

Field Unit (FU) Sana'a

June 2020

UNHCR FO Sana'a covers a vast area of six governorates: Sana'a, Amarat Al Asimah, Amran, Marib, Al Baydah and Dhamar.

The area is characterised by a high number of persons displaced by the conflict (9 million) in search of affordable housing, relative safety and livelihood opportunities.

In particular, Amanat Al Asimah is the top Governorate of destination (0.43 million) and return (0.19 million) of internally displaced families, according to the YHNO 2019.

KEY INDICATORS

1,723,284

Number of internally displaced persons in areas under FO Sana'a DTM March 2019

279,613

Number of returnees in areas under FO Sana'a DTM March 2019

280,000

Number of IDPs under FO Sana'a who received service, cash or in-kind support UNHCR June 2020

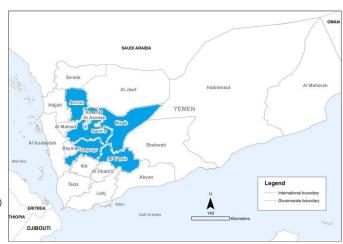


Malak (8) and her brother Muntasir (3) sit near the basic household items her family received in Dhamar city, Dhamar governorate. UNHCR/ Arwa Al Sabri.

UNHCR PRESENCE

Staff:

- 11 National Staff
- 1 International Staff
- 4 National partners
 - Sustainable Development Foundation (SDF)
 - Yemen Red Crescent Society (YRCS)
 - Yemeni General Union of Sociologists, Social Workers, Psychologists (YGUSSWP)
 - Building Foundation for Development (BFD)



The area of operation, as covered by Field Office Sa'ana

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The Sana'a Hub and the tri-clusters (Protection, Shelter and CCCM Cluster) led by UNHCR UNHCR with other cluster partners under the inter-agency framework is responsible for coordinating all protection services, installation of shelter, distribution of basic household items and coordination and management of IDP hosting sites, ensuring that the humanitarian assistance reaches the needlest families in a coordinated and effective manner.

Main activities



REFUGEES

Some half of the refugees and asylum-seeker population of Yemen live around the Sana'a area. Refugees' protection needs are regularly monitored so as to provide appropriate services, such as legal and psychosocial care, primary health care and tailored support for the disabled, children and survivors of physical and psychological violences. Through cash, basic households items and hygiene kits distributions, UNHCR assist refugees to address their rent and basic needs.

INTERNALLY DISPLACED PERSONS

■ FU Sana'a with its partners and its Community Based Protection Network, identifies families in need who can be referred to three community centres for IDPs in Amanat Al Asimah, Amran and Dhamar city where they can acess legal and psychosocial counselling, and specialised services for children and survivors of physical and psychological violences, or in emergency cases, cash. Up to June 2020, more than 280,000 individuals benefited from these services.



- The areas under the FU Sana'a until the end of 2019 were relatively peaceful, attracting a high number of IDPs with its low livelihoods opportunities in the agricultural sector. However, since January 2020 new frontlines opened in Marib governorate, displacing close to 9,000 families alone in the first six months in addition to the 71,400 families previously displaced there.
- UNHCR continued to distribute emergency basic household items (mattresses, kitchen sets and solar lamps) and shelter kits to families forced to flee, assisting some 7,000 families.

The Community development projects

Sana'a FU installed a total of 23 Refugee Housing Units in 14 locations in Amran, Sana'a, Dhamer and Amanat Al Asimah governorates, to increase the capacity of local facilities such as classrooms, waiting areas in local hospitals and community centres, benefiting thousands of displaced and host communities alike.

Cash support

CBI is the most apricated form of assistance by the IDPs, given its positive impact in providing instant relief to the displaced families. Cash also helps improving their protection and resilience by minimising negative coping mechanisms such as begging, child labour and dropping out of school. It also contributes to the local economy, and thus strengthens opportunities for social cohesion between displaced and host communities. Until June 2020, some 4,250 IDP families were given cash support which they primarily used for food, rent, medicine and other essential services at their own discretion.

Camp Coordination & Camp Management (CCCM)

 Out of the 136 IDP hosting sites (40,000 IDPs) in the area of FU Sana'a, only 44 sites are monitored regularly for protection issues and receiving consistent water trucking, food distribution, and other basic services, due to lack of funds, access constraints and numbers of active partners in the field.

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The limited CCCM capacity means that the IDPs living in these sites are particularly vulnerable towards protection concerns, hygeiene issues and prevention of communicable diseases such as COVID-19.

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COVID-19 response

- Prior to COVID-19 reaching Yemen in April 2020, UNHCR actively raised awareness of IDP communities on prevention and precautionary measures as recommended by WHO and the MOPH. A total of 20,000 leaflets were distributed through door-to-door and small-group gatherings while observing COVID-19 Protocols.
- UNHCR activated 24/7 hotlines to respond to IDPs' concerns and refer them to specialised service providers.
- Hygiene kits consisting of soap and detergents were distributed along with awareness-raising material to 2,345 families. UNHCR also set up hand-washing stations at distribution points, community centres and in bank where families received their cash. During the distribution of emergency shelter and basic need items, door-to-door deliveries, physical distancing and hand-washing stations were set up, as per guidance from the Shelter Cluster.
- Personal protective equipment (PPE) was provided to partners so that they could continue to undertake face-to-face activities in a safe manner.
- A community-based action plan to address risks related to COVID-19 and ways to address
 potential cases was rolled out in 11 IDP sites identified as most at risk of infection due to their
 unsanitary and overcrowded conditions.



Challenges and Gaps

- A volatile security situation coupled with logistical challenges.
- Lack of acess to remote locations.
- The wide geographical coverage and high number of people in need in comparison to the resources available.

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