

Strategy for IDP response in Yemen **Humanitarian Country Team, Yemen**

FINAL - Endorsed by the HCT: 30 March 2016

Background

The current conflict in Yemen has led to an increasing number of internally displaced persons (IDPs), most recently reported as 2,430,178.¹ The Humanitarian Country Team (HCT) in Yemen has agreed to develop its initial guidance on the emergency response for IDPs in Yemen² and agree on a strategic framework for its IDP response, within the broader humanitarian response,³ in order to achieve a consistent and needs-based approach to the IDP population throughout all phases of displacement (including, where relevant, return⁴ or protracted displacement). This framework should reflect that IDPs are a specific category of concern who may have specific needs or vulnerabilities.

Main objectives of the strategy

- Provide a framework for the coordinated humanitarian response for IDPs in Yemen, taking into consideration the specific needs and vulnerabilities of children and adults at all phases of internal displacement.
- Use experiences from the immediate emergency response to inform and further strengthen the ongoing response.
- Ensure the response is entrenched in humanitarian principles and maintains protection and human rights principles at its core.⁵

Causes and nature of displacement

Displacement within Yemen has been predominantly a result of internal conflict, political instability and, most recently, international conflict.⁶ Ongoing air strikes, anti-aircraft weapons, explosive remnants of war and armed clashes have resulted in civilian casualties, destruction of property, multiple displacement, insecurity and lack of certainty for the civilian population.⁷ With no formal comprehensive IDP registration currently possible, the monitoring of displacement and profiling of IDPs remains challenging, especially given obstacles to access for humanitarian actors regarding delivery of assistance to children and adults. The Task Force on Population Movement (a technical working group under the Protection Cluster and co-chaired by UNHCR and IOM) continues to map the movement of IDP populations, displacement trends and has started to collect more information in order to understand further the profile of IDPs across Yemen. In addition, assessments at cluster and inter-cluster level have provided initial information about the vulnerabilities of IDPs.

Protection challenges and coping strategies

With no formal camps for IDPs, displacement has led to dispersed IDP populations in urban and rural areas who are often difficult to identify or assess for vulnerability or specific needs. From the assessments conducted by the Protection Cluster and reflecting findings from other Clusters, challenges faced by IDPs include lack of safety, insecurity, separated families, limited freedom of movement, harassment, limited access to services (shelter, food, water, health, and education), physical disability, mental distress, child recruitment, high cost of living, gender-based violence, lack of livelihood opportunities and lost documentation. In addition, IDPs often have little information about the situation in their areas of origin or their area of displacement including how to access protection and humanitarian assistance.

¹ Protection Cluster Yemen, *Task Force on Population Movement, 7th Report*, February 2016

² Humanitarian Country Team, *Guidance Note on the Emergency Response to Internal Displacement in Yemen*, Yemen Humanitarian Country Team, July 2015

³ The broader response includes protection of civilians (such as conflict-affected communities), with IDPs one of the main groups of concern facing specific vulnerabilities.

⁴ There are currently an identified population of an estimated 421,164 returnees (Protection Cluster Yemen, *Task Force on Population Movement, 7th Report*, February 2016).

⁵ Including the Guiding Principles on Internal Displacement, available at [<http://www.unhcr.org/43ce1cff2.html>].

⁶ The latest trend of displacement is a result of the ongoing conflict involving the Saudi-led Coalition (which, supporting the government of Abd Rabbuh Mansour Hadi, began airstrikes on 26 March 2015); Houthi forces and forces loyal to former president Ali Abdullah Saleh (who, since January 2015, have been the de facto authorities in Yemen); and a number of armed groups with a variety of interests and degrees of control throughout Yemen.

⁷ As a result of the cyclones, named Chapala and Megh, an estimated 14,000 IDPs remain displaced, mostly in Hadramaut, Al Maharah, Shabwah and Al Jawf.

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Comprehensive data and analysis of the coping strategies of IDPs remains limited, mainly because of the challenges of humanitarian access throughout Yemen, lack of a coordinated approach to analyse information and the limited capacity of local actors. The majority of IDPs are residing in informal settlements with limited privacy; renting accommodation; finding shelter with family or friends; or in public buildings (often schools). Further information is also needed on how IDPs are making decisions on movement and how they negotiate access to land or shelter. Some IDPs have experienced multiple displacement, further reducing their coping strategies. Understanding how IDPs cope with displacement is essential to the substantive development of a holistic response framework with protection and humanitarian principles at its core. Currently, access to basic services for survival, safety and well-being (including food, water, health, education and provision of NFIs) depends on the area where IDPs are located and assistance may be provided once only and is not always provided based on needs.

Specific action plan at governorate level

With the various contexts throughout Yemen, including different power structures according to the relevant de facto authorities in each governorate and/or district, the situation faced by IDPs differs. Depending on a number of factors - such as the context faced by IDPs, the profile of IDP families present, the role of the authorities (such as the Executive Unit⁸ in areas where it has authority), the situation for other populations affected by conflict (including host communities), humanitarian access, the capacity of local actors or availability of services - **the nature of the response should be specific to that location.** Consequently, the humanitarian actors with presence in the relevant governorate, as delegated by the HCT⁹ and with the necessary level of technical expertise, should lead the development of a specific action plan for an IDP response (within a broader response, which includes host communities), based on a cross-cluster approach, at governorate (or, in certain circumstances, district) level. Having an action plan with a joined-up approach to needs assessed, vulnerabilities identified and the subsequent planned response, in addition to division of roles, responsibilities, expected outputs, outcomes and a timeline will facilitate a more consistent and strategic approach to the response and allow for monitoring of progress, adherence to humanitarian principles and ensure adaptation to changes in context. In addition, this more holistic response will support the efforts of the HCT to ensure that protection and advocacy efforts, as well as a gender equitable response are central components throughout the humanitarian response and plan the response as a humanitarian team and not in separate clusters. Selecting two or three pilot governorates to test this methodology will then lead to the development of standard documents, processes and plans to be used as a basis for other governorates.

Priority areas of intervention to be determined for each action plan

An appropriate response should be based on a firm grasp and analysis of the context and the needs identified for different groups within all populations affected (including IDPs, returnees and host communities). Although there have been assessments conducted (mostly by each cluster), information and analysis, particularly at a holistic level, remain broad with limited understanding of coping strategies and specific needs faced by female and male IDPs (as well as other affected populations) at household level. For each action plan, it will be important to gather all available information and involve participation from all stakeholders (including humanitarian actors, local authorities, IDPs, host communities) to determine the situation faced by IDPs, as well as the broader context of that area. This overall, cross-cluster analysis will then allow the humanitarian actors present to prioritise interventions, based on priority persons of concern and/or geographic areas, as well as focus on an integrated response. Further assessments, building on those already conducted (including the displacement tracking by the TFPM), which are needed to understand more about the context in that area should also be part of the action plan developed, in line with any assessment methodology¹⁰ agreed at national level.

⁸ The Executive Unit was initially established in 2009 as the government department leading on the provision of support to IDPs, with a lead role in the 2013 National Policy on IDPs in Yemen (*National Policy for Addressing Internal Displacement in Republic of Yemen*, July 2013, available at [<http://www.brookings.edu/about/projects/idp/laws-and-policies/>]). Since its establishment, a number of factors have altered the composition and capacity of the Executive Unit and the National Policy remains relevant but does not fully address the current situation faced by IDPs.

⁹ In accordance with the relevant Area Humanitarian Country Team's terms of reference.

¹⁰ For harmonised assessment tools and methodologies, support will be necessary from the Assessments and Monitoring Working Group and the Clusters.

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Protection and advocacy aspects of each action plan

In addition to protection mainstreaming, each plan should include specific protection outcomes, especially priority ones. These outcomes may be based on nationally-agreed points which are likely to include agreement on the definition of vulnerability (cross cluster, if possible or per cluster) criteria¹¹; how different types of beneficiaries and their specific vulnerabilities are identified and selected for different types of assistance; and how affected women and men will be consulted and participate in the response. Advocacy activities which are concrete and jointly agreed (with defined roles and responsibilities of relevant actors) should also be included in each plan and based on agreed national HCT messaging regarding IDPs. Activities at a local level are likely to include regular meetings with all parties in that area; key talking points and messages from humanitarian actors; joint efforts on analysing and responding to inequities; and joint efforts on raising issues related to identified gaps in assistance.

Context analysis

In order to have a comprehensive understanding (as much as possible) of the context in the relevant areas, using available assessment data and analyses, the points below should initially be considered by a humanitarian team, including relevant technical expertise.

- What are the factors leading to internal displacement? Are there any factors that could potentially lead to further displacement to or from that location? Are IDPs returning to their areas of origin and, if so, for what reasons?
- What groups are affected by the conflict and by the displacement?
- What is the role of the host community and the level of acceptance regarding IDPs?
- What are the particular vulnerabilities and challenges faced by IDP men and women in particular?
- How are IDPs coping (positively or negatively) with their situation? What are the different coping mechanisms for women, men, boys and girls?
- What is the access for humanitarian actors, including access to different groups within the population? What is their capacity to respond to the needs identified.
- Agree on division of responsibilities for assessments at the outset and on an ongoing basis.

Identification of IDPs as target populations

With no formal comprehensive IDP registration currently possible, identifying and profiling IDPs at household level continues to be difficult and so an alternative methodology should be agreed at national level and then used for each action plan. With the data from the TFPM being used a baseline, more in-depth assessments, preferably at household-level will be important to provide further understanding of vulnerabilities, needs and positive coping strategies. Two objectives for profiling are to (1) understand the needs of displaced women and men; and (2) be able to target IDPs as beneficiaries of humanitarian assistance.

- Agree on an overall methodology for how IDPs are selected as beneficiaries and standardise this process amongst humanitarian actors or, at least, harmonise across clusters.
- Ensure confidentiality of any data collected.
- As a minimum, collect core data – number of displaced persons (disaggregated by age and sex) and location.¹²
- As soon as possible (and include in the action plan, as relevant), collect additional information about the displaced population – cause(s) of displacement, patterns of displacement, disaggregated protection concerns, humanitarian needs, potential solutions for the group/individual if available.
- Take into consideration the challenges of identifying IDPs who are living within host communities and vulnerability of all affected populations.
- The methodology should contain an agreed verification process, such as cross-checking to avoid duplication, division of geographic areas amongst different actors, etc.
- Develop at national level (1) cross-cluster identification of vulnerable persons; and then (2) per-cluster criteria for selection of beneficiaries for cluster-specific assistance. Consider other affected populations when developing categories of special needs or vulnerability and any criteria.

¹¹ These should be based on criteria initially agreed at national level, cross-cluster and per cluster as relevant.

¹² This data is available from the TFPM.

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- At local level, involve IDP women and men and other affected populations when developing criteria in order to have a more participatory process and understand from them who is considered to be vulnerable and how IDPs are coping (positively or negatively).

Provision of humanitarian assistance

Based on the understanding of the context, identification of needs faced by IDPs and resources available, humanitarian assistance should be planned to meet as many of the identified needs as possible.

- What are the priority needs that require humanitarian assistance?
- What is the capacity of humanitarian actors to provide this assistance? Which funds are available to respond to specific situations (bilateral, HPF, CERF)?
- What measures will have to be taken to ensure humanitarian access to IDP population?
- Identify methodology of delivery of assistance and whether this varies for different groups (including selection of beneficiaries and post-distribution monitoring).
- Ensure there is monitoring and evaluation of humanitarian response activities to develop and improve response as relevant.
- Ensure accountability to affected populations by providing transparent information accessible to all gender and age groups, facilitating and acting on feedback and involving populations in deciding how best to deliver assistance.
- Ensure that the provision of assistance for IDPs does not endanger the relationship with host community or worsen community-level social cohesion.

Types of humanitarian assistance¹³

In each action plan, consider what assistance should and can be provided in the relevant area. Where resources are not sufficient, consider how to highlight gaps in service provision using evidence-based advocacy initiatives. Priority should be given to an integrated approach between clusters to maximise resources and reflect a joint understanding of the context. Set out below are some overall points for consideration.

- Shelter options – consider how male and female IDPs are coping with regards to shelter and how this may be supported (if not harmful). When determining possible shelter options, include the identification of the availability and capacity for complementary assistance (including WASH, access to services such as health, education, livelihoods).
- For collective shelters, settlements or other types of gathering, ensure involvement of women and men in management of their shelter and to mitigate dependency and adapting other techniques from camp management/coordination and collective centre management.
- For the use of cash and voucher assistance, as part of the cross-cluster approach,¹⁴ it will be essential to prepare a protection risk analysis, understand market forces, ensure that cash can be used for its intended purpose, consider whether supply of required service/item exists and how to mitigate any unintended consequences (from use of cash/vouchers as types of assistance or the methodology used to distribute cash/vouchers).
- Emergency food assistance – include this as an option.
- Child-centred case management – include with distinct cross-cluster approach to ensure that life-saving services and follow-up actions are systematically promoted and provided to identified individual children at risk and/or child survivors of violence (including GBV), grave violations to their lives, exploitation or dangers from explosive remnants of war etc. Child Protection Case Workers characteristically works with community-based structures on early identification and follow-up actions plus referral pathways with relevant actors.
- GBV priorities include GBV prevention, multi-sectorial response services and the strengthening of referral mechanisms and case management for GBV survivors.
- Protection – mapping of services for protection cases and referral pathways, including training to all relevant actors on what to do when protection cases identified.

¹³ The Inter-Cluster Coordination Mechanism is developing a minimum assistance package for IDPs, which is likely to be based on the type of shelter in which an IDP household is living.

¹⁴ These activities will be supported by the Cash and Markets Working Group.

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Coordination mechanism

Sub-national clusters have been difficult to set up and maintain given the challenging working environment in Yemen. Where they already exist, these should be supported and strengthened as possible. In addition, it will be important to consider alternative, pragmatic methods of coordinating understanding of the context and development of an appropriate response.¹⁵

- Consider presence and capacity of humanitarian actors in the relevant location.
- Ensure all humanitarian actors are involved, including UN agencies, INGOs, NNGOs, community-based organisations, government bodies.
- Agree on methodology to be used to coordinate assessments, collect data and prepare analysis at area level.
- Ensure attention to gender differences and equitable response throughout.
- Hold regular meetings on progress and development of response in that area, involving the relevant actors.
- Ensure HCT is kept updated about progress, any challenges and leads advocacy on a national level, as necessary.

Stages for developing action plan at governorate level

1. **HCT to agree** on humanitarian actors to lead preparation of action plan in each area.
2. Ensure availability of **relevant technical expertise** (including for cross-cutting issues such as protection and advocacy) is available for analysis of needs and development of plan.
3. **Context analysis:** (cross-cluster) conducted with humanitarian actors present in location and additional technical support if needed.
4. **Prioritise:** Agree on priority needs and interventions – thematically and geographically. Focus on which interventions can be integrated across clusters (e.g. health and education; shelter and WASH; or food security and protection).
5. **Identification of IDPs as target populations:** Identify vulnerability criteria cross-cluster (initially at national level).
6. **Types of humanitarian assistance:** based on analysis of needs, agree on types of assistance needed.
7. **Methodology for provision of humanitarian assistance:** based on context, capacity and resources, agree on how humanitarian assistance will be delivered.
8. **Develop action plan for response:** include roles and responsibilities, outcomes, outputs and activities. Ensure plan is in line with national standards, has an integrated approach and overall humanitarian and protection principles.
9. **Monitor implementation of action plan:** regularly monitor progress with frequent meetings of humanitarian agencies with presence in specific locations in the field. Develop and adapt plan as necessary using lessons learned, including gender analysis and in accordance with any change in context. HCT should oversee and be updated regularly on the progress of the action plan. Based on the results of the initial pilot action plans, consider how to develop minimum response package for IDPs and host communities to be used as guidance for development of action plans in other areas.
10. **Roll out throughout governorates:** based on experiences of pilot action plans, use tools developed and methods that have worked to roll out methodology in other areas.

¹⁵ The Area Humanitarian Country Teams may, depending on presence, play an important role in this coordination.