



Protection through Health –Lessons Learnt, Good Practices and Way Forward

Context (Risks & Challenges)

- After nine years of war, Yemen continues to face one of the world’s worst humanitarian crises.
- Over 20 million Yemenis, including IDPs, refugees and migrants, require some form of health and protection assistance, according to the 2023 Humanitarian Response Plan.
- The conflict in the country coupled with displacement and worsening economic conditions, has heightened the need for protection and health interventions in the country. The ongoing armed conflict is now the third leading cause of death, following ischemic heart disease. In children aged 5 to 14, injuries account for 60 percent of deaths, while in adults aged 18 to 64, injuries account for 36 percent of deaths, according to the 2023 Yemen Humanitarian Needs Overview (HNO).
- The ongoing conflict has resulted in the destruction of much of the health infrastructure. Around 51% of the remaining functional facilities lack the necessary equipment and resources to provide basic services to vulnerable populations, exacerbating the already dire situation for those in need of healthcare.
- Protection risks are immense, as the conflict has resulted in widespread humanitarian law and human rights law violations, including the targeting of civilians, forced displacement, deaths and injuries as a result of the conflict, increased rates of child marriage, the recruitment of child soldiers. Attacks on health facilities and personnel, and the direct targeting (killing and injury) of people on the move across the country continues to be reported.
- In 2022, the Surveillance System for Attacks on Health Care (SSA), led by WHO, documented 12 attacks in 10 Yemeni governorates, resulting in the deaths of five healthcare personnel and patients, 10 injuries, and damage to five ambulances. The ongoing conflict in Yemen continues to threaten the economic and social rights of all Yemenis, including the right to health, education, food, housing, and livelihoods. At-risk populations, such as women, girls, people with disabilities, the marginalized Muhamasheen community, the displaced, and migrants, are particularly vulnerable to discrimination and challenges in accessing quality services.
- Child marriage is a prevalent issue in Yemen, affecting girls' access to education, health, and social status. It also poses a risk to maternal health since young girls who marry early are more likely to experience childbirth complications. Recent analyses suggest more women and girls in the

displaced population are resorting to child marriage as a coping mechanism. Child marriage perpetuates poverty and gender inequality and hinders women's empowerment in Yemen. Addressing the root causes of child marriage is crucial in improving the lives of Yemeni girls and women.

- Humanitarian actors, including those working in protection and health, face significant access constraints due to bureaucratic and administrative impediments. These obstacles make it challenging to deliver much-needed assistance to those in need. The lack of genuine and predictable facilitation from the respective authorities, whether in areas controlled by the Houthis de facto authorities or the Government of Yemen, compounds the problem further.
- The impact of conflict and displacement has resulted in overlapping health and protection risks, including social determinants such as food insecurity, shelter, discrimination, and violence. These factors have a detrimental impact on the protective environment for affected populations in Yemen. The UNHCR-led Protection Cluster, the WHO-led Health Cluster, and local and international NGOs have all played crucial roles in addressing the health and protection needs of Yemenis by providing critical assistance. With the possibility of a transition to a more sustainable peace, there is an opportunity for health and protection actors to collaborate more effectively and achieve better outcomes for those in need.

Lessons Learnt, Good Practices and Way Forward

The Protection Cluster, led by UNHCR, and the Health Cluster, led by WHO, share common objectives and priorities. These include advocating for adherence to International Humanitarian Law and Human Rights Law, ensuring equal and equitable access to critical health and protection services for affected populations, including mental and psychosocial support services, providing medical and rehabilitation services to those injured by conflict and survivors of landmines, and providing targeted services to survivors of gender-based violence.

In Yemen, health actors are responsible for ensuring safe access to health services and promoting meaningful beneficiary participation. To achieve this, protection is being mainstreamed into health programming to maximize positive impacts on safety and dignity. This includes promoting accountability and participation, and the health and protection clusters work together closely to develop initiatives such as trainings and health tip-sheets. The collaboration between these clusters is crucial in implementing health programs that protect beneficiaries' rights and well-being and support their rebuilding and development.

Integrated programming that supports protection and health interventions and result in collective outcomes for people in need of humanitarian services and sustainable solutions is currently underway in Yemen. This approach entails integrating protection risk analysis with health analysis to enhance understanding of the risks and barriers faced by different segments of the affected population, facilitates the delivery of critical protection and health services using an area-based approach and maximizes impact of our humanitarian interventions. The fruits of this collaboration have come into play in the 1st quarter of 2023, where both protection and health are closely working together to select areas informed by protection risk analysis for delivering critical and health services at the community-level.

The MHPSS Technical Working Group is another example of integrated response efforts in Yemen. The group is comprised of the Health, Education, and Protection clusters and aims to provide comprehensive mental health support to around 8 million people in need, given the harsh living conditions in the country. Over 90 percent of the population requires some form of MHPSS support. The MHPSS Technical Working Group collaborates with partners, coordination bodies, and local authorities to ensure that MHPSS is integrated into the humanitarian response. The group's four main priorities are: providing community-based MHPSS services, building partner capacity with a focus on frontline workers and first responders, mapping MHPSS services, and establishing referral pathways.

An integrated approach recognizes that investing in health can help prevent and mitigate a range of protection risks, (including violence, exploitation, and displacement), and vice versa. Protection is fundamental to a quality health response and a quality health response contributes to the achievement of protection outcomes. To operationalize the centrality of commitments made by the Humanitarian Country Team and in line with the HCT Protection Strategy for Yemen, increased collaboration on analysis, joint targeting and programming using an area-based approach is seen as a strategic and operational way forward in addressing the protection and health needs of the affected population, including the most vulnerable, particularly in an environment where funding is expected to be reduced at a time when needs remain high and where the international-led system is under increasing pressure from both authorities in the country.

There is a pressing need to shift towards a nexus approach in health and protection interventions, given the changing context, and to prioritize localization of the response, with protection as the guiding principle for both humanitarian and development interventions which must begin in earnest.