Guidance on COVID-19 preparedness

Protection Cluster – Yemen

This document aims at providing guidance to protection actors in Yemen to contribute to the preparedness efforts in facing COVID-19.

The Protection Cluster highly recommends to all its partners to rely on WHO\(^1\) guidance on how to prepare, mitigate and respond to any potential outbreak in Yemen. For reliable information, partners can download information here\(^2\).

**Why this is a relevant topic for protection actors in Yemen?**

Yemen has just entered its sixth year of armed conflict that, which had a great toll on civilians and civilian infrastructure. The conflict has further weakened an already fragile national and local institutional capacity to mitigate and respond to similar outbreaks. Despite the fact that Yemen is a low risk country for COVID-19 outbreaks,\(^3\) it is important to invest in preparedness efforts in line with protection principles and relying on the outreach of protection actors.

Protection activities are generally community-based and involve engaging different groups in the communities. While reaching out to the most vulnerable or groups at risk of exclusion should remain the priority of protection actors in Yemen, the Protection Cluster acknowledges that essential precautionary measures, and preparedness plans and policies of authorities and other relevant parties will have certain implications on reach, timeliness and capacities to respond.

While protection mainstreaming principles must be applied at all times, this guidance note is providing more specific information mainly to protection partners and other sectors as relevant.

**What key principles and rights must be respected during the preparedness and response to COVID-19 in Yemen?**

- **Do No Harm**

It is essential to uphold our responsibility as protection actors to avoid causing any harm to right-holders with whom we work. The Protection Cluster encourages all partners to adopt the following to mitigate the risk of COVID-19:

i. Ensure that community centres, women/girls safe spaces and child friendly spaces have functioning water and sanitation facilities, clean water, soap, hand sanitizers (or similar) and information materials on COVID-19 prevention. Centers and spaces should be cleaned on daily basis and surfaces disinfected several times a day, and staff should be made aware of the necessary hygienic practices as instructed by WHO\(^4\).

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2. [https://drive.google.com/drive/folders/1UYGConPJEfhxmlUDez18JY5Ze3UionY](https://drive.google.com/drive/folders/1UYGConPJEfhxmlUDez18JY5Ze3UionY)
3. WHO - Yemen
4. At the time of developing this guidance note, all community centres are encouraged to remain open and provide assistance until further guidance is communicated by the cluster.
ii. Avoid big gatherings, campaigns, meetings and awareness sessions. Where relevant and/or possible, substitute in-person meetings with technology-based options.

iii. Practice the social distance of 1 meter in private consultations and case management.

iv. Staff who implement protection activities in health facilities must be aware of the COVID-19 protocol for those facilities and must request support from specialized health actors for more information on preventive measures.

v. Partners are encouraged to replace unnecessary protection assessments, FGDs and community consultations with other means of data gathering and verifications such as observations checklists, Key informant interviews, secondary data revision, phone calls, etc.

vi. Field/mobile teams whose job is to identify vulnerable individuals and refer them to service providers must adopt additional preventive measures to protect themselves and the people affected.

vii. Partners who work with community-based structures (focal points, CBPNs, community committees, etc.) have the responsibility to disseminate relevant information on preparedness, mitigation and response among them. It is important also to revisit the terms of reference of those structures to reflect key information mentioned in this document.

Please refer to IASC interim guidance for COVID-19 preparedness in camps and camps-like settings for further support in working in IDPs sites in Yemen.

- **Non-discrimination**

Everyone in Yemen has the right to be treated with respect and dignity, and to enjoy meaningful access to services including healthcare. At times of pandemics, many groups are at risk of becoming victims of stigmatization, which could increase their vulnerability to be excluded from basic services.

Protection partners must promote the principle of non-discrimination in all situations and must be advocates for the right of everyone to access unhindered services.

Where relevant, protection partners with protection monitoring expertise must monitor practices and coping mechanisms contributing to exclusion and discrimination, and seek support from protection cluster and its areas of responsibilities.

- **Right to information**

Everyone has the right to information. Protection partners must make sure that vulnerable groups in Yemen are able to access information on COVID-19. While protection actors do not necessarily implement public health related programs, they still have the responsibility to flag the importance of access to information to those who implement such programs.

**Elderly, people with disability, marginalized communities, migrants, refugees, asylum seekers, detainees, IDPs (particularly those hosted in sites with poor WASH services), IDPs in transit, and**

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5 Areas of high displacement rate and areas witnessing active conflict are exception as protection information must be collected in timely manner to inform the response.

civilians in highly populated remote areas might be at higher risk, and thus additional efforts must be in place to disseminate information among them (using the relevant language).

Additional efforts must be also in place to make sure that information is disseminated to children using child-friendly language.

Culturally sensitive methods and channels should be adopted to avoid excluding women from awareness initiatives.

Due to the fact that protection staff might be trusted in the communities where they work, many people might approach them seeking information on the pandemic, it is critical that protection staff and community-based structures and volunteers share only reliable information (from sources mentioned above) or refer them to reliable and relevant channels.

In cases of quarantine, the people will have the right to know their entitlements. It is critical that protection actors who have access to quarantine facilities to provide information on these entitlements and to liaise with the protection cluster for additional support as relevant to the situation.