareness raising, skills training and income-generating activities

¹¹⁶ The group did not specify the regions that were or were not receiving interventions.

Leadership, participation and decision-making

- Work with existing community-based networks and forums to increase active and meaningful representation and participation of women, with a focus on marginalised groups and IDPs. Where such networks and forums do not exist, work with the community to identify where the needs are and establish spaces based on the needs. This would aim to provide safe spaces outside the home where women can come together and, particularly in areas of high displacement and mixed communities, enable communities to integrate, create dialogue, build trust and social cohesion. The location of the spaces and the main objectives and activities should be developed in consultation with women in communities, with specific considerations of women with disabilities and single FHH. This needs to take into consideration the views of host community, IDP women and those from marginalised groups. These spaces could take the form of safe spaces, savings groups or co-operatives, life skills classes, community committees etc.
- Focus on initiatives that aim to improve inclusive governance and increase women's participation and decision-making in communities at all levels. [CARE's Women Lead in Emergencies](#) approach could be an interesting approach to support women, and particularly marginalised women to access decision-making spaces and take on leadership positions in the way they choose to. Place a special focus on ensuring meaningful participation of marginalized groups, lower income women and women with lower formal education. Ensure a holistic approach and work to mitigate potential protection risks to women, through the Women Lead in Emergencies, engaging men and boys approach. Within this, note the social and economic class divides in terms of participation, ensuring we work with men from lower caste, class and social structures. Within this, ensure that IDP and host communities women and men are afforded the same / appropriate opportunities. In addition, give particularly attention to the roles of Muhamasheen women and men in these spaces.
- Increase the work with women's committees, women's organisations and women leaders. This analysis found that they have respect in the community but little decision making power. It would be important to harness these representatives / groups and understand how they can support women who have not been able to reach these positions and spaces.
- Find adaptive ways to ensure women can be actively involved in relief service provision, as well as in health, hygiene and sanitation, and protection projects. This was an area of change women expressed that they wanted to keep, but an area they also felt could be increased. Participation would need to be reviewed alongside workloads and daily schedules, as well as making arrangements for childcare. Links could be made with local partners (e.g. child protection actors who have child friendly spaces, or medical clinics with crèches) to identify how to link and support women's participation in these activities.
- The scope of this study, did not result in a deep understanding on the current status of peacebuilding initiatives, and particularly the accessibility and participation of different groups within the community. However, what the study did point to was that there was a desire for women and men to be involved in peacebuilding and conflict resolution initiatives in their community. CARE Yemen is implementing a project aimed at promoting inclusive peacebuilding processes, in line with the United Nations Security Council Resolution 1325, National Action Plan for Yemen. The aim will be for women to effectively participate in Peace Processes and influence decisions that affect their lives at local and sub-national levels. Within this, it will be important to ensure findings from this analysis are integrated to ensure the inclusion of youth, displaced women, marginalized groups such as the Muhamasheen. As well as other groups, where more in depth research is needed to identify their specific needs and priorities e.g. widows, female-headed households.

Education, mobilisation and communication

- Support awareness raising initiatives/programmes to increase women's awareness of their legal rights, particularly in relation to access to services, education and employment. Where possible, link with local partners or local authorities who specialise in this area. Due to access, security and mobility issues, develop innovative ways to ensure women and the most marginalised women are reached. At the same time, engage men on awareness raising on women's rights.
- Literacy and low levels of formal education were highlighted as key barriers for women with regards to participating in paid work, as well as participating in the community systems. Increase access and opportunity for women, in particular, to enrol on literacy classes.
- It was found that, there have been limited vocational training and education opportunities for women and men since the conflict. Focus on increasing access and opportunities to this and tailoring initiatives in a way that can be accessible for women and men with formal and non-formal education backgrounds, as well as those who are illiterate. In addition, while these had reduced since the conflict, there were opportunities across the districts. Therefore, it will be important to work with existing resources in the community and build on these to avoid replicating.
- Religious leaders and systems were highlighted as valued resources in the community. Ensure community-based initiatives harness the relationships communities have with these systems and individuals. This can be particularly important with regards to awareness raising and initiatives to promote social cohesion.
- A number of FGDs with men and women highlighted the need to raise awareness of child marriage and its negative impacts. Education around this should be integrated where possible into ongoing outreach and awareness-raising efforts. There were also some concerns noted around sexual harassment of children, and while this was not possible to delve into, in the scope of this study this will be an important area of follow up.
- Hygiene and health awareness raising initiatives were seen as a limitation and lacking in communities. Having increased access to hygiene and health and nutrition awareness was seen as a way to support communities cope with their current situation of food insecurity, low income and lack of access to health care.
- Awareness raising programmes with individuals, couple and communities to look at changing dynamics at the household and community level including attitudes about the roles and responsibilities of women and men. This would work to mitigate risks, particularly for women due to changing gender roles and relations.
- This report highlighted gaps in women and men knowing where to report concerns or seek help if they are a victim of violence. It will be important to look deeper at this at a local level. If there are no services/mechanisms in place where communities can report concerns or seek help, work with communities and other actors to increase service provision for GBV prevention and response. If there are services and mechanisms in place, increase information dissemination and outreach within communities to increase awareness of these services. At the same time, work with communities on GBV prevention initiatives including joint and individual male and female awareness sessions, as well as awareness in communities to destigmatise GBV reporting.

Access to safe, appropriate services

- Increase awareness of, and increase provision of initiatives that support women and men's psychosocial wellbeing. This could potentially link with health services, safe spaces and in collaboration with local partners. Psychological health concerns were identified throughout this study and efforts to support communities, could help to mitigate serious mental health problems and reduce longer-term impacts. Due to access and mobility issues, this could take the form of outreach teams, mobile teams and static spaces where women, men, and youth can access support.
- Identify areas with low service coverage for family planning and sexual and reproductive health services. Identify specific needs and gaps in service provision as well as access and information barriers and increase the level of services in the districts surveyed.
- Given women and girl's critical role in water management, and the lack of accessible, safe, water points across the areas in this study, efforts should be made to increase access to safe water. Water points should be in a safe and accessible places for women and girls and locations should be identified in consultation with women and girls.
- Lack of female staff was highlighted amongst respondents. Therefore, efforts should be made to recruit and train female health service providers and outreach workers within humanitarian organisations and their projects, as well as advocating within local health systems.
- Inability to access services was highlighted as a safety concern for both male and female respondents. It will be important to analyse this at a local level, mapping the available services, the gaps and the barriers for women, men, boys and girls to access services, as well as marginalized groups, to ensure we prevent or mitigate these safety concerns and barriers.
- Ensure that humanitarian assistance is reaching everyone in the community in an equitable and fair way. Focus on ensuring the needs of marginalized groups, larger families, single-headed households and less well-off families are considered, as well as considering women's freedom of movement and the restrictions noted in accessing humanitarian aid, when looking at design and plans for distribution or other humanitarian assistance programmes.

A focus on specific groups

- Specific attention should be given to men, women, boys, girls from marginalized groups and individuals who are currently living in collective centers. This analysis highlighted specific vulnerabilities that were increased for individuals due to their household type, particularly for individuals residing in collective centers, which included having less animals/livelihood assets, more safety and security concerns and lower access to education for boys and girls.
- In livelihoods, skills development and income generating initiatives, a focus should include specific skills required and expressed by elderly women, women from marginalised groups, the youth and single FHH including displaced women and widows who may also need specific arrangements to attend, access and participate in these opportunities.

Avenue for further research

This study was not able to look in depth at specific groups, other than those who identified as an ethnic minority (through the HH survey), the Muhamasheen (through qualitative tools), as well as speaking to Youth. The study was not able to focus on the lived experiences of men and women with disabilities. All data collected on disability in the study was asked to a representative of the household and not to individuals who identified as having a disability. Further, it used the term 'disability' rather than specific

types of ability and disability. Therefore, for follow up research it will be important to look more in-depth on the impact of men and women with disabilities, including the Washington Group Questions to better identify persons with disability in the community, as well as including qualitative tools to speak with persons with a disability.

In addition, this study was not able to focus on female headed or child headed household, widows, unaccompanied or separated children, orphans, and the specific needs, vulnerabilities and capacities they have. This would be important follow up analysis, whilst ensuring that methods used in follow-up analyses focus on collecting rich qualitative data from these groups and individuals. While there was some focus on youth, further research could include a more specific inter-generational analysis of the conflict and its impacts on the elderly and on youth.

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Annex 1: Breakdown of respondents

Households survey					
Gov.	District	Type	Female	Male	Total
Taiz	Ashmaytain	Rural	48	48	96
	AlQahira	Urban	50	48	98
Aden	Al-Boureiqa	Rural	48	48	96
	Sheikh Othman	Urban	48	48	96
Total			194	192	386

Key informants interviews			
Gov.	District	Type	KIs
Taiz	Ashmaytain	Rural	2
	AlQahira	Urban	5
Aden	Al-Boureiqa	Rural	4
	Sheikh Othman	Urban	2
Total			13

Individual stories			
Gov.	District	Type	Stories
Taiz	Ashmaytain	Rural	3
	AlQahira	Urban	3
Aden	Al-Boureiqa	Rural	1
	Sheikh Othman	Urban	1
Total			8

Focus group discussions											
			IDPs		Host community		Marginalized		Youth		Total
Gov.	District	Type	Female	male	female	male	female	male	female	male	
Taiz	Ashmaytain	Rural	1	1	1	1	1	1			6
	AlQahira	Urban	1	1	1	1			1	1	6
Aden	Al-Boureiqa	Rural	1	1	1	1	1	1			6
	Sheikh Othman	Urban	1	1	1	1			1	1	6
Total			4	4	4	4	2	2	2	2	24

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