





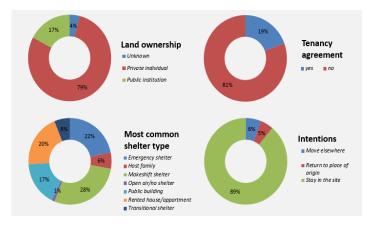
UNHCR through partners provided an emergency shelter to a family who lost their home during the heavy rains and floods in one of the IDP hosting sites in Amran. The site is regularly visited by protection, WASH, food and health partners. © UNHCR

Site management in Yemen

Close to one million IDPs are currently living in more than 1,600 IDP hosting sites in deplorable conditions. Camp Coordination and Camp Management (site management in Yemen) Cluster led by UNHCR have access to 660 sites lived by 525,000 IDPs, and UNHCR as the Cluster Lead supervises 353 sites hosing 270,000 IDPs.

IDP hosting sites range from relatively organized structures where basic services are available, to buildings used as

temporary living accommodations, such as health facilities, schools and so on (referred to as collective centres). However, most sites in Yemen are spontaneous settlements where displaced individuals set up temporary shelters on private land.



In 2020, 800,000 IDPs living in sites and

surroundings will have their living conditions improved

through CCCM activities

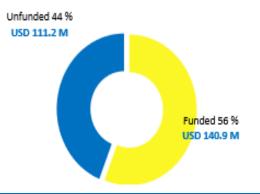
Recent data covering 606,000 individuals in 658 IDP hosting sites revealed that most (86%) live on private land, 12% in public buildings and 2% on land or in property of unknown ownership. A majority (87%) live in property without any tenancy agreement, and **one out of three sites in Yemen faces eviction threats**. As a response, the tri-Cluster (Protection, Shelter and CCCM) developed a specific technical guidance to track and address

Landowners' and eviction threats include:

- physical and verbal threats including use of armed groups to threaten/evict IDPs
- intimidation and harassment to IDPs and humanitarian staff
- destruction of IDPs' and humanitarian partners' property
- restrictions on humanitarian access to IDP sites
- blockage of critical shelter, WASH and health
- infrastructure development
 forcing the displaced to live in sub-standard
- conditions despite available resources Associated risks include:
- Loss of personal property due to eviction
- Relocation of IDPs to unsafe areas (UXO, landmines) induced involuntary and premature returns

FUNDING (AS OF 1 SEPTEMBER 2020)

USD 252.1 M* required for the Yemen operation, including the additional response for COVID-19.





evictions in consultation with IDPs, hosting communities and local authorities.

While alternative site locations are explored to host evicted IDPs, the availability of suitable land remains limited. Local authorities have limited capacity and power to provide public land for settlement or influence the financial motivations of private landowners.

Particularly this year, extreme weather of heavy rain and flooding affected more than 62,500 families since the beginning of 2020, including thousands of families in IDP hosting sites. The overflow or collapse of dams in Marib and Amran governorates also damaged nearby IDP assets. Cluster's partners relocated families in immediate danger, conducted rapid impact assessments and coordinated the delivery of services, such as distribution of shelter and basic household items kits, protection and health services, and provision of food.

HOW DO WE ASSIST?

The CCCM activities includes:

Strengthen safe, equal, quality and coordinated access of IDPs and those living in surrounding communities to multi-sectorial services (protection, food, WASH, health, education, livelihoods).

E Improve living conditions through site care and maintenance, and upgrade of services. IDPs directly participate through cash-for-work schemes in the local production of shelters, repairs of communal facilities such as latrines, class-rooms, water tanks and pipes, and drainage in the IDP sites.

Strengthen individual and community resilience through active participation to decisions that affect their lives and two-way communication that promote social cohesion between IDPs and the nearby impoverished hosting communities. Considering potential COVID-19 outbreaks in these sites, community committees have been trained to be among the first key responders by referring in a safe and humane manner suspected cases to the Rapid Response Teams and if need be, isolate patients. Disinfection and cleaning items as well as awareness-raising material on physical distancing and handwashing were distributed.

WORKING WITH PARTNERS







EXTERNAL / DONORS RELATIONS

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