

Settlement Based Assessment, Area Profile: Al Jiblah

2023 | Yemen | Pilot Assessment in Radfan district, Lahj governorate

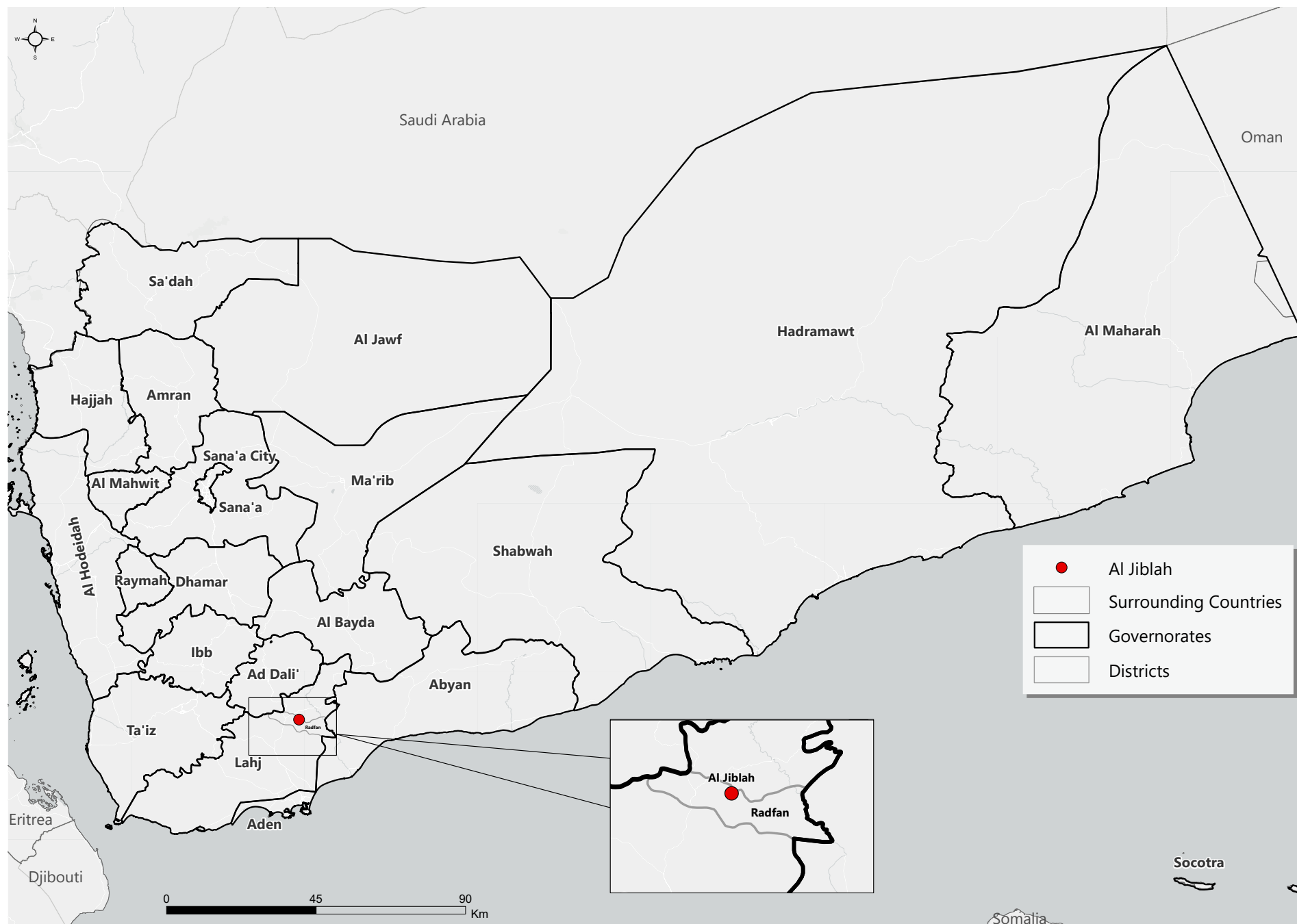
CONTEXT & RATIONALE

The conflict in Yemen entered its ninth year in 2023. A first UN-brokered truce was agreed upon between the warring parties in April 2022 and lasted until October of the same year. The truce resulted in decreased levels of fighting across the country, while needs remained high nationwide. According to the 2023 Humanitarian Needs Overview, 17.3 million people are estimated to be experiencing high levels of acute food insecurity (AFI) and 15.3 million people need water, sanitation, and hygiene (WASH) assistance in Yemen.¹ This assessment has been carried out in Al Jiblah, Radfan district, Lahj governorate (see Map 1). The 2023 IPC Acute Food Insecurity (AFI) analysis classified Radfan district as a phase 3 (Crisis) and data for the IPC were collected during November-December 2022, post-harvest. The main drivers for food and WASH insecurities are protracted conflict, climatic hazards, and the economic crisis, including a general lack of economic opportunities for the population.² As Yemenis remain vulnerable, there is a need for localized information and data across Yemen to inform the response. The focus of this settlement-based assessment (SBA) is food security and livelihoods (FSL) and WASH. Cash and markets is a secondary sector included to inform the understanding of FSL and WASH in Al Jiblah and the analysis is supported by dimensions of accountability to affected populations (AAP), climate, and gender throughout. This assessment aims to inform programmatic planning of localised FSL and WASH interventions in Radfan district by providing detailed information on demographics and displacement, critical FSL and WASH indicators, the socio-economic situation of Al Jiblah's population, provision of and access to basic services, and capacity of key local stakeholders involved in service provision and infrastructural management and maintenance related these sectors. The SBA will provide solid evidence for REACH's partners of this assessment, CARE and Field Medical Foundation Yemen (FMF) to tailor their programs in Al Jiblah as indicators were selected based on the partner's sectoral information needs. CARE implements WASH, FSL, and Protection programs in Radfan, reaching 3,222 HHs and FMF is one of the World Food Program's (WFP) partners in reaching the 518 beneficiaries in Al Jiblah, food and cash distribution assistance along with ADRA, Danish Refugee Council (DRC), and Oxfam.³ Data were collected utilizing three data collection tools, one household (HH) survey, quantitative key informant (KI) interviews, and one Mapping Group Discussion (MGD). All data were collected between the 15-21 of March 2023, before the start of Ramadan, this is normally a time of peak water prices across Yemen, and usually marks the first month of the rainy season.⁴ Radfan is part of the Internationally Recognized Government (IRG) territory and part of the Western Central Highland livelihood zone where coffee and qat are commonly grown and people are engaged in livestock activities.⁵

KEY MESSAGES

- 85% of HHs in Al Jiblah reportedly rely on rainwater collection for drinking purposes and domestic purposes. 92% of these HHs reported not having enough quantities of water all year.
- 88% of HHs stated that water is not available all year with water most commonly available to households during the summer months.
- 68% of HHs reported salary as the primary source of income. 50% of these HHs stated not having a secondary source of income.
- There is reportedly 1 market available in Al Jiblah. 92% of HHs in the area rely on a market, either in Al Jiblah or outside as the primary source of food.
- No HHs in Al Jiblah reported producing food for own consumption but only for animal fodder as KI reported drought and lack of water as the main reason for reduced agricultural activities.
- 96% of HHs reported purchasing food on credit in Al Jiblah. Of the HHs with salary as primary source of income, 97% reported debt due to food purchase.
- Female-headed HHs reported challenges to meet food and WASH needs, and compared to male-headed HHs more commonly report challenges to meet healthcare needs.
- 41% of HHs reported poor food consumption. 30% stated borderline food consumption, and 29% reported acceptable food consumption.
- 100% of HHs in three villages in Al Jiblah reported poor food consumption, none of these HHs reported HH hunger more severe than moderate levels.
- 1% of HHs reported experiencing severe HH hunger, 19% reported moderate, and 80% reported to experience no to little HH hunger.

Map 1: Al Jiblah location in Yemen



METHODOLOGY OVERVIEW

REACH, CARE, and FMF utilized three different data collection methods developed by REACH and reviewed by CARE and FMF. CARE and FMF collected the data between March 15-21, REACH cleaned, analysed, and reported on the data. The HH survey was conducted with area level representative sampling and 95% confidence level and 7% margin of error. Due to lack of updated population data, the sample size was based on partner estimates of # of HHs in the area, which was 752. The sample for Al Jiblah was met as partners conducted 164 interviews. The KI survey tool consisted of 6 separate sectors. One sectoral expert per sector was interviewed, covering Demographics and Displacement, Market, WASH, Livelihoods, Agriculture, and Livestock with focus on service provision, infrastructure management and shocks. The third methodology was a Mapping Group Discussion (MGD), with one session conducted in Al Jiblah, mapping city and community boundaries, main roads and their availability, agricultural zones, markets, water points and sanitation facilities and areas impacted by drought and/or floods. Specific focus was on understanding the accessibility and availability of the infrastructures and services for the population. [Link to full methodology.](#)



Demographics and Displacement

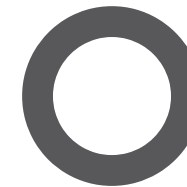
According to partner and MGD data, approximately 752 households (HHs) live in Al Jiblah across 17 villages and five communities.⁶ Agricultural zones, livestock grazing zones, and water sources unite villages into communities (see Map 2). Of the surveyed HHs, 100% were part of host communities, 10% of HHs were female-headed, and the average HH size in Al Jiblah was 7. MGD and IOM Area Assessment (AA) KI data from 2022 indicate that internally displaced persons (IDP) live in Al Jiblah, which is not reflected throughout the collected KI data. In discussions with FMF and CARE, it is indicated that the IDP HHs in Al Jiblah have been integrated into the host community and are no longer seen as IDPs by the host community. IOM AA KI data report that approximately 21 IDP HHs are living in Al Hajeb, Al Jebelah, and Jahor Lali, all reportedly intending to stay in their current location during the three months after data collection.⁷ MGD data report that displaced HHs live in each of the five communities in Al Jiblah. The IDP HHs are reported to be owning their house or living in houses free of rent.⁸ The demographics and displacement (D&D) KI stated that a large part of the population left for other governorates in 2016 due to a lack of commodities, employment, and basic services. The KI also indicated that there is expected movement to outside of Lahj in the coming weeks or months due to the insufficient rain during rainy periods over the past three years. This lack of rain has resulted in drought like conditions and in a decrease in labour opportunities for the population. The KI stated that those expected to leave are part of the previously non-displaced host community, and they are expected to move to an area outside of Lahj.

Area demographics

752 Estimated Number of HHs (partner estimate)

6,9 Average # of HH members (all surveyed HHs)

Estimated proportion of HHs by residence status (KI estimate)

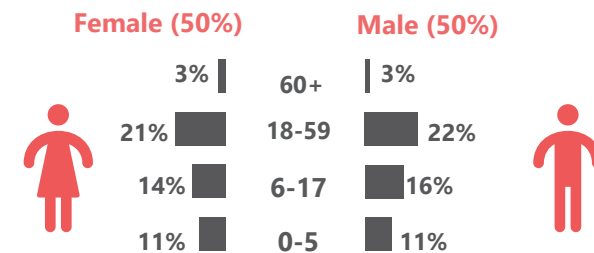


100% Host-community residents

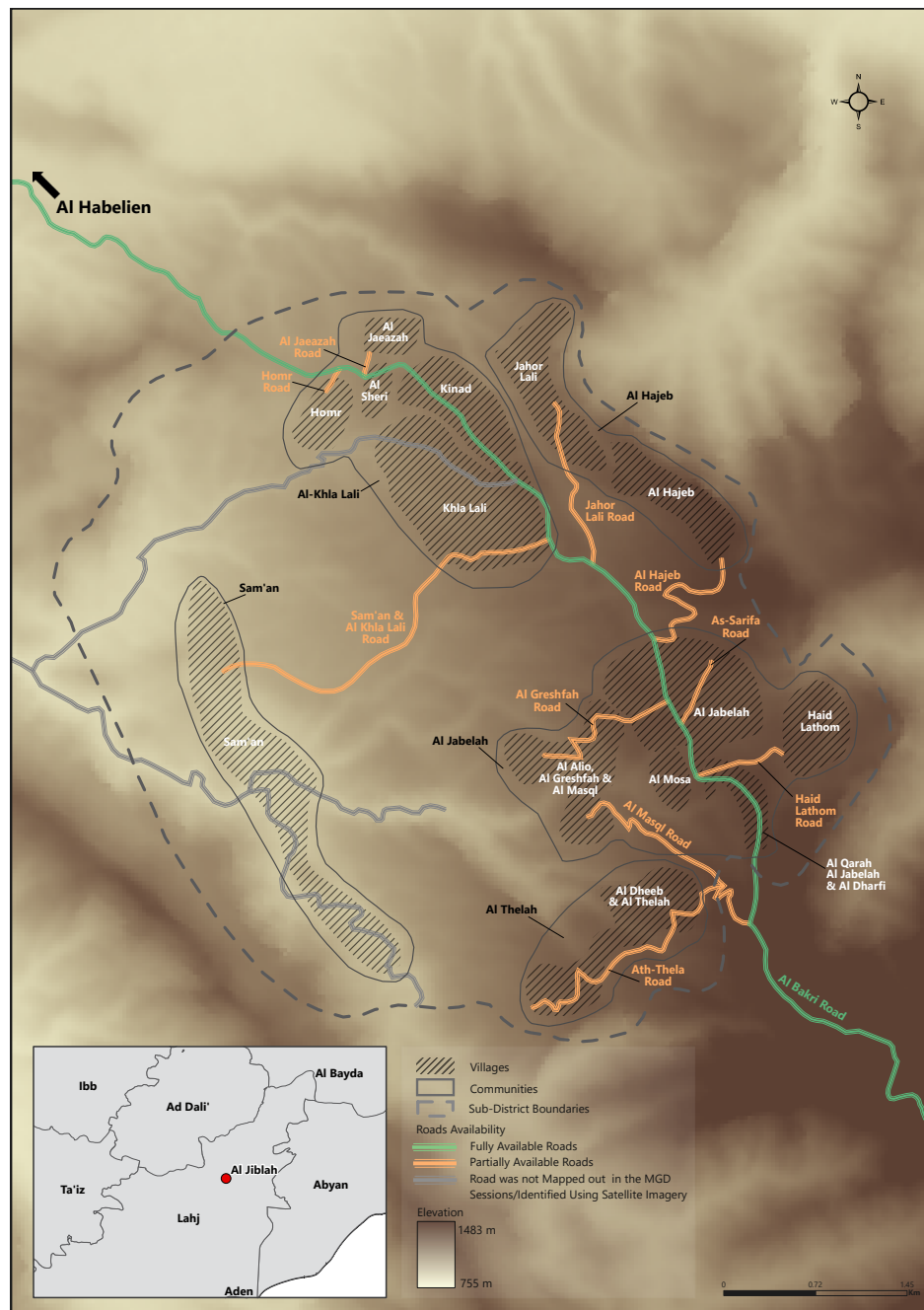
% of type of head of HH

KI estimated % female-headed HHs:	KI estimated % HHs headed by older persons:	KI estimated % child-headed HHs:
 5%	 10%	  1%

Age and gender distribution of surveyed HHs (by % of all HH members across all surveyed HHs)



Map 2: Al Jiblah sub-district, village, community boundaries, IDP sites and main roads



This map shows the sub-district boundaries of Al Jiblah, the boundaries of the villages, and community boundaries, as well as the main roads in the area and the area's elevation differences.

11 roads have been mapped out as main roads in Al Jiblah. All roads except one are deemed partially accessible by the MGD participants. The one road mapped as fully accessible is the Al Bakri Road. This road is used for the transport of water, food, and people, and all residents of the TU depend on this road for transportation. The other roads in the area leads to/from to the Al Bakri Road connecting all villages and communities in Al Jiblah with Al Habelien, the district capital. The other 10 roads are deemed partially accessible due to being narrow, bumpy, and rugged. As the roads have not been managed or maintained there are reported limitations to the possibilities of transporting of goods such as water, but they can still be used for the transportation of people. As-Sarifa Road (R10) can be used for food, water, and people transport. Al Masql Road (R11) is only used for water transportation,

As mapped out, there are 5 communities within the sub-district of Al Jiblah, and all MGD participants agreed on the village and community boundaries. Overall, the main agreed-upon uniting factors of communities were agricultural and livestock herding zones and water sources. Some MGD participants also mentioned schools as a common denominator for the communities.

As shown on the map, the communities are situated on different elevation levels. Sam'an is the community and village is situated at the lowest elevation level. Al Khla Lali community consist of 5 villages, Al Jaezah, Kinad, Homr, Khla Lali, and Al Sheri. The communities at the highest elevation levels are Al Hajeb, Al Jabelah, and Al Thelah communities. Al Jabelah community, the center of the sub-district, consists of 7 villages, Al Qarah Al Jabelah & Al Dharfi, Haid Lathom, Al Jabelah, Al Alio, Al Greshfah, and Al Mosa. The only market of Al Jiblah is situated in this community (see map 4).

Al Thelah community consists of two villages, Al Dheeb and Al Thelah. The villages are situated on an elevation level at around 1400m.

Al Hajeb community is also consisting of two villages, Al Hajeb and Jahor Lali.

The elevation differences between the communities pose different challenges in terms of accessing services such as the market, where physical barriers through inaccessible roads or long distances become financial barriers for HHs with limited resources as they need to spend more on transportation and fuel costs than other HHs.

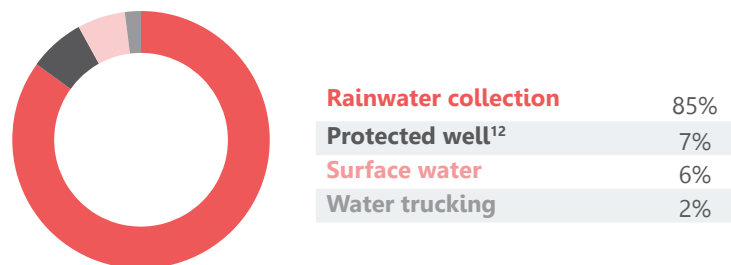


WASH

Primary water sources, water availability, and water safety

HH survey data report that the majority of HHs in Al Jiblah rely on rainwater collection for both drinking and domestic purposes. 86% of HHs responded that they rely on rainwater collection for drinking purposes, 6% rely on surface water, and 2% rely on water trucking initiatives. The 7% of HHs in the sub-district that reported collecting their water at a protected well all live in the same village, Sam'an. Here the population relies on protected wells for drinking and domestic purposes. IOM AA KI data from October-November 2022 report that IDP HHs in Al Jabelah rely on water trucking initiatives for drinking, however, it is not clearly stated if this location refers to the village or community as referred to in this assessment.⁹ MGD and HH data report that HHs in villages Al Mosa and Haid Lathom of Al Jabelah community rely on water trucking for drinking and domestic purposes while all HHs in Al Jabelah village (part of the same community, see map 2) reported relying on rainwater collection for both purposes. Overall, 85% of HHs in Al Jiblah reported relying on rainwater collection for domestic purposes, such as cleaning, cooking, and washing, 5% rely on water trucking initiatives and 3% rely on surface water. As most HHs rely on unimproved water sources in Al Jiblah, the WASH KI indicated that there previously was a piped water network in the sub-district that is no longer used and needs reparation. 88% of HHs reported insufficient water quantities from their primary water source and 90% of those HHs stated that water is most commonly available during the usually rainy summer period, while minimal rainfall was reported in February and March.^{10 11} Despite this, 91% reported having sufficient water to meet HH drinking needs at the time of data collection, as the other 9% reported not having sufficient water to meet any needs. The WASH KI reported that water often has sediments or abnormal color, while 82% of HHs reported that they do not treat the water before drinking. HHs in Al Jiblah also rely on rainwater collection for agricultural purposes and the general lack of rain has led to a change in livelihoods, as both HHs and KIs reported cancelled agricultural activities due to drought.

% of households by primary water source for drinking



% of households that reported water availability all year



12% Yes, water is available all year
88% No, water is not available all year

Most reported time of water availability, by % of HHs (% exceed 100% due to select many)

1. Summer	90%
2. Fall	41%
3. Spring	28%
4. Winter	9%

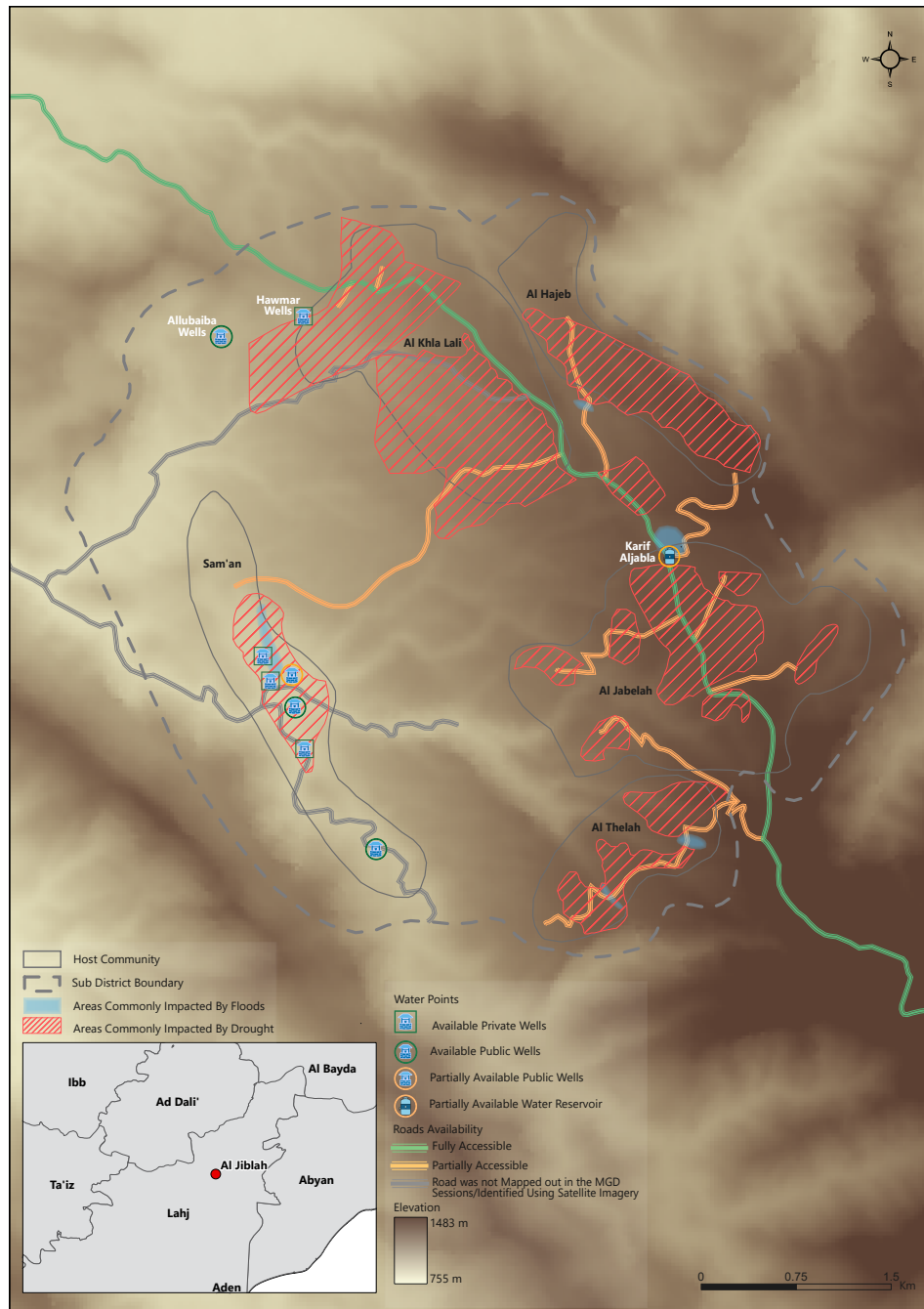
Top 5 most commonly reported ways of disposing garbage



Burn it	58%
Undesignated open	25%
Designated open area	12%
Household pit	3%
Bury it	2%

Sanitation and waste management

There is a general lack of WASH infrastructure and services present in Al Jiblah. Across the 5 communities, there is a lack of both sewage systems and public sanitation facilities for the communities to use according to WASH KI and MGD data. Findings indicate that HHs in general have access to private sanitation as the WASH KI reported that an estimated 1-25% share sanitation facilities with others in Al Jiblah. This is in line with IOM AA data, indicating that at least the IDP HHs in the communities of Al Jabelah, Al Hajeb, and Jahor Lali, have access to permanent HH sanitation, with the most commonly reported being either a flush or pit latrine. HH and KI data for this assessment align in reporting that burning garbage or HH waste is the most common way of disposing of garbage. There are no reports across the different tools that there is any public or private waste handling services across the Al Jiblah communities.

Map 3: Al Jiblah water points & areas hit by climatic shocks droughts and floods

This map shows where the water points or sources are situated across Al Jiblah and what areas have been most impacted by floods and droughts over the 12 months prior to data collection in March 2023.

The Karif Aljabla is a public rainwater collection reservoir in Al Jabelah community, managed by a water management committee in the area, situated close to an area that is commonly flooded. The water from this water point is used for drinking, domestic, and agricultural purposes but often without sufficient volumes of water due to lack of rainfall over the past three years. HHs and the WASH and agriculture KI reported little agriculture is now practiced in the sub-district due to lack of water and drought. Both in MGD and HH data, It is reported that HHs build small rainwater collection dams in front of their homes as a way to cope with the lack of water, this is also mentioned by the livestock KI. HH data also report that only one HH travel more than 30 mins to fetch water, indicating that water is accessed close to the HH.

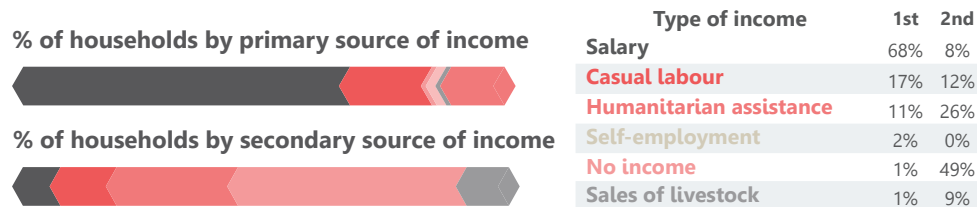
As previously mentioned, Sam'an community rely on wells as the main water source. There is a mix of well types, between private and public. MGD data state there are no authority or private corporation responsible for the management or maintenance of these wells. According to MGD data, all of the Sam'an wells are used for drinking and domestic purposes, this aligns with HH data. All but two are also used for agricultural purposes.

As shown on the map large parts of Al Jiblah are impacted by drought and a lack of rainfall. Several sectoral KIs call for more support in finding new water sources, or digging wells for the communities to be used for HH and agricultural purposes. Furthermore, the map also indicate that water sources other than communal rainwater collection dams are rare in communities situated at higher elevation levels, compared to the ones on the lower elevation levels in the area.

As MGD data report that the management of water points are commonly managed by the well owners, the WASH KI reported there are no actors involved in organized WASH service provision and management in Al Jiblah. The WASH KI reported no local authority management or maintenance of WASH infrastructure in Al Jiblah. It was also reported by the WASH KI that competence increasing initiatives and equipment is needed to increase the functionality of water points and sources. Water network repairs, mechanical equipment and repairs to pumps, electrical equipment, network spare parts, and mechanical spare parts are all mentioned as needed to support the local communities in their water management.

Livelihoods

Most HHs in Al Jiblah have at least one member engaged in livelihood activities to generate HH income. 67% of HHs reported employment as the primary livelihood activity and 25% reported casual/daily labour. The livelihoods KI reported that the most stable period for income is between April and July. IOM AA KI data state that IDPs in Al Jabelah, Al Hajeb, and Jahor Lali rely on government assistance/pension, are self-employed or have contracted employment.¹³ 60% of HHs that reported employment reported to be working in the military and 13% reported construction work, these are the two main reported employment sectors among HHs. Part-time is the most common employment type according to the livelihoods KI. Of HHs that reported military employment, 23% stated other livelihood activities such as agriculture or government/civil services as well. 62% of these HHs reported a lack of work opportunities. Of all employed HHs, 87% reported salary as their primary source of income, 43% reported no secondary income source, and 24% reported humanitarian assistance as the secondary source of income. There were widespread reports of HHs struggling to meet needs over the 30 days before data collection, despite most HHs reported salary as their primary source of income. 69% of employed HHs reported a lack of work opportunities, 88% reported low wages and 81% reported irregular salary payments, which could refer to the nationwide issues with governmental salaries.



26% of HHs in Al Jiblah are engaged in agricultural activities, such as owning or herding livestock and being engaged in crop growing activities. MGD data show that there are 16 livelihood zones in the sub-district with livestock herding or grazing being the only practice, thus no crops grown according to the MGD data. Agriculture KI data, in partial alignment with FEWSNET livelihood zone information from 2010, report that cash crops qat and coffee have previously been grown in Al Jiblah, but due to lack of reliable water and sustainable irrigation methods, this has stopped, changing income sources for these HHs, resulting in increased reliance on other income sources, as reported by the agriculture KI.¹⁴ HH data show that of the 10% of surveyed HHs engaged in agriculture, 88% of these HHs grow crops used for animal fodder. 20% of HHs in Al Jiblah reported to be either owning livestock or working as livestock herders. Goats and sheep are the most reported type of livestock in the area. Both the agriculture and livestock KIs stated shocks impacting these livelihood activities. Drought and lack of water, high prices of animal fodder, lack of livestock services, and either lack of, or high prices of, fertilizers and pesticides are the main shocks reported across these sectors, as actors are mostly unable to adapt to, or recover from, shocks.

Livelihood Coping Strategy Index (LCSI)

The most commonly used or already exhausted livelihood coping strategy (LCS) in Al Jiblah is to purchase food on credit, as 96% of HHs reported this coping strategy, 91% of HHs stated having to resort to borrowing cash, and 61% of HHs reported cutting down on HH spending on such as education and healthcare (for full list of use of % of population using each LCS, see Annex 2). There are two villages where 50% of surveyed HHs reportedly have used emergency coping strategies in the past 30 days prior to data collection, Homr and Kinad, both part of the Al Khala community (see map 2).

21% of HHs in Al Jiblah reported having sold their last female animal, the most reported emergency coping strategy in Al Jiblah. This aligns with reports from the livestock KI of a need for increased knowledge of sustainable animal practices, among which the importance of keeping the last female animal. The drought, high prices, hard to come-by animal fodder or veterinary services, and lack of knowledge of best animal practices might all be reasons to explain the relatively high number of HHs using or exhausting this coping strategy. The use of negative coping strategies in Al Habelien is indicative of an IPC phase 4 (crisis) as at least 20% of surveyed HHs reported emergency coping strategies being used or exhausted over the 30 days before data collection.

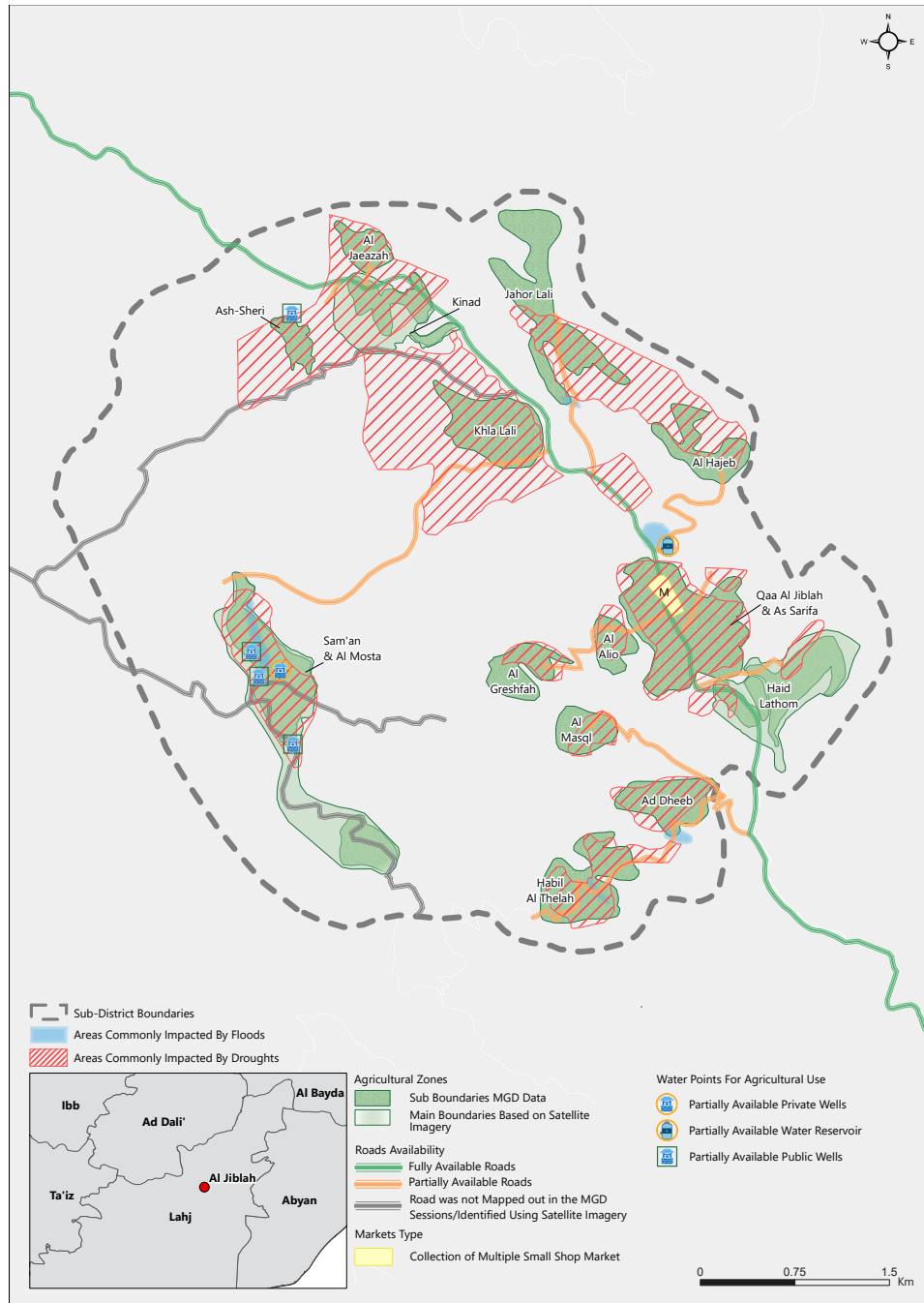
% of HHs by Livelihood Coping Strategy (LCS) category in the 30 days prior to data collection:



The most commonly reported negative livelihood coping strategies adopted because of a lack of food or money to buy food:

- Purchased food on credit (**94% used, 2% exhausted, stress**)
- Borrowed money (**81% used, 91% exhausted, stress**)
- Reduced essential non-food expenditure such as education and health (including medication) (**55% used, 6% exhausted, crisis**)
- Sold last female animal (**14% used, 7% exhausted, emergency**)
- Sold household assets/goods (radio, furniture, refrigerator, television, jewelry, clothes etc) (**8% used, 13% exhausted, stress**)

Map 4: Al Jiblah agricultural zones, markets and climatic shocks droughts and floods



This map shows the main agricultural zones in Al Jiblah, the proximity to a water source or water point, the Al Jiblah market location, and areas commonly impacted by floods and droughts. The map is based on the MGD data collected during two separate sessions in Al Jiblah, one covering communities in the north and one in the south.

MGD participants mapped out 16 agricultural zones in Al Jiblah, with some being in proximity to each other. The only type of activity mentioned during the MGD sessions is livestock herding or grazing. The MGD participants, the KIs for WASH, livelihood, markets, livestock, and agriculture, all mentioned that the prolonged dry spell or drought has had a negative impact across all sectors in Al Jiblah in the past 12 months. As shown on the map, agricultural zones are also identified to commonly being impacted by droughts, with few zones having direct access to a water point or water source. MGD data state the lack of rainfall has led to water scarcity, the death of trees in the area, and a decrease in agriculture. This would be one of the reasons for MGD participants only reporting livestock herding or grazing as activities in the mapped-out zones. As agriculture is not a common practice anymore in Al Jiblah, there are also few animal products produced in the sub-district as the livestock KI reported live animals as the only product currently. Furthermore, livestock KI reported to a decreased production of livestock and livestock goods, resulting in a decrease in income from sales and a decrease in local food security. Thus, the drought has a broad impact across communities and sectors in Al Jiblah, and as the majority is stated to rely on rainwater for drinking, domestic, and agricultural purposes, the area is fragile to further rainfall insufficiencies and disruptions, both to meet HH needs and generate income.

One market is available in the Al Jiblah sub-district, located in the Al Jiblah community and is a collection of multiple small shops. 100% of the traders are male and there are no known infrastructural damages to the market. The market operates every day of the week and customers can access vegetables, fruits, meat, poultry, dairy, qat, live animals, non-fresh produce, fuel, soap, and drinkable water at the market. However, MGD data also points to products being available in small quantities and sometimes in low quality, and the market KI indicated that due to irregular and low salaries among the population, market actors get liquidity issues, having to purchase less favourable goods as a result. The low quantities and quality of the market goods force the population to travel to markets outside of Al Jiblah, report MGD data. Market actors are reportedly mostly unable to adapt to, or recover from the mentioned shocks or stresses to the sector, and the market KI reported they receive no support from local authorities to cope. This adds to the liquidity issues they face, leaving the market sector fragile, and putting the population's access to food at risk of deteriorating.

Cash & Markets

The majority of Al Jiblah HHs rely on the market as their primary source of food, as a majority reported HH debt due to food purchases. In total, 93% of HHs reported relying on markets as their primary source of food, despite there only being one market in Al Jiblah. Around half of Al Jiblah's population is reporting physical access to markets, as 54% of HHs reported that the marketplace is either too far away, or that transportation to the market is too expensive. This physical barrier thus also becomes a financial barrier for these HHs. On average in the sub-district, HHs spend 71% of their income on food, with generally little space for high costs of transportation and fuel as 10% on average is spent on these two expenditures among Al Jiblah HHs. REACH Joint Market Monitoring Initiative (JMIMI) data show that prices of petrol have increased by 35% since January 2020, thus decreasing accessibility to markets for HH that need to travel.¹⁵ Liquidity issues, due to allowing credit purchases and the volatile Yemeni Rial (YER) exchange rate are shocks mentioned by the Al Jiblah market KI. According to REACH JMIMI data, the exchange rate in Lahj governorate has increased by around 50% since January 2020.¹⁶ This, and the high reliance on imports represent vulnerabilities for market actors in Al Jiblah. Allowing borrowing to access food and credit purchases poses challenges to the market actors in Al Jiblah, with retailers reportedly struggling to build up stock while keeping prices low and affordable to HHs.

99%

Of households reported
financial barriers to both
WASH and food items

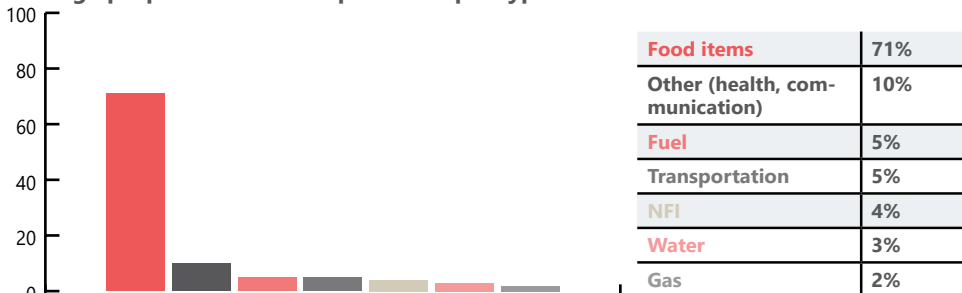
97%

of HHs reported to have
debts

Top 3 reported reasons for debt

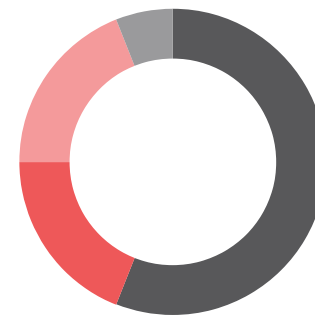
1. Food	98%
2. NFI/WASH items	34%
3. Fuel	27%

Average proportion of HH expenditure per type of item



Gendered dimensions of access to livelihoods, services and infrastructure

% of female-headed households by primary source of income



Salary	56%
Casual labour	19%
Hum. assistance	19%
Begging	6%

Top 3 main challenges to meet HH needs among female-headed HHs

Lack of work opportunity	87%
Salaries not regularly paid	73%
Not enough money	47%

Women in Al Jiblah reportedly have less access to vital FSL and WASH infrastructure and services. Around half of the population in Al Jiblah reportedly face physical or social barriers to access markets. The market KI indicated that due to local customs in the area, women are generally not allowed to access the market while also stated to be occupied in domestic labour, indicating social barriers for this population group. Elderly and people with physical or cognitive difficulties are reported to face barriers in accessing the market due to the terrain and a lack of transportation between villages and markets. The livelihoods KI reported that women working in Al Jiblah, most commonly work within agriculture or livestock care. KI also indicated that women specifically engage in domestic labor activities as part of their livelihoods, as the KI mentioned fetching water as the second most common livelihood activity and domestic labour as the most common "employment type", which would reflect that women in Al Jiblah are most commonly responsible for HH duties where fetching water and caring for HH livestock would be included. The livestock and agriculture KI indicated that women have less access to agricultural land and livestock zones, confirming KI statements on the expectancy of women to work domestically. All but one female-headed HH reported income challenges for the HH, with lack of work opportunities or low salaries as the most stated reasons. 93% of the female-headed HHs reported challenges meeting HH needs on healthcare, as 67% stated challenges meeting HH needs for food, and 47% respectively reported issues meeting HH needs for financial resources and drinking water. While challenges to meet HH needs are high across Al Jiblah, the share of female-headed HHs unable to meet HH healthcare needs is proportionally higher compared to the average HH, a typically gendered aspect of HH needs.

Food Security

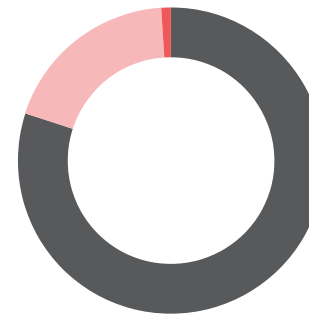
As mentioned, Radfan district was classified as a phase 3 (crisis) district Crisis in the 2023 IPC AFI analysis, stating that 25% of HHs meet 25-50% of caloric needs through assistance, and FEWSNET classifies the district as in *Crisis*.^{17 18 19} 91% of surveyed HHs reported relying on a market as the only, or one of many sources of food, 31% stated borrowing, and 25% reported humanitarian assistance.²⁰ The market KI reported that rice, bread, and cereals are the main staple foods in the area and millet, potato, and milk as goods in demand but with reported limited supply at the market. HH, KI, and IOM AA data report on the general availability of food at the markets for HHs to access. However, there are issues regarding HHs' ability to access food. REACH JMMI data report that the price of rice has increased by around 40% in Lahj between January 2020 and March 2023, and the price of wheat flour by 220%. 95% of HHs reported purchasing food on credit. Thus, as food is indicated to be unaffordable HHs need to engage in negative coping strategies to access food. Household Hunger Scale (HHS) data report that 80% of HHs experienced no to little HH hunger, 19% experienced moderate HH hunger, and 1% (n=1 HH) experienced severe HH hunger, indicative of IPC AFI phase 3. While HH hunger is relatively low, the dietary diversity among HHs varied in the sub-district (see Annex 1). 29% of HHs reported acceptable food consumption (FC), 30% of HHs stated borderline, and 41% of HHs reported poor FC. The FCS results are indicative of IPC AFI phase 4.

The average size of HHs with poor FC in Al Jiblah is 7. 22% of poor FC HHs reported stress LCS, 64% reported crisis, and 13% reported emergency LCS. 73% of HHs with poor FC experienced no to little HH hunger, 27% experienced moderate, and 2% experienced severe hunger. 100% of these HHs reported HH debt and that purchasing food was the sole or one of several reasons for HH debt. HHs accessing food through credit purchases or borrowing could explain the general low HH hunger levels in the area, as HHs limit food consumption gaps through the use of LCS. Of poor FC HHs, 70% reported to have received aid during the 30 days before data collection, as 100% received financial resources. 30% of these HHs reported not having received aid in the past 12 months. 100% of HHs in Al Alio, Al Masql, and Al Greshfah reported poor FC, all of these villages are part of the same community (see Map 2) In Al Alio, 50% of HHs reported no to little or moderate HH hunger respectively. 100% of Al Masql HHs reported no to little hunger. 55% of HHs in Al Greshfah stated to experience no to little hunger and 45% experienced moderate HH hunger. Compared to the average Al Jiblah HH, Al Masql and Al Greshfah HHs reported above-average spending on fuel and transportation, limiting the resources available for food purchases.

HH and KI data point to a situation where the available food would have been more inaccessible without the possibility of HHs using negative coping mechanisms. For HHs far away from markets, HH expenditures of other goods than the food are important, making food less accessible, potentially increasing HH hunger, and limiting dietary diversity among HHs. Without support, there is a risk of exhausting widely used LCS, potentially worsening the food security situation in Al Jiblah further.

HOUSEHOLD HUNGER SCALE

% of HHs by no, little, moderate, or severe reported hunger in the HH



No to Little HH hunger	80%
Moderate HH hunger	19%
Severe HH hunger	1%

FOOD CONSUMPTION SCORE

% of HHs by Food Consumption Score (FCS)



Acceptable	29%
Borderline	30%
Poor	41%

Top 3 villages with the highest % of HHs reporting poor food consumption




% of HHs by FCS in Al Alio	Acceptable	0%
	Borderline	0%
	Poor	100%
% of HHs by FCS in Al Greshfah	Acceptable	0%
	Borderline	0%
	Poor	100%
% of HHs by FCS in Al Masql	Acceptable	0%
	Borderline	0%
	Poor	100%

Accountability to Affected Population (AAP)

Al Jiblah's population struggle to meet basic HH needs with the current levels of income in relation to prices of basic goods, resulting in high intersectoral needs. The most commonly mentioned priority need of HHs is food, as 99% of all surveyed HHs reported food as one of the three most pressing needs for HHs. The most common combination of answers provided was food, drinking water, and healthcare, as 32% of HHs provided these three as their top 3 needs. In Sam'an and Al Thelah villages, one commonly reported need among HHs was road repair, a need not reported elsewhere in Al Jiblah. IOM AA data report that financial support is the main priority of needs among IDP HHs in Al Hajeb, Al Jabelah, and Jahor Lali.²¹

64% of households in Al Jiblah have received aid in the past 30 days prior to data collection, aligning with Yemen Food Security and Agriculture Cluster data on distributed humanitarian food and cash for food assistance in Al Jiblah in March 2023.²² Of the HHs having received aid in the past 12 months, 73% were not consulted ahead of receiving aid. Of those being consulted 100% received what they asked for, and 93% of these HHs asked for financial resources. 78% were satisfied with the aid received, and of the 22% of HHs not satisfied with the aid received, the most common complaint was that the quantity of aid was inadequate to HH needs. 100% of HHs in Al Thelah, 73% of HHs in Khla Lali, and 64% of HHs in Kinad villages responded not receiving any aid in the past 12 months.

Top 3 priority needs of households in Al Jiblah (results exceed 100% as respondents provided the top three priority needs of HH)

Type of need		% of HHs population reporting as 1 of 3 priority HH needs
	Food	99%
	Drinking water	68%
	Healthcare	52%



Conclusion

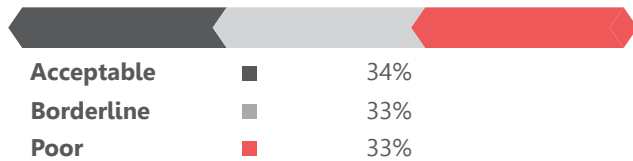
This SBA in Al Jiblah has focused on WASH and FSL, with cash and markets indicators and dimensions of AAP climate and gender supporting the analysis throughout. Data were collected during a time of year when water prices often peak in Yemen and during the first cropping and land preparation period within agriculture. The objective of the assessment was to better understand Al Jiblah's demographic profile, WASH and FSL needs, and how service provision and infrastructural availability and accessibility impact needs in Al Jiblah.

Al Jiblah has a stable population, with IDPs integrated into host communities. While currently stable, there are indications of future movement among the population as HHs struggle to cope with shocks and generate sufficient income to meet HH needs. As most HHs need to purchase food on credit, the current economic situation in Yemen poses challenges for HHs. Insufficient income levels, depreciation of the YER, and increasing prices of commodities force HHs to resort to widespread use of negative LCS, which for livestock owners reportedly comes down to selling their last female animal. Such actions, combined with shocks and stresses, impact livelihoods in Al Jiblah. FSL outcome indicators in this SBA indicate worse FSL outcomes than in the 2023 IPC as seasonality impact access to work, water, and food as credit purchases and borrowing from the community contribute to keeping hunger levels relatively low. Exhausting the widely used coping strategies would probably mean an increased share of HHs with poor FC and HHs experiencing increased hunger levels across Al Jiblah. The low HH income levels, challenges to access a market, high prices of vital goods, and the exclusion of some HH members (women, youth) from engaging in income-generating activities leave HHs vulnerable to price shocks as livelihoods across Al Jiblah are vulnerable to further climatic shocks. The lack of rainfall and insufficient volumes of rain over successive years have resulted in cancellation of livelihood activities and income generation across all sectors of this assessment. Without sustainable and sufficient, WASH and FSL services, infrastructure, and sectoral support, communities will continue to struggle. An increase in sustainable water practices and management of existing sources can increase livelihood activities within agriculture, supporting local food production, and HH participation to generate income, which could increase HH purchasing power. Limiting the impact of climatic and financial shocks should move HHs away from negative coping strategies and towards more sustainable livelihoods.

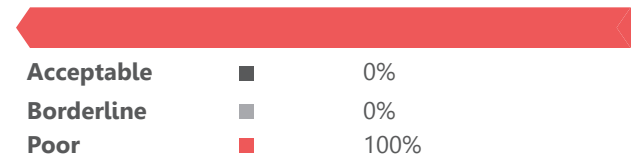
This assessment has shown the need for more intersectoral, localized information to better understand needs and drivers of needs concerning WASH and FSL in Yemen. The data also showed the need to widen the scope to include more sectors, such as health and nutrition to better understand intersectoral needs in Al Jiblah. Combining these data collection methods, there are further possibilities to develop the approach in line with information needs to inform humanitarian and development programming to create a sustainable way of decreasing HH needs across Yemen.

Annex 1

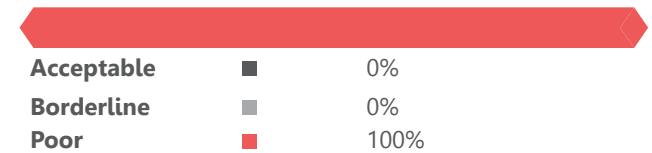
% of HHs by FCS overall in Al Dheeb (n=3 HHs)



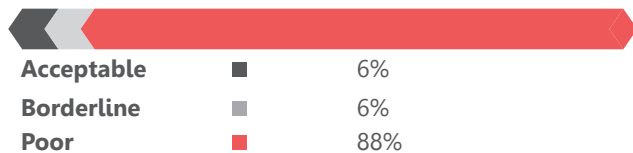
% of HHs by FCS overall in Al Alio (n=4 HHs)



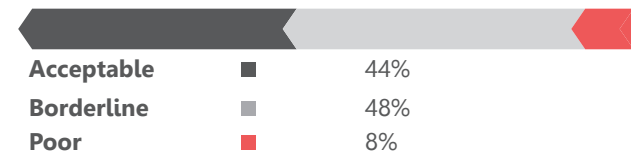
% of HHs by FCS overall in Al Ghreshfah (n=9 HHs)



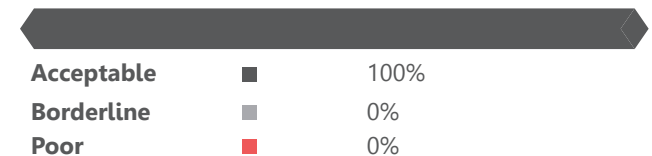
% of HHs by FCS overall in Al Hajeb (n=18 HHs)



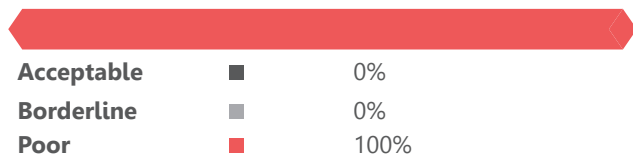
% of HHs by FCS overall in Al Jabelah (n=25 HHs)



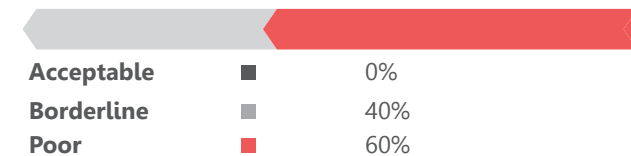
% of HHs by FCS overall in Al Jaeazah (n=6 HHs)



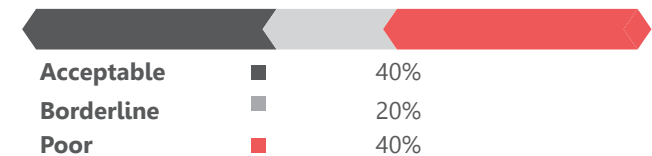
% of HHs by FCS overall in Al Masql (n=5 HHs)



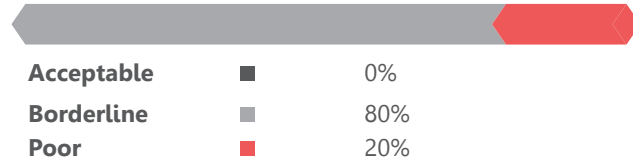
% of HHs by FCS overall in Al Mosa (n=5 HHs)



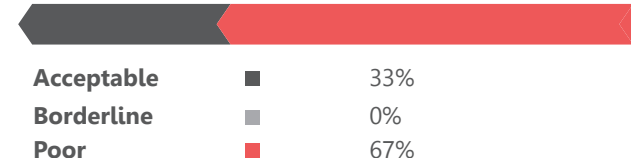
% of HHs by FCS overall in Al Qarah Al Jabelah & Al Dharfi (n=5 HHs)



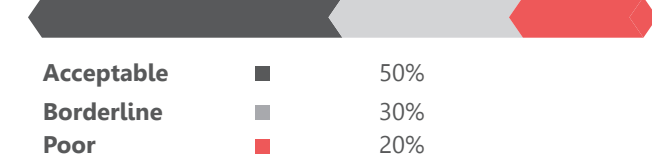
% of HHs by FCS overall in Al Sheri (n=5 HHs)



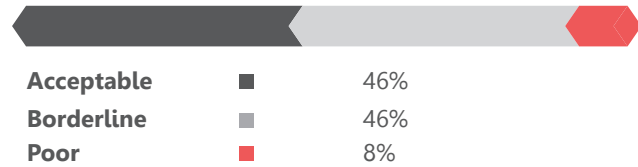
% of HHs by FCS overall in Al Thelah (n=9 HHs)



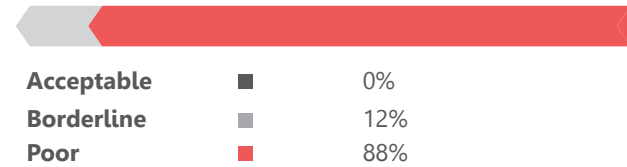
% of HHs by FCS overall in Jahor Lali (n=10 HHs)



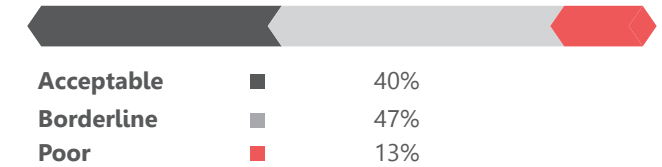
% of HHs by FCS overall in Haid Lathom (n=13 HHs)



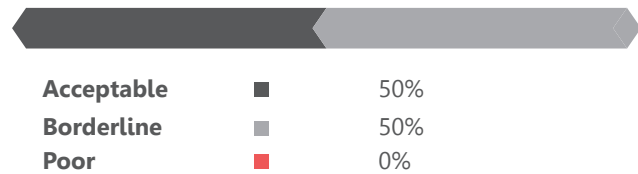
% of HHs by FCS overall in Homr (n=8 HHs)



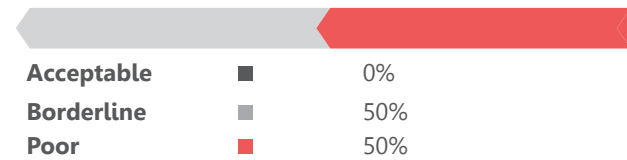
% of HHs by FCS overall in Khla Lali (n=15 HHs)



% of HHs by FCS overall in Kinad (n=12 HHs)



% of HHs by FCS overall in Sam'an (n=12 HHs)



Annex 2

Livelihood coping strategy index

Livelihood coping strategy	Category	% of population using or have used coping strategy	% of population that used coping strategy	% of population that have exhausted coping strategy
Sold household assets/goods (radio, furniture, refrigerator, television, jewelry, clothes, etc)	Stress	21%	8%	13%
Purchased food on credit	Stress	96%	94%	2%
Spent savings (cash savings)	Stress	18%	4%	14%
Borrowed money	Stress	91%	81%	10%
Sold productive assets or means of transport (sewing machine, wheelbarrow, motorcycle, car, etc)	Crisis	13%	4%	9%
Reduced essential non-food expenditure such as education and health (including medication)	Crisis	62%	55%	6%
Withdrew children from school because of lack of money	Crisis	6%	5%	2%
Sold house or land	Emergency	8%	0%	8%
Sold last female animal	Emergency	21%	14%	7%
Early marriage (female child under age of 15)	Emergency	2%	2%	0%

ENDNOTES

- 1 UN OCHA (2022) [Yemen 2023 Humanitarian Needs Overview](#)
- 2 IPC (2023) [YEMEN: IPC Acute Food Insecurity and Malnutrition Snapshot. Acute Food Insecurity: January-December 2023; Acute Malnutrition: October 2022-September 2023](#)
- 3 Yemen Food Security and Agriculture Cluster (2023) [Interactive response Dashboard](#)
- 4 FEWSNET [Seasonal calendar](#)
- 5 FEWSNET (2010) [Livelihood zone map](#)
- 6 **Note:** The sample for Al Jiblah was 752 and was based on partner estimates. The KI for displacement and demographics in Al Jiblah estimated that approximately 600 HHs live in the sub-district.
- 7 **Note:** It is not clearly stated whether the locations in IOM AA dataset relate to villages or communities in Al Jiblah. The dataset also uses a slightly different spelling to compared to the information and location names in Al Jiblah REACH received from the FSAC ahead of this assessment.
- 8 IOM (2022) [Displacement Tracking Matrix: Area Assessment Public Dataset](#)
- 9 Ibid.
- 10 FEWSNET [Seasonal calendar](#)
- 11 FAO (2023) [Agrometeorological Update, April Issue \(Ref: #32\), 01-31 March 2023](#)
- 12 **Note:** of the HHs in Al Jiblah answering that protected well is the primary water source, all households are situated in the village of Saman, with 100% of these HHs reporting protected well as their primary water source for drinking.
- 13 IOM (2022) [Displacement Tracking Matrix: Area Assessment Public Dataset](#)
- 14 FEWSNET (2010) [Livelihood zone map](#)
- 15 REACH Initiative (2023) [Joint Market Monitoring Initiative Data Dashboard](#)
- 16 Ibid.
- 17 IPC (2023) [YEMEN: IPC Acute Food Insecurity and Malnutrition Snapshot. Acute Food Insecurity: January-December 2023; Acute Malnutrition: October 2022-September 2023](#)
- 18 FEWSNET (2023) [Yemen - Food Security Outlook: Emergency \(Phase 4\) outcomes likely to persist in Marib amid conflict and reduced assistance, February-September 2023](#)
- 19 **Note:** The FEWSNET classification of *Crisis!* follows the general IPC guidelines, but add that the district would be at least one phase worse off without humanitarian assistance.
- 20 **Note:** It is not clearly stated which market HHs rely on as their source of food, if it is the market in Al Jiblah, one of the markets in Al Habelien or any other market in or outside of the district
- 21 IOM (2022) [Displacement Tracking Matrix: Area Assessment Public Dataset](#)
- 22 Yemen Food Security and Agriculture Cluster (2023) [Interactive response Dashboard](#)

ABOUT REACH

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).

For more information please visit our website: www.reach-initiative.org. You can contact us directly at: geneva@reach-initiative.org. For information on REACH Yemen you can sign up to the [REACH Yemen mailing list](#) or contact us at impact.yemen@impact-initiatives.org.

ABOUT CARE

CARE has been active in Yemen since 1992, addressing poverty, promoting social justice, and enhancing people's ability to cope with crises through humanitarian response and development projects. CARE is operational in 14 governorates across Yemen, delivering programs through direct implementation or in partnership with local and international organizations. CARE contributes to strengthening Yemeni communities' resilience, helping them to recover from the effect of one of the world's largest humanitarian crisis.

For more information, please visit our website: www.careyemen.org. You can contact us directly at: Yem.info@care.org

ABOUT FMF

Field Medical Foundation (FMF) is an NGO with a vision to empower communities for a better life and sustainable development. FMFs mission is to contribute to alleviating the suffering of vulnerable people in society and enabling them to access comprehensive health, education, and developmental services through building effective partnerships, mobilizing and investing resources and volunteer efforts, and directing them toward implementing sustainable development and initiatives programs by evidence-based, best practices and policies of humanitarian action.

For more information, please visit our website: www.fmfyemen.org. You can contact us directly at: info@fmfyemen.org