Yemen WASH Needs Tracking System (WANTS)

Ku'aydinah District, Hajjah Governorate

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 community-level WANTS tool used in cholera priority districts¹. The findings below are based on 10 cholera key informant (KI) interviews conducted across 9 communities in Ku'aydinah 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 November 2022. These findings should be interpreted as indicative of the WASH needs in Ku'aydinah district.

Demographics²

Total population in district	120,643
Total internally displaced people (IDP) in district	7,191
Proportion of the population living with disability	15%

💧 Water

1/10 KIs reported that people in their community mainly relied on an **improved water source**³ for drinking water in the 30 days prior to data collection.

4/10 KIs reported having 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

	Insufficient number of water points/ waiting time at water points	3/10
	Waterpoints are too far	3/10
	Storage containers are too expensive	2/10
	People don't like the taste/quality of the water	2/10
	Water is too expensive	2/10
	Some groups (children, women, elderly, ethnic minorities, IDPs, etc.) do not have access to the water points	1/10
	Water points are not functioning or closed	1/10
	Waterpoints are difficult to reach (especially for people with disabilities)	1/10
8/10 KIs reported no one in their community treated their		

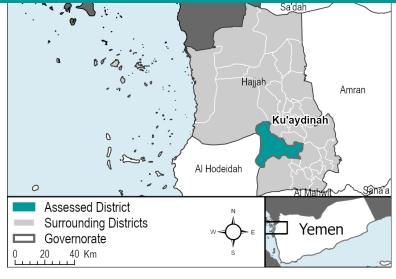
8/10 KIs reported no one in their community treated their drinking water in the 30 days prior to data collection, whereas 2/10 KIs reported few people treated their water.



WASH Cluster

Water Sanitation Hygiene

Hilfe zur Selbsthilfe



🕈 Health

2020 Cholera Severity Score⁵1Global Acute Malnutrition (GAM) prevalence rate⁶24.8%

🦢 Hygiene

5/10 KIs reported half of the people in the community had enough soap in the 30 days prior to data collection, whereas 3/10 KIs reported most people had access to enough soap, 1/10 KIs reported everyone had access and 1/10 KI sreported no one had.

Sanitation

4/10 KIs reported most people in their communities had access to a functional latrine in the 30 days prior to data collection, and 3/10 KIs reported everyone had access, whereas 1/10 KIs reported about half, 1/10 KIs reported few and 1/10 KIs reported no one had access to a functional latrine.

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

Open hole	5/10	
Pit latrine without a slab or platform	3/10	
Flush or pour/flush toilet	2/10	

4/10 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 <u>defined by the WHO</u> 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 <u>Yemen Nutrition Cluster Achievements Analysis 2020-2022</u>.

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