The sample below illustrates the final product. If you wish to see the original Word document with edits in tracked changes, please email <u>alice@crealitygroup.org</u>.

# Gender dynamic analysis in Yemen

# About the report

Eight years of conflict have left millions of people in Yemen suffering from the compounded effects of armed violence, the current economic crisis, and disrupted public services. These have affected the lives of large segments of the population, particularly women and girls, marginalised groups, and other economically and socially vulnerable members of society. There have been changes in the social dynamics within Yemeni communities as a result, including gender roles within individual households and at the community level. In 2023, 21 million people are estimated to need humanitarian assistance and protection (OCHA 20/12/2022).

Yemen ranked last in the World Economic Forum Global Gender Gap Report from 2006–2021. In 2021, Yemen ranked among the five countries that had the worst standing in terms of women's economic participation, political empowerment, and educational attainment. It also ranked third to the last out of 170 countries in the 2021/22 Global Women, Peace and Security index (GIWPS 22/10/2021; WEF 13/07/2022).

There are deep-rooted sociocultural and economic inequalities at home and in wider communities. Conflict affects men, women, boys, and girls differently. Men and boys make up the vast majority of direct victims of armed conflict, recruitment, and arbitrary detention. On the other hand, women and girls are left to bear the burden of running their households and become at risk of gender-based violence (GBV).

Responding adequately and appropriately to these needs and providing platforms for resilience require proper planning of the type and scale of specific interventions, which in turn involves the collection of sound data and contextual information.

The analysis in this report examines and provides information about gender dynamics and access to services in the household level. It aims to assist humanitarian decision-making in improving gender-mainstreaming in the humanitarian response in Yemen, specifically in the health, education, and protection sectors.

### Methodology and limitations

This report was drafted in a highly participatory way and in collaboration with the Gender network in Yemen. It was created in line with the best practices outlined in the IASC's Gender Handbook for Humanitarian Action and their Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action, as well as other guidance documents from different humanitarian responders. Sectors were selected based on consultations with key humanitarian responders, which revealed the sectors most relevant for gender analysis at this point in the response. The analysis mostly followed the Moser Framework, which is a gender-planning framework and tool for gender analysis in development planning created in the 1980s (EIGE 10/12/2018).

[...]

#### 1.1. Gender dynamics in Yemen

Diverse religious, cultural, social, and political traditions across the regions, between rural and urban areas, and between different tribes and generations shape gender relations in Yemen. Even prior to the conflict that started in 2015, Yemeni women and girls were already experiencing systematic discrimination and marginalisation. They cannot marry without the permission of their male guardian, nor do they have equal rights to divorce, inheritance, or child custody. The lack of legal protection also leaves them exposed to domestic and sexual violence (Oxfam 30/01/2017).

The Government of Yemen has approved the women's development and women's health and development strategies and ratified important global instruments, such as the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child, which set the minimum age of marriage to 18 (UN 01/07/2008). Despite these pre-crisis commitments, however, the country ranked the lowest in the World Economic Forum Global Gender Gap Report from 2006–2021. In 2022, it ranked 155th out of 156 countries (WEF 13/07/2022).

There had been progress in gender equality in several areas, including education, political participation, and health. For example, prior to the conflict, there were steady improvements for women and girls in education and in the political participation of women. Nearly a quarter of National Dialogue Conference representatives were women. Certain egalitarian policies had also been approved; besides the minimum age of marriage being set at 18, there was also a 30% quota for women in public life – but these agreements have since fallen through, with women finding themselves sidelined from decision-making (IRC 29/01/2020).

GBV is a serious problem and includes sexual harassment, early marriages, female genital mutilation, the denial of inheritance, and mobility restrictions (ALNAP 30/03/2017). For example, 32% of Yemeni girls marry before turning 18 (UNICEF 28/02/2022). These practices have intensified and worsened since the war started in 2015. There has been a 50% increase in GBV in the form of physical assault, 35% increase in sexual abuse cases, 25% increase in psychological abuse cases, 17% increase in the denial of resources, and 11% increase in child marriages (Oxfam 09/2020).

Although men also face security risks, they are in a better position to defend themselves by carrying a weapon or using public or private means of transport. That said, men also have unique vulnerabilities, including exposure to forced recruitment and arbitrary detention by armed forces and to death and injury as a result.

#### 1.2. Gender roles within the household

Cultural, religious, political, and social factors shape gender dynamics in Yemeni society, and these cannot be assumed to be homogeneous. Social roles can differ from governorate to governorate, from rural to urban areas, and from one group to another, including the household.

Traditionally, women are responsible for reproduction and are considered the primary caregiver at the household level. Women bear the primary responsibility of cooking, cleaning, and collecting water and firewood for their homes. They are tasked with taking care of the children, the elderly, the sick, and people with disabilities. Women also provide 90% of the labour in crop cultivation in rural areas but earn 30% less than men. On the other hand, men are tasked to provide for the family (WB 30/03/2022; CARE 10/2016; KII 29/12/2022; KII 30/12/2022).

The current conflict, economic decline, and a lack of livelihood opportunities have led to a certain shift in these gender roles. Women's contribution differs considerably between households, but there are signs that women in Yemen have expanded their presence in economic activities, hence her role within the household, during the war (SCSS 15/12/2019).

Men have either joined the front lines, lost their sources of income, or are not receiving regular salary payment. As a result, the men who remain idle and are unable to find paid employment are increasingly playing a role in the home. In contrast, women have become increasingly involved in both paid and subsistence labour. In general, women who work bear a double burden, as they have to earn an income while being in charge of household tasks, including cooking, cleaning, and childcare (USAID 30/01/2020; KII 29/12/2022).

According to reviewed literature, the limited ability of men to earn an income and their 'idleness' often result in domestic conflict and violence. Reports indicate that there is increased conflict between husband and wife because of the enhanced roles of female household members in earning an income and managing the household, while men often see themselves being forced to take on women's roles in homemaking, including collecting water, cooking, and childcare. Forms of violence enacted by men at the household level often include the verbal abuse of women and physical abuse of children (CARE 10/2016; USAID 30/01/2020; Oxfam 09/2020).

Conversations with key informants indicated that the shift in gender roles and increased responsibilities of women in the community could be temporary and are not certain. This echoed research published in 2020, which looked at previous examples in Yemen. In the 1970s, when the Yemeni male labour force was brought abroad, women were left to perform most of the agricultural labour, even those traditionally done by men. Women also made decisions about budgeting the remittances from their husbands. That said, upon the men's return to Yemen, such changes in gender roles did not endure.

[...]

### Section 2: gender needs and dynamics in specific sectors

Access to services like healthcare, basic education, and food is a struggle across the country. Gender dynamics also play a role on which women, girls, men, and boys access these services. There's a growing need to address these dynamics with a gender-specific lens to ensure a better response programme design and increase people's equal access to services.

#### 2.1 Healthcare

Since the war started in 2015, access to the healthcare system has been disrupted, with over 20 million people needing healthcare services (OCHA 20/12/2022). According to the Health Resources and Services Availability Monitoring System, 49% of health facilities in Yemen are either nonfunctional or partially functional. Even fully functional ones struggle to provide health services because of staff shortages, inadequate supplies and equipment, the inability to meet operational costs, and power outages resulting from the countrywide lack of fuel.

Maternal mortality rates in Yemen are high. It is estimated that one woman dies in childbirth every two hours. Over 5.5 million women of reproductive age and over 1.5 million pregnant and

breastfeeding women are projected to experience acute malnutrition. Acute malnutrition puts newborns at risk of severe stunted growth, and nursing malnourished infants as a result of rising food insecurity (OCHA 20/12/2022).

The crisis has affected women and men in different ways. Women are the primary caretakers and are responsible over health and hygiene in the household. A family member falling ill affects women the most, as they are in charge of caregiving at home. At the same time, women's access to information in rural areas about the practices that support good health is limited and often channelled through female friends and family members. On the other hand, men are more mobile and have access to a range of information sources, including mosques, markets, and community gatherings. Access to information about health is important.

[...]

#### 2.2 Education

[...]

- There is a lack of separate girls' schools and female teachers in the rural areas. Finding
  female teachers with adequate training and experience is a challenge. In urban
  areas/cities such as Sana'a and Aden, this is not seen as a problem. Because of a lack
  of funds, school toilets are not gender-sensitive or accommodating of girls' menstrual
  hygiene needs (IRC 29/01/2020).
- The decision to enrol girls in school is usually made by the father, or the brother if the father is absent or away. The mother or grandmother tries to influence the men if they refuse to enrol the girls in school. The general practice is for girls to get married and leave for their husband's house, whereas boys are generally expected to end up running a family and as a result need education to generate an income. Sometimes, boys drop out of school to support their family by working in agriculture, with livestock, or in shops and restaurants (KII 22/12/2022; KII 28/12/2022; KII 28/01/2020).

### 2.3 Food security

Yemen is among the countries with the highest number of people facing Crisis (IPC Phase 3) or worse food insecurity levels. Conflict and deteriorating economic conditions are the main drivers of displacement, reduced agricultural production, accelerated inflation and currency depreciation, and worsened food insecurity and access to services (OCHA 20/12/2022).

For many households, fish, meat, and chicken are luxury foods. Key informants reported that people purchased essential items only, and these generally comprised rice, sugar, and vegetable oil. They were no longer able to purchase things previously considered necessities, such as cheese, milk, eggs, and cleaning detergents.

As a result, households are resorting to different coping stratgies to meet their basic needs. These range from relying on the support of different social networks, such as neighbours and family members, taking on credits, and limiting food consumption and eating less nutritious food (USAID 30/01/2020).

According to the findings of ACAPS' recent coping strategies report, many households prioritise children and people with critical health conditions over other household members in the allocation of food. Some households reported begging for food from restaurants. Women and children are typically the ones who beg, as it is considered culturally shameful for men to do so. Sending women and children to beg could expose them to verbal abuse and harassment (ACAPS 22/05/2022).

According to key informants and available literature, girls who get married at an early age are less knowledgeable about correct breastfeeding practices. As a result, their children are more likely to be malnourished (IRC 29/01/2020).

#### 2.4 Protection

Prolonged conflict, displacement, and a lack of livelihood opportunities put men, women, boys and girls, particularly IDPs, at risk of increased economic and social vulnerabilities. Different gender and age groups are exposed to different protect risks.

Men and boys are more likely to be killed or injured. They can be at risk of humiliation and denigration or arbitrary detention from armed groups. This leads to an increasing number of women-headed households. On the other hand, women and girls might be exposed to street harassment, rape, or early marriage. Early marriage is a complex phenomenon in Yemen that is culturally seen to protect girls from sexual harassment and abuse and often relates to building alliances and networks. Girls from displaced households face increased security concerns and are more vulnerable to early marriage (IRC 29/01/2020; SCSS 10/03/2021).

The requirement for women to be accompanied by a Mahram is not a part of Yemeni law, and authorities have not made any formal changes to legislation or related policies, but the DFA is increasingly enforcing it through verbal directives (Amnesty 01/09/2022).

The requirement bans women from travelling without a male guardian or without evidence of their written approval across governorates under DFA control or to other areas of Yemen. These restrictions affect women's participation in different aspects of life, such as politics, the social sphere, and for career opportunities and progression. This is more acutely felt by women-headed households, as it restricts the mobility of the women who are also the main breadwinners of their families (ACAPS 22/11/2022).

Comprehensive data about GBV is rare in Yemen because of the sensitivity of and taboos about discussing the topic. That said, conversations with key informants and reviewed literature indicated a general increase in GBV incidents in Yemen. These include acts of domestic violence, the raping of girls and boys, child marriage, and the harassment of women and girls in public spheres (SCSS 15/12/2019).