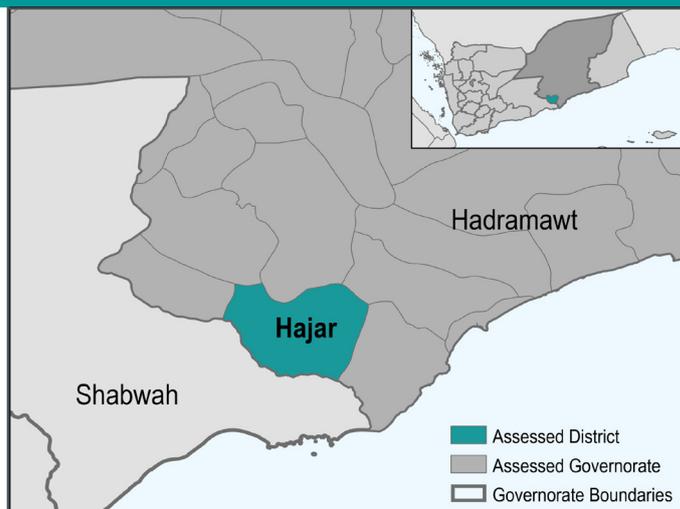


# Yemen WASH Needs Tracking System (WANTS)

Hajar District, Hadramawt Governorate - December 2020

The Yemen 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 Interview (KII) tool is a community-level WANTS tool used in cholera priority districts<sup>1</sup>. The findings below are based on four (n=4) Cholera KIIs conducted in the Hajar district, Hadramawt Governorate. Data was collected in September-October 2020 by the Charitable Society for Social Welfare (CSSW). These findings should only be interpreted as indicative of the WASH needs in Hajar.



## Demographics<sup>2</sup>

Total population in district	40,285
Total IDP population in district	243
Total population living with disability	6,043
Total population 60 years or over	1,820
Total population under 5 years old	5,418

## Health

2020 Cholera Severity Score <sup>3</sup>	3
Global Acute Malnutrition (GAM) <sup>4</sup>	9.5%

## Water

Proportion of KIIs reporting that people in their community mainly relied on an **improved water source** for drinking water in the 30 days prior to data collection: **2/4**

Proportion of KIIs that reported issue relating to taste, appearance or smell of water in the 30 days prior to data collection: **2/4**

Proportion of KIIs that reported water access problems in the 30 days prior to data collection:

Some groups lack access	2/4	<div style="width: 50%;"></div>
Waterpoint is closed	1/4	<div style="width: 25%;"></div>
There are no waterpoints available	1/4	<div style="width: 25%;"></div>

**0/4** KIIs reported that people in their community treat their drinking water, due to the following reasons:

Do not treat water because they cannot afford to	2/4
Do not treat water due to lack of materials	1/4
Do not know how to treat water	1/4

## Hygiene

Estimated proportion of people in the community with enough soap in the 30 days prior to data collection, as reported by KIIs:

All	0/4
Most people	3/4
About half	1/4
Few	0/4
None	0/4



## Sanitation

Proportion of KIIs that reported specific groups faced sanitation access problems in the 30 days prior to data collection<sup>6</sup>:

Women/girls	4/4	<div style="width: 100%;"></div>
People with disabilities	3/4	<div style="width: 75%;"></div>
Elderly people	3/4	<div style="width: 75%;"></div>
Men/boys	1/4	<div style="width: 25%;"></div>

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

Open defecation	2/4	<div style="width: 50%;"></div>
Pit latrine with a slab and platform	1/4	<div style="width: 25%;"></div>
Flush or pour/flush toilet	1/4	<div style="width: 25%;"></div>

Estimated proportion of people in the community with access to functional toilet/latrine in the 30 days prior to data collection:

All	0/4
Most people	0/4
About half	1/4
Few	3/4
None	0/4



1) Districts prioritized 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 2021 Yemen Population projections. 3) Cholera severity scores based on Suspected Cholera Incidence Rate per 10,000 people. Reported by WHO for 2020 Humanitarian Needs Overview. 4) Combined GAM prevalence, % children 6-59 month with MUAC 125mm or less and/or WFH Z-score -2 or less. Based on [SMART Surveys 2016-2019](#), [EFSNA 2016](#). 5) 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. 6) KIIs could select more than one group.