Yemen WASH Needs Tracking System (WANTS)

Wadrah District, Hajjah Governorate

October 2022

The Yemen Water, Sanitation and Hygiene (WASH) Cluster launched the WASH Needs Tracking System (WANTS) with the support of REACH to provide high quality WASH data and inform more effective WASH programming and planning. The WANTS comprises a set of harmonized monitoring tools which, through partner data collection, provide updated information and analysis on WASH access and needs throughout Yemen.

The cholera key informant (KI) interview tool is a communitylevel WANTS tool used in cholera priority districts¹. The findings below are based on fourteen (n=14) cholera key informant (KI) interviews conducted across 9 communities in Wadrah district, Hajjah governorate. The type of assessed localities were rural areas. KIs are reporting WASH needs of their own communities. Data was collected by RMENA for Human Relief & Development in October 2022. These findings should be interpreted as indicative of the WASH needs in Wadrah district.

Hajjah Amran Wadrah Al Hodeidah **Assessed District** Surrounding Districts Yemen Governorate 40 Km

Demographics²

Total population in district	20,493
Total internally displaced people (IDP) in district	2,834
Proportion of the population living with disaility	15%



Water

1/14 KIs reported that people in their community mainly relied on an improved water source³ for drinking water in the 30 days prior to data collection.

12/14 KIs reported issues related to taste, appearance or smell of water in the 30 days prior to data collection.

Proportion of KIs reporting water access problems in the 30 days prior to data collection:4

Waterpoints are too far	13/14
Fetching water is a dangerous activity	11/14
Storage containers are too expensive	7/14
Water is too expensive	6/14
People don't like the taste/quality of the water	4/14
Some groups (children, women, elderly, ethnic minorities, IDPs, etc.) do not have access to the water points	3/14
Waterpoints are difficult to reach (especially for people with disabilities)	1/14

11/14 KIs reported that few people in their community treated their drinking water in the 30 days prior to data collection, while 2/14 KIs reported no one had, and 1/14 KIs reported most had.

Participating partner:





Health

2020 Cholera Severity Score⁵ Global Acute Malnutrition (GAM) prevalence rate⁶ 12%



🦆 Hygiene

7/14 KIs reported that few people in the community had enough soap in the 30 days prior to data collection, whereas 7/14 KIs reported half the people in the community had enough soap.



Sanitation

6/14 KIs reported that half the people in their community had access to a functional latrine in the 30 days prior to data collection, whereas 5/14 KIs reported most people had access, and 3/14 KIs reported a few had access.

Main sanitation facility type used by people in the community in the 30 days prior to data collection, as reported by KIs:

Open hole	8/14	
Flush or pour/flush toilet	5/14	
Bucket toilet	1/14	•

14/14 KIs reported that specific groups had issues accessing sanitation in the 30 days prior to data collection.

1) Districts pioritized by the Yemen WASH Cluster for cholera intervention due to cholera incidence and clustering of cases, including high and/or sudden increases in cases. 2) All demographic information is based on UNOCHA 2022 Yemen Population projections. 3) Improved drinking water source is defined by the WHO as a source that, by nature of its construction, adequately protects the water from outside contamination, in particular from faecal matter. 4) KIs could select more than one answer. 5) Cholera severity scores based on Suspected Cholera Incidence Rate per 10,000 people. Reported by WHO for 2021 Humanitarian Needs Overview. Cholera Severity score is on a scale of 1 to 5 with 5 being the most severe. 6) Combined GAM prevalence, % children 6-59 months with MUAC 125mm or less and/or WFH Z-score -2 or less. Based on Yemen Nutrition Cluster Achievements Analysis 2020-2022.

