ENHANCING INFORMED ENGAGEMENT WITH CONFLICT AFFECTED COMMUNITIES IN YEMEN
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GLOSSARY

AAP Accountability to Affected Populations
CAAP Inter-Agency Standing Committee Accountability of Affected Populations Commitments
CE-WG Community Engagement Working Group
CHS Core Humanitarian Standard on Quality and Accountability
CMS Common Service Mechanism
FGD Focus Group Discussion
HC Humanitarian Coordinator
HCT Humanitarian Country Team
HH Household
IASC Inter-agency Standing Committee
ICCM Inter-Cluster Coordination Mechanism
IDP Internally Displaced Person
IHL International Humanitarian Law
INGO International Non-Government Organization
KII Key informant interview
NGO Non-Government Organization
PSEA Prevention of sexual exploitation and abuse
PwD Person with Disability
SIDA Swedish International Development Cooperation Agency
UN United Nations
YHRP Yemen Humanitarian Response Plan

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INTRODUCTION

Engaging with communities is an intrinsic element of a humanitarian response. However, the degree to which the engagement takes place in the spectrum between acknowledging their presence as recipient of assistance and tangibly making them an integral part of the programme cycle is an ongoing challenge that humanitarian agencies face in each crisis.

Programmatic priorities and the necessity to deliver humanitarian assistance are also factors that influence the level at which agencies engage with communities and priority assigned to it. These challenges surface particularly in emergencies with high and often evolving needs. In many contexts actors overlook, step over or race through community engagement efforts in order to rapidly respond to the needs of the affected population, organizational priorities and donor requirements; often times presupposing that community engagement unconsciously occurs while the humanitarian activities are undertaken or rationalize it as an overburdening task that takes to much time if it is to be effectively carried out. These factors and thought processes have a risk of detrimentally affecting community engagement and the overall positive impact of humanitarian assistance. They can also impact negatively on community acceptance, humanitarian access, the effectiveness and efficiency of the response, the duration and cost of the response, and most importantly they render the response less accountable to the communities.

The factors that affect community engagement are core elements of a humanitarian response and not mutually exclusive from community engagement. Programmatic priorities, responding to needs, accountability to donors and affected populations, an effective response and engagement with communities are all complementary in nature. The difficulty lays in ensuring their complementarity rather than prioritizing one over the other. This understanding has led the humanitarian community to develop and commit to system wide standards [e.g. Core Humanitarian Standard on Quality and Accountability (CHS) and the Inter-Agency Standing Committee Commitments on Accountability to Affected Populations (CAAP) among others] that incorporate essential elements of community engagement aimed specifically at ensuring an accountable humanitarian response that is people-centred.

In an effort to contribute to the work currently undertaken by the Community Engagement Working Group (CE-WG) in Yemen towards “Systematically including participation of, and accountability to, affected people across all elements of the response” (IASC Yemen L3 Benchmark 10.1) and incorporating the recommendations from the “Analysis of Humanitarian Capacity to Improve System-wide Accountability” report publish by OCHA in November 2015, this paper will build on Oxfam’s Study on Understanding Affected Communities to provide recommendations for the humanitarian community in Yemen on how to better incorporate community engagement as per our commitments to them under the CAAP and CHS.

BACKGROUND AND OBJECTIVES

The rapid escalation of conflict in March 2015 across Yemen, and the protracted armed conflict and humanitarian crisis that ensued to date, has made Yemen suffer the largest number of newly displaced people\(^1\), the country with the highest number of people in need of humanitarian assistance – a staggering 82% of its population\(^2\) – and a crumbling infrastructure. The sheer extent of the crisis required an expeditious response to a population on the move that was seeking safety across governorates and settling within host communities, abandoned or public buildings and open spaces.

Humanitarian responses have not been new to Yemen and agencies have been present for decades in this fragile context by working very closely with the affected communities, especially in camps and areas surrounding them. However, the military targeting of established camps and the aerial, navel and ground nature of the fighting, led many to move away from areas previously

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targeted for humanitarian assistance. This has required humanitarian actors to re-engage with a much larger number of affected people, that includes newly displaced and different actors within affected host communities. Moreover, humanitarian organisations are now working in areas with active conflict with governmental services on the verge of collapse and infrastructure damaged, destroyed, or barely functioning.

Engagement with the affected communities has been reviewed and initiated within this new operational space and has required novel methods appropriate to the multitude of new stakeholders. Moreover, information on how best to engage with communities and engage in two-way dialogue has not been available and could only be inferred from previous studies and lesson learned.

As a result of this information gap, Oxfam in Yemen, in collaboration with the CE-WG, incorporated community-engagement within its Study on Understanding Affected Communities, including indicators to capture how humanitarian agencies can better engage with communities and how they have been undertaking such an exercise in an extremely complex environment with limited access to affected populations.

This paper seeks to provide key findings from Oxfam’s study on communication to and from affected communities, perception of the assistance by the affected population and other elements of community engagement surfacing from the HH questionnaires, Focus Group Discussions (FGDs), and Key Informant Interviews (KII). The aim is to provide the national and international humanitarian community evidence-based information coupled with recommendations to better consolidate and incorporate community engagement in the Yemen humanitarian response. More specifically, the paper seeks to:

(1) Understand the successes and gaps of humanitarian agencies in their capacity to ensure an inclusive people-centred approach humanitarian response;

(2) Highlight opportunities for the humanitarian community to improve upon its approaches to community engagement in accordance with international standards such as the CHS, and CAAP;

(3) Understand the channels of communication that are most used and trusted by the affected population in the current context of active conflict and displacement and provide recommendations for a more informed approach to community engagement;

(4) Highlight opportunities for a systematic and coordinated approach to monitoring community engagement cross-sectorally, and to share widely and use the results to influence humanitarian programming;

(5) Highlight the relevance and necessity of efforts in community engagement within an active conflict context, especially when services and infrastructure have been severely impacted.

**RESEARCH METHODOLOGY**

Oxfam’s Study on Understanding Affected Communities aimed to capture the dynamics between IDP and Host communities. To ensure generalizability of the results, the study included several methods and covered a total 416 Households (HH) in the Governorates of Aden, Amran, Hajjah and Taizz. Among them, 58% are IDPs, 42% host with 48% of respondents living in urban areas and 52% in rural areas. The Governorates represent among the most affected governorates with the highest levels of humanitarian needs, displacement and prevalence of IDPs and IDP returnees.

Thirty-seven FGDs were conducted covering various categories of affected populations [i.e. Host, Internally Displaced Persons (IDPs), Elders, Person with Disability (PwD) and Youth] disaggregated based on sex, as well as 36 Key Informant Interviews (KII), out of which 17 were with female representatives and 19 with male. The study purposely aimed at understanding the dynamics between IDP and Host communities and as such enumerators and research leads were instructed to interview a 60:40 ratio of IDP to Host in their selection of HH.

The selection of districts and villages for the study followed the same rationale of the Governorates, to which consideration on Oxfam’s community acceptance, access and security were also included. Contingent to the evolving security situation, research team were also instructed to change the selected district or village if security or other factors prevented access to the identified village or district. Random selection of HHs was done at the village level, where the interval rate was chosen in relations to the IDP to Host population with respect to the 60:40 ratio. Where such information was not available, the interval rate was every 20th HH.

The combination of these research methodologies ascribes an illustrative representation of the trends across the most affected governorates. The methodology ensured collected data was appropriate for analysis, trends, and broad representation for programmatic
purposes. The coverage of HHs level interviews also ensures the data has 95% confidence interval with a 5% margin of error at national level, and 95% confidence interval with a 10% margin of error at governorate level. Accordingly, the data collected does not provide a representation of the entire country, rather it should be considered indicative of the norm across it.

Limitations
This study was conducted in March and April 2016, 11-months into the escalation of conflict, and therefore reflects community perspectives at this time and results should be considered within this time frame and context. As the crisis continues and context evolves, perceptions, acceptance, preferences and needs from and for communities may change.

KEY FINDINGS
Community Involvement in Humanitarian Response
Engaging with affected communities is challenging task, and having to undertake it a conflict zone that witnesses widespread violations of International Humanitarian Law (IHL) and significant barriers to access is exponentially more arduous. Within such a complex environment, 54% of the affected population feel included in the way humanitarian agencies are providing assistance. This number rises to 66% for people living in areas where humanitarian assistance is being provided.

Despite this positive percentage, it remains insufficient to address the high level of needs across the country. The data indicate a correlation between community engagement and their perceived improvement of humanitarian assistance, efficacy of it to address basic needs, and community-based protection.

This means that the more communities are involved in the humanitarian response, the more agencies will be capable to effectively and efficiently address the needs of affected populations and enhance community-based protection mechanisms. Such efforts must be prioritised further with funding limitations, as this will necessitate heightened efficiency and efficacy of assistance while also ensuring community-based protection mechanisms are not negatively affected.

Ninety-three-per cent (93%) of the affected population living in areas where humanitarian agencies are operating considered humanitarian staff and volunteers to be respectful in how they engage. This is extremely important in providing a sense of dignity and integrity to the affected population in a situation of extreme vulnerability. Among IDPs the positive respondents reduced slightly to 91% and among Host they increased to 95%.

Sixty-per cent (60%) of the affected population deemed their community able to influence the modality3 and typology4 of humanitarian assistance. Among IDPs the percentage was slightly higher at 62% and among Host slightly lower at 57%.

Complaints and Feedback
Although the majority of community members indicated that they felt involved and able to influenced humanitarian response, only 15% know how to provide a feedback or to lodge a complaint to humanitarian agencies – the percentage is very similar between IDP and Host – and only 11% have ever provided feedback – 13% amongst IDPs and 9% amongst Host.

Amid the small percentage of people who did provide a feedback or a complaint, 40% felt their opinion or concern was taken into account. This percentage dropped amongst IDPs as 71% of them reported feeling their feedback was not taken into account. These numbers are alarmingly low and highlight a risk of limited (or no) reporting of harassment or abuse towards the affected population and foster a response devoid of it.

Trusted and Preferred Communication Channels
Cell phone calling (59%) and word of mouth (56%) are the most used channels of communication by the affected population. Community volunteers (32%), radio (25%) and WhatsApp (24%) were also reported as frequently used. WhatsApp is used by 26% of IDP population. Television is also commonly used but less than the above listed channels. TV and radio are most widely used during the early morning and evening times. The use of these communication channels closely relates with the level of trust people bestow upon them. However, both

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3 Modality refers to the way humanitarian assistance is provided to the people in need (e.g. cash transfer, in-kind, voucher).

4 Typology refers to the kind assistance provided to the people in need (e.g. tents, rental subsidy, transportation cost, direct in-kind food assistance, medical subsidy).
television and TV, even if widely used, are considered less trustworthy due to the perceived politicized nature of the information. Notice boards are the least used mode of communication both for IDPs and Host.

Overall, word of mouth (54%) and cell phones calling (52%) remain the most trusted sources of information. However, amongst IDPs cell phone calling is the most trusted and word of mouth is the most trusted among Host community members. FDGs showed that received information is from friends, relatives, community leaders or knowledgeable members of the community [e.g. the religious leaders]. Community volunteers are considered the third most trustworthy source of information (36%) and radio the fourth (23%). All the above listed three modes of communication are both highly utilised and trusted. The interesting increase between use and trust is observed for humanitarian staff members. Humanitarian staff members are used by 12% of the affected populations while they are considered a trusted source of information by 23%. This difference not only showcases the perceived neutrality of humanitarian agencies but also provides a renewed space for humanitarian actors to engage with the affected population and be the interlocutor between the provision of humanitarian assistance and knowledge that the affected population have of its modus operandi. This is corroborated also with the preference of the affected population to provide feedback and complaints through community volunteers (65%), cell-phone calls (60%) and humanitarian staff members (51%). Eighteen-per cent also indicated preferring to receive information through WhatsApp. Radio, at just 5%, was the least preferred mode of communication to receive information by both IDP and Host communities. Community leaders and Sheikhs, while highly ranked in terms of use and trust by affected communities, were not preferred intermediaries of the humanitarian community to relay information to the affected population and vice versa.

While ensuring two-way dialogue, these preferences and trust vested on the listed modalities suggests a combination of methodologies must be used to engage the affected population. They can be, but are not limited to:

(1) Build the capacity of volunteers to refer feedback and complaints to humanitarian agencies. This will also require strong mechanisms in place to ensure the information flow between volunteers and the appropriate departments in humanitarian agencies;

(2) Agency-based and possibly a common hotline that is toll-free\(^5\). However, they need to be embedded in the wider engagement ecosystem, linking to inter-sectoral coordination, especially in terms of maximizing the scope and inclusivity of the services;

(3) Availability by humanitarian agencies to collect information through the use of complaint boxes;

(4) Ensure Monitoring Evaluation Accountability and Learning (MEAL) teams are composed of both female and male staff that have the necessary data gathering skills and tools to collect, report and revert verbal complaints made to them directly (e.g. during distribution points or field visits).

**Community Information Needs**

The low awareness of complaint and feedback mechanisms is also reflected in the extent at which the affected population possesses and understands information required to access humanitarian assistance. Only 36% said they had the required information, while 64% said they were not cognizant of it – 65% amongst IDPs and 63% amongst Host. The lack of awareness by the affected communities on both these elements showcases a lack of effective information dissemination by humanitarian actors to the affected population. In a crisis, access to information ensures the capacity of the population to have the knowledge tools to avail of the assistance, and enhances community and self-based protection. It also has the potential to make a difference for those who are in dire need and support in countering errors of exclusion or irregular inclusion. The more knowledge the affected population have of the humanitarian response the more empowered they are to prioritize their own needs and support transparent and accountable humanitarian action.

The importance of the affected population to better understand the humanitarian response is echoed within the category of “information they most require”. The main type of information requested was where populations could access humanitarian assistance (72%), followed by the eligibility criteria (46%). Access to livelihood opportunities, access to food assistance and how to provide complaints and feedback were followed at 42%, 32% and 32% respectively. Access to food assistance

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\(^5\) Such as the UNHCR/AMIDEAST humanitarian call center known as Tawasool, which as of August 2016 is not functional as it was asked to be closed by authorities in spring 2016
was particularly relevant for IDPs (37%) in comparison with Host community members (25%). This data further supports existing analysis showcasing the dire need of food assistance across the country, the collapse of the economy, high rates of unemployment and eroding purchasing power.

**Perception of humanitarian assistance**

Fifty-nine-per cent (59%) of the affected population that received humanitarian assistance believed it was not being provided in a fair way. This percentage was particularly high in in Taizz, Aden and Hajjah, where 76%, 59% and 44% of the affected population reported they felt the assistance was not fairly provided. Conversely, in Amran 91% felt the assistance was provided in a fair way.

Overall, the majority of the respondents believed the assistance was being provided in an orderly way, and when asked if over time the assistance was improving, the majority answered positively. However, a major concern remains the gap between the assistance people receive and their needs. Two out of every three respondents stated that the amount of humanitarian assistance is not sufficient to cover their basic needs.

A little over half of the respondents (52%) felt that humanitarian assistance was reaching the most vulnerable populations. This is laudable achievement within the operational context. However, more efforts will be required in targeting, geographical coverage and more importantly in community-led definition of vulnerability. Such endeavours will combine local knowledge, needs and understanding with the international standards of humanitarian response, and support the humanitarian response to be more impartial and reach to the most vulnerable populations.

Elders, people with mental disability, illiterate and the marginalized communities are considered to be the categories of population that have most difficulty in accessing information. As efforts to further reach vulnerable populations and address their needs continue throughout the Yemen response, particular attention must be given in how agencies can disseminate pertinent and suitable information to reach these categories of population.

**Safety through Community Engagement**

Presence of the humanitarian community within the affected population and the engagement with communities remains essential not only for an accountable and effective response, but also to ensure the safety and protection of the population and increase humanitarian access through better community acceptance. A staggering 84% of the affected population reported that the presence of humanitarian agencies has increased their perceived safety. This number increases to 85% amongst IDPs and reaches 82% amongst Host community members.

According to the study, the ability of a community to influence the provision of humanitarian assistance is the strongest and most significant predictor of perceived safety amongst IDPs – much more than ‘fulfilling basic needs’, having ‘access to assistance’ or ‘community cohesion’. That is, the more community is involved, whether IDP or Host, the more IDPs report to feel safe. Further, the other significant factor that predicts IDP’s perception of increase or decrease in safety is communication with NGO/UN staff in the field. The more NGO/UN staff are involved in communicating with the IDPs, the greater is the perception of safety by the IDPs.

Factors that most affect perception of safety for Host community members are slightly different. The strongest predictor is the protection provided by the surrounding community. Another significant predictor is the Host community’s involvement with the way humanitarian assistance is provided.

**RECCOMENDATIONS**

Building on the findings of this paper and the Yemen humanitarian response to improve its accountability to affected populations within the 2016 Yemen Humanitarian Response Plan (YHRP), the CE-WG proposes the following recommendations to be adopted by the HC, HCT, ICCM, the various clusters and humanitarian agencies:

1. **Augment and improve the level and quality of CE across the Yemen response** as it improves the efficacy of humanitarian assistance to address basic needs and enhances community-based protection. Such efforts must be further prioritised if funding constrains increase across the Yemen response. Humanitarian agencies can achieve this by:

   a. Better informing the affected population of the channels available to provide feedback and complaints, engage with the humanitarian community, and increase accountability by disseminating information on
humanitarian activities and targeting criteria to access it;

b. Capacity building, and where opportune increasing the number of volunteers – trusted by communities as their liaison with the humanitarian agency – in areas where they have interventions.

2. Increase access to and utilise the most preferred modalities of communication to enhance and improve two-way dialogue with affected communities, including a combination of these to ensure better reach. These modes are mobile phone calling, community volunteers, humanitarian staff members and word of mouth. Specific efforts must also be made to ensure information reaches elders, people with mental disability, illiterate or people belonging to marginalized groups.

3. Increase – and provide support to existing – capacity within the humanitarian sector to improve system-wide accountability by refining, contextualising and sharing community engagement tools, including monitoring, evaluation and learning from CE approaches. Lessons learned from past emergencies and Oxfam’s Study highlight the need for systematic and collective engagement with affected communities to ensure a well-informed, appropriate and accountable humanitarian response. However, there remains little systematic collection of evidence to assess the challenges, gaps and successes in how agencies are engaging with communities and how the communities themselves perceive the engagement. Moreover, there is limited organizational and cluster capacity for technical support in this field. To achieve community engagement objectives as per the YHRP in relation to the CAAP and CHS, the Yemen humanitarian response will require to:

a. Support and fund the Common Service Mechanism, the CE-WG and dedicated staff for this platform to regularly collect, analyse, publish findings and provide technical support to inform decision-making forums to take relevant actions at programme and operational level, across sectors and by all actors. Such efforts will facilitate the space and relevance community engagement requires to be integrated within the Yemen response as per the YHRP;

b. Systematically collect evidence to assess the challenges, gaps and successes in how agencies are engaging with communities and regularly report on how community engagement tools and support provided by the CE-WG informs their response;

c. Improve information sharing and coordination on information gathered by agencies through feedback and complains mechanism. Given the limited access that humanitarian agencies have across Yemen, there needs to the de-silo agency captured information on relevant indicators gathered through feedback and complaint mechanisms and collate it into a CSM to systematically capture system-wide level information;

d. Incorporate the Micro-Survey developed by the CE-WG into monitoring, evaluation and learning tools or other assessment tools. Collated information, analysis and recommendation will subsequently inform the humanitarian response at a system wide level.

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