



Rapid Gender Analysis: Yemen

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Introduction

The conflict in Yemen is taking a heavy toll on civilians. The United Nations (UN) estimates that four out of five Yemenis are in need (21.1 million people). Approximately one million Yemenis have been displaced of whom 54% are women and 46% are men. According to UNHCR, 28,712 Yemenis have fled the country seeking refuge in the Horn of Africa and in the Gulf states. Insecurity is severely hampering the response: UNHCR reported that of the 250,000 refugees in need humanitarian assistance only 1063 had received aid by 14 July 2015. Many schools have been forced to close affecting an estimated 1.84 million children across 3684 schools. The most affected governorates include Sana'a, Taizz, Aden, Lahj, Sa'ada, Al Dhale'e as well as Sana'a City.

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. CARE's rapid gender analysis provides information about the different needs, capacities and coping strategies of women, men, boys and girls in Yemen by examining the relationships between women, men, boys and girls.

Due to the current security situation and limited humanitarian access within Yemen, this document is an initial analysis of gender relations. More gender assessment and gender analysis will be needed by CARE and other actors. Nevertheless, the initial gender recommendations provide a starting point for humanitarian programming to understand and meet the different needs of Yemeni women, men, boys and girls.

Methods

CARE's Rapid Gender Analysis is designed as an incremental process: as more information about gender relations during the currant crisis in Yemen becomes available, it will be analysed and included into the Rapid Gender Analysis.

A range of methods were used to analyse information. Primary and secondary quantitative and qualitative information from before and during the crisis have been analysed. Much of the initial information is taken from the CARE Program Situational Analysis undertaken in 2014. In-line with CARE Yemen's operational focus, this rapid gender analysis pays particular attention to Food Security and Water, Sanitation and Hygiene (WASH).

Gender Relations in Yemen

Since 2006, Yemen ranks as the lowest country in the world for gender equality; coming 142th of 142 countries in the Global Gender Gap report. Traditional Yemeni gender norms characterise women as 'weak' and needing to be 'protected'. Although women have considerable productive and reproductive roles and responsibilities, they have limited participation in society and a 'lower status then men'. II Men are the primary decision-makers both inside and outside of the household. Older



women, employed women, women living in urban areas, and those who have more education are more likely to make decisions for themselvesⁱⁱⁱ. The 2014 Global Gender Gap report highlighted that women are significantly less literate than men: 50% of women are literate, compared to 83% of men. Women earn significantly less than men \$1,751 YR compared to \$6,343 YR.

Women in Yemen face various forms of violence and discrimination including: 92% of Yemeni women believe that most violence against women and girls happens in the home^{iv}; most Yemeni women are child-brides married by the time they reach 18 years of age^v; 43% of women and girls and 21% of men and boys have never attended school^{vi}; and female genital mutilation affects slightly less than one-in—five Yemeni women^{vii}. Polygamy is relatively uncommon in Yemen: 6% of currently married women report having co-wives^{viii}.

Yemen's legal framework is complicated combination of *Shari'a*, the former socialist legal system, international principles, customary or tribal law 'urf al-qabili', sections of Egyptian and other Arab laws, and elements from Ottoman or Turkish traditions^{ix}. Women are subjected to a host of discriminatory laws. The 1994 Constitution of Yemen is unclear in terms of women's equality with contradictory articles. Many laws discriminate against women including: Personal Status Law (1992), Penal Code Law (1994), Nationality Law (1990) and Evidence Law (1996).

Yemen's diverse history, geography, politics and religious ideologies have been a source of on-going conflict through its history^x. Prior to this crisis, OCHA estimated that in 2014 80,000 people were displaced due to localised conflicts. Mainly in the North, an additional 335,000 Yemenis remain in protracted displacement. At the end of 2014, 215,000 IDPs had returned home, but were struggling to resume their daily lives due to the loss of livelihoods, damaged infrastructure, weak rule of law and contamination from unexploded ordnance (UXO).

Gender relations in Yemen vary from the North to the South, in urban and rural areas, amongst families, and following the customs of the different tribes. The North of Yemen has been traditionally more conservative than the South. One particularly vulnerable group in Yemen is the *Muhamasheen*. They are considered the lowest status group in Yemeni social hierarchy and *Muhamasheen* women are particularly marginalised. Hajjah Governorate has the second largest population of *Muhamasheen* (approximately 40,789)^{xi}. Other marginalized groups in Yemen include refugees, asylum seekers and migrants from Horn of Africa. Refugee women are considered some of the most vulnerable people in Yemen. ^{xii}

Gender Relations and Conflict in Yemen

There is limited information about the impacts of the current crisis on women, men, girls and boys. Initial interviews have been conducted by the OCHA GenCap Advisor that provide some evidence. In total 14 interviews were conducted with senior members of Community Service Organizations (CSO), staff of international non-government organizations (INGO) staff, a civil servant, and a medical doctor. Some of those interviewed believed that the crisis was having a significant impact on women:

"The woman is the person who has everything thrown on her head and absorbs all the shocks."



"Of course women's responsibilities have increased. Before the conflict, everything relied on the man, now all of a sudden the woman has to take care of everything – she is not used to this."

"Before the conflict, most responsibility – although not the workload - was described as being on the men. Not only do women now suddenly have to learn new tasks and skills, but also take on dealing with people outside the family, a role they are completely unprepared for."

While others interviewed suggested that the needs of women and men were largely the same:

"Currently men and women have the same needs, because the situation is affecting them both in the same way;"

These interviews by OCHA are reinforced by the Focus Group Discussions conducted in 2014 by CARE Yemen for the *Program Approach Situation Analysis*. Over three weeks, CARE carried out focus groups with 43 people (18 women and 25 men). This included a section of questions on the impact on conflict and crisis on women, men, boys and girls.

The respondents indicated that in situations of conflict Yemeni women experience significant restrictions on their mobility: xiv

"Women are affected the most because of the absence of security, their normal lives are interrupted and they may be forced to stay at home."

<u>Protection issues</u> come to the fore in times of conflict with both gender and generational impacts:

"There are more early marriages because of the crises."

"Conflicts outside the home affect the family income which leads to problems between husbands and wives."

The Focus Groups highlighted that <u>female-headed households</u>, who account for 7.8%^{xv} of families in Yemen, will have specific needs in times of insecurity which need to be identified and taken into account:

"When crises or shocks impact families the women are impacted differently because femaleheaded households are even less able to cope."

CARE's analysis shows how conflict was perceived to impact gender relations at the household level during previous periods of conflict in Yemen.

Emerging Gender and Policy Implications

During 2014, leadership by the Humanitarian Coordinator, the GENCAP advisor and engagement of the wider humanitarian community resulted in some impressive achievements on integrating gender into humanitarian efforts. The Humanitarian Country Team made five explicit HCT commitments to integrate gender. Yei Gender was also factored as 'Strategic Objective 5' with indicators into the Yemen Humanitarian Response Plan 2014/2015: "Ensure meaningful participation and equitable access to services, resources, and protection measures for women, girls, boys, and men", including 6 indicators. Other Strategic Objectives also included some gender sensitive indicators. According to a GENCAP debrief in March 2015, a Cluster Gender Focal Point Network had been established since



December 2014 and members of Health, Protection, Shelter and WASH clusters had received a first training on "Gender equality in humanitarian action." Benefits reportedly included:

- 83% of 2014 YHRP projects were rated 2a or 2b in the IASC Gender Marker
- 86% of the assessments conducted by cluster partners had female assessors, and have ensured the participation of females from the affected
- 92 % of clusters collected SADD for humanitarian activities

Commitments were made at that time to follow-up on these efforts with an evaluation in 2015. As the conflict situation has evolved, the IASC Emergency Directors Group convened to discuss the implications of Yemen becoming categorised an L3 crisis and identify 'L3 Benchmarks' to monitor the necessary scale-up in the response. One of the benchmarks is "Ensure the centrality of Protection and attention to the unique needs of women and men, boys and girls, throughout the response." In addition to the GENCAP advisor, a ProCap inter-agency Protection Advisor has been requested and a Protection working group is activated. A benchmark is also included calling for "participation of, and accountability to, affected people across all elements of the response, including through ensuring that feedback from affected men and women informs decision-making, including in the clusters, inter-cluster, and HCT." The plan highlights that while individual efforts are underway, these are not currently joined-up. There is a call for an AAP and Communication with Disaster Affected Communities (CDAC) adviser to be appointed to the HCT, and for Area Offices to be re-established with sustained presence, eventual sub-offices, in close proximity to affected people.

Gender and Food Security

Agriculture is crucial to Yemen's economy: in 2010 it employed more than half of the labour force and it contributed to 17.4% of the GDP. The Comprehensive Food Security Survey from 2014 showed that food insecurity was a serious problem in many parts of Yemen: 48.5% of people living Abyan, 53.5% of people living in Hajjah, 58.3% of people in Lahj and 35.2% of people in Amran were food insecure.

Food insecurity affects women and children in particular ways. In Yemen, food is prepared by women and girls who also have primary responsibility for collecting water and firewood, cleaning, and childcare xix. During times of crisis, CARE's focus group discussions in 2014 highlighted some of the issues related to cooking:

"Women can't cook for their families due to the petrol crisis. Women in Yemen are the most effected by the crisis because if there is no gas she is forced to cook with wood."

In addition to these roles, women provide 60% of the labour in crop cultivation, more than 90% in tending livestock while earning 30% less than men. However, the role of women in agriculture is not reflected in government statistics or decision-making. Some of the key challenges faced by women include: lack of land ownership; limited access to credit; agriculture extension and other relevant services not provided to rural women; and lack of support from the government on training and support to Women's Development offices and rural women extension agents. XXI

Almost half of all children in Yemen suffer from malnutrition 47% are stunted while 16% are wasted xxii. Slightly more boys are more affected by stunting than girls. A quarter of women and girls



aged between 15 and 49 years were malnourished, of whom 14.4% were severely malnourished. Malnutrition was attributed to a variety of causes including a lack of education amongst women, the poor nutritional status of women, and related problems due to the lack of key services such as health care and water and sanitation facilities.

It is important to note that female headed-households are amongst the most vulnerable to food insecurity: 45.1% of female-headed households in Yemen were severely food insecure, compared to 40.7% male-headed households. XXIV

When food is scarce in Yemen, a common coping mechanism is that women eat less, while still continuing heavy domestic workload. There are also obstacles when it comes to food distributions, for example lack of official papers makes it difficult to register women, boys and girls and a lack of mobility due to cultural and security restraints makes it difficult to access food distribution points. Access to markets is also a challenge for women as they are excluded from economic activities which are largely undertaken by men. This is often compounded in time of conflict as reported in CARE's focus group discussions on conflict in 2014.

"Some women are not even allowed to go to the market. Women have no right to go and work and the preference is for men."

According to a recent WFP update, fuel prices have increased seven-fold compared to pre-crisis period and more importantly, fuel is universally unavailable. In crisis-affected areas, the availability of food commodities is deteriorating. According to the MIRA, in Amran, Hajjah and Abyan – food security was the first priority of the respondents. In Hajjah and Abyan, malnutrition was highlighted as a key issue. Reported coping strategies included decreased food consumption which is a strategy that is likely to affect women first.

Recommendations for CARE's Food Security Programming:

- Determine most appropriate cash modality for each beneficiary group.
 - Women have primary responsibility for fetching water, participate in the agricultural activities and have heavy domestic workloads. How would Cash For Work (CFW) fit into their current workload or would be a burden? Suggest identifying work opportunities for home-based women.
 - Unconditional cash grants Female headed households and other vulnerable people may not be able to participate in CFW activities. Therefore, where appropriate, unconditional grants should be provided to the most vulnerable.
 - Whether it's CFW, vouchers, and/or unconditional grants, consider the time implications for accessing aid.
 - For conditional cash grants, suggest consulting men and women to understand what conditions will be appropriate and useful, given the cultural context
- Mobility for women and girls is likely to be restricted-
 - Use CARE's mobility analysis tool to look how has the current crisis impacted women's mobility and access to markets?
- Income Generate Activities:
 - Based on needs assessments and market analysis, work with the Cluster to examine what potential opportunities may exist to support income generating opportunities

¹WFP; Yemen Market Price Update, http://reliefweb.int/sites/reliefweb.int/files/resources/wfp274919.pdf, 2015

for IDP women and host communities. For example, could provide inputs to support home-based work and training that IDP women can use when they return home.

Gender and WASH

Yemen is one of the most water-scarce countries in the world. Pre-crisis, the majority (59%) of people accessed water from an improved source of water varie. However those who have to walk to collect water travelled long distances (30 minutes or longer) to do so varie. Nine-out-of-ten households in Yemen did not treat their water and only 5.5% used an appropriate method to treat water varie. Less than half of households use improved toilets that are not shared with other households; 25 percent of households have no toilet at all varie. There are large differences in sanitation methods between urban and rural areas.

Since the crisis, the UN has reported that the lack of fuel and electricity has caused a breakdown in basic WASH services. The breakdown and lack of access to safe rural water supply has the biggest impact of women and girls as they are largely responsible for fetching water and are often forced to travel long distances to find water. Moreover, women play a critical role in promoting health behaviours at the household level, including hygiene practices such as hand washing and proper waste disposal, prepare food and manage water collection, storage and treatment. XXXXII

The MIRA assessment conducted in April 2015 provided some key information on gender and WASH. In Abyan, among the 46 individuals interviewed, 50% of them mentioned that WASH is considered as a severe situation (urgent intervention required). In Abyan, 94% respondents agree in all locations that there is a serious problem in the community because of a lack of clean water for drinking, cooking or personal hygiene. In addition, respondents in Abyan agreed that lack of clean toilets and hygiene was a serious concern. The top WASH priorities in Abyan include provision of water; hygiene materials including soap; water containers; water filters; and water tanks. In Hajjah, 104 respondents identified water as a serious problem. In Hajjah, the main constraints were identified: 53% mentioned that water was too expensive; 45% replied that water trucks were no longer serving the area due to the crisis and 44% mentioned 'long distances to safe water'.

Recommendations for CARE's WASH Programming:

- CARE Yemen has experience integrating gender into their programming, continue to:
 - Consult with women and girls on their needs in order to ensure that sufficient privacy and protection is offered for ensure that water distribution points are in safe and open areas located near settlements.
 - Specifically consult women and girls when designing the contents of the hygiene kits and align with the Protection/SGBV sub-cluster best practices (click here).
 - Hygiene Promotion Teams need to have both male and female staff.
- Support women's critical role in water management:
 - Women should be trained on how to use household water treatments materials;
 - Separate male and female WASH Village Committees should be supported and/or set up. Otherwise, women's views on critical water management decisions will not be incorporated into key community-level decisions.
 - o Consult with women and girls regarding appropriate locations for water points.
- Hygiene promotion should target men, women, boys and girls separately. Suggest exploring a particular focus on adolescent girls.



 When rehabilitating community latrines, ensure separate latrines for men and women, ensure that they are well lit, hand-washing stations are available, and they are screened to ensure privacy and security.

Overall Recommendations

Pre-crisis, CARE Yemen has experience in integrating gender into their programming, they plan to build on some of these best practices to ensure that humanitarian programming understands and meets the needs of women, men, boys and girls.

- Targeting through local partners and community members is crucial to ensure that women and girls are consulted and have access to assistance:
 - Ensure that field outreach teams include men and women who are trained on gender sensitive programming;
 - Ensure involvement of women in the community committees and/or set up separate women's committees. Ensure that the women committees are able to meaningful participate and contribute to community level decision-making for the definition of vulnerability criteria, selection of beneficiaries and interventions.
 - Ensure Feedback mechanisms are in place to examine how best to reflect women's voices with existing accountability mechanisms and within gender-sensitive postdistribution monitoring.
- **Distribution**: Ensure distribution plans incorporated women's views on how to deal with lack of official papers, mobility, safety/risks, and capacity to move relief items back home. Ensure that the distribution team is gender balanced. Ensure that the distribution point is accessible to all and there are separate distribution lines for women. Depending on the type of distribution, suggest doing separate distributions on the same day targeting men and women separately. If distribution points are not appropriate, suggest undertaking house-to-house distribution to access the most vulnerable.
- **Partners:** Ensure that there is capacity assessment questions related to gender when assessing new partners and that they have the capacity to implement gender sensitive programming. Make training on gender available to staff and partners.
- Further Rapid Gender Analysis is needed: This is a partial and incomplete gender analysis. CARE Yemen has completed an assessment in Hajjah and Amran and is in the process of analysing this information which needs to feed into the second draft of this Rapid Gender Analysis. Consider a rapid gender analysis by governorate level.
- Share with Humanitarian Community:
 - Suggest sharing the final RGA with the humanitarian community, especially the GenCAP advisor to help inform programming and analysis.
 - Work with GenCap to pilot the gender monitoring tool.

OCHA; Yemen Humanitarian Response Plan- Revised, < http://reliefweb.int/report/yemen/yemen-humanitarian-response-plan-2015-revision-june-2015, 2015.

[&]quot;Manea, Elham; Yemen, https://freedomhouse.org/sites/default/files/inline images/Yemen.pdf; 2010

iii Yemen Demographic and Health Survey 2013

 $^{^{\}mathrm{iv}}$ Ibid

v Ibid

vi Ibid

vii Ibid

viii Ibid

* OCHA; Humanitarian Needs Overview http://reliefweb.int/report/yemen/2015-yemen-humanitarian-needs-overview; 2015.

xi Colburn, 2014

xii UNDP; Country Assessment Violence Against Women – Yemen

xiii OCHA, Gender Equality in Yemen Conflict 2015 (interviews); 2015.

xiv Marta Colburn 2014

xv Yemen Demographic and Health Survey 2013

xvi The HCT commitments were as follows:

- All documents approved by the HCT (policies, interagency programs, etc.) integrate gender and age dimensions and have been reviewed by a senior gender adviser.
- Gender inequality and the status of women and girls, as well as men and boys, are considered throughout the HPC strategic documents (HNO, YHRP, Monitoring and Evaluation).
- All advocacy events and advocacy documents integrate gender and age dimensions, making visible the special needs of each population group.
- All Cluster Lead Agencies take concrete steps with cluster leaders and IMU teams in order to ensure sex- and age-disaggregated data is collected, reported and published in information products.
- All HCT agency members ensure that at least 30% of their staff has completed the IASC "gender in humanitarian action" free on-line training (certificates are provided when the training is finalized).

xvii http://www.humanitarianresponse.info/operations/yemen/gender-mainstreaming-humanitarian-action-yemen%20

xviii Colburn, 2014.

xix IFPRI, Assessing Food Security in Yemen

http://www.ifpri.org/sites/default/files/publications/ifpridp00982.pdf, 2010.

xx IFAD; Factsheet Yemen http://www.ifad.org/operations/projects/regions/pn/factsheets/ye.pdf; 2011.

xxi Republic of Yemen; Agriculture Strategy 2012 -2016;

http://www.ye.undp.org/content/dam/yemen/PovRed/Docs/Yemen National%20Agriculture%20Sector%20St rategy%202012-2016%20En.pdf; 2012

xxii Yemen <u>Demographic and Health Survey 2013</u>

xxiii WFP; Comprehensive Food Security Survey, Yemen,

http://home.wfp.org/stellent/groups/public/documents/ena/wfp269771.pdf, 2014

xxvOCHA, Gender considerations in the Humanitarian Response in Yemen; 2014

xxvi Yemen Demographic and Health Survey 2013

xxvii Ibid

xxviii Ibid

xxix Ibid

xxx OCHA; Yemen Flash Appeal

http://reliefweb.int/sites/reliefweb.int/files/resources/Yemen Flash%20Appeal.pdf; 2015

xxxi WFP; YEMEN: Secondary Data Analysis on Food Security and Vulnerability

http://home.wfp.org/stellent/groups/public/documents/ena/wfp207839.pdf ;2013.

xxxii USAID; Gender Assessment Yemen, http://pdf.usaid.gov/pdf docs/pa00jnrk.pdf; 2015



ix Colburn, 2014