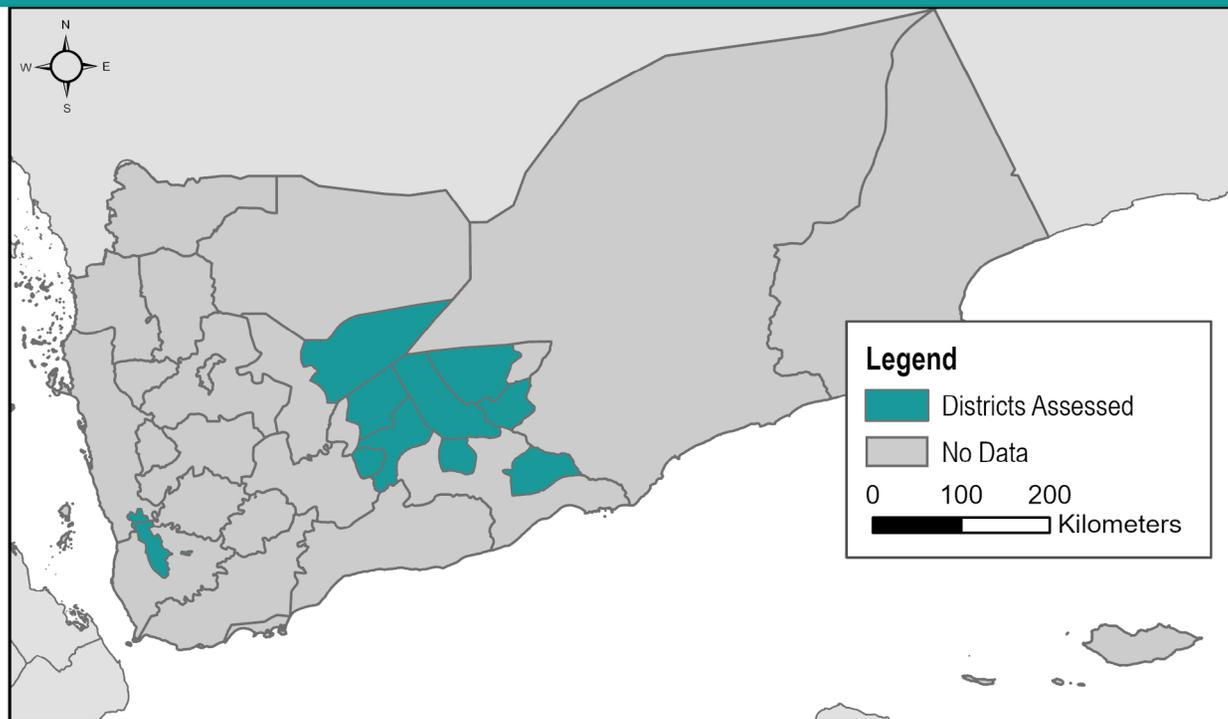


INTRODUCTION

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

This Situation Overview describes all YWC partner assessments carried out between April and June 2021, including 149 key informant interviews (KIIs) and 757 household interviews. The Situation Overview triangulates WASH assessment findings with secondary data sources.



WASH RESPONSE UPDATES

The final 2021 Humanitarian Response Plan (HRP) set forth a strategy to provide humanitarian aid to the people of Yemen. It was estimated that 3.85 billion United States Dollars (USD) would be needed in 2021 to reach the targeted 16 million people (representing 77% of the total 20.7 million people in need).

The YWC estimated that it would need approximately 330 million USD to provide WASH services in 2021.¹ As of June, only 18.3 million USD had been received by the YWC and its partner organizations,² which represents 6% of the estimated budget for providing WASH support presented in the 2021 HRP. Overall, the Yemen humanitarian response has been substantially underfunded for the first half of 2021, with almost every humanitarian sector having received less than 50% of their HRP budgets. However, at 6% of its target budget received, WASH is among the most severely underfunded sectors.

- As of April 2021, 60 YWC partners have been providing WASH support in 205 districts across 21 governorates of Yemen.³
- The YWC sets out to provide WASH support to about 11 million people in 2021 - as of April, the YWC and partners have provided support to 4.51 million people, or 41% of their target.
- The coverage of WASH support varies among the thematic areas and targets reached were the following: 56% for the sustained sanitation system (TA2); 32% for the sustained water system (TA1); 23% for the emergency water support (TA3); 9% for the emergency hygiene support (TA5); and 4% for the emergency sanitation support (TA4).⁴

1) OCHA [Yemen Humanitarian Response Plan](#) March, 2021 2) UNOCHA Financial Tracking Sources. "[Yemen 2021](#)" Accessed June 30, 2021. 3) Yemen WASH Cluster Partners Presence ([4W Matrix](#)) [January - April 2021](#). Accessed June 30, 2021. 4) Yemen WASH cluster. "[YEMEN - Humanitarian Dashboard \(January - April 2021\)](#)". Accessed June 30, 2021.

HUMANITARIAN PROGRAM CYCLE

The 2021 Humanitarian Needs Overview (HNO)¹ estimates that 20.7 million people (66% of the Yemeni population) require some form of humanitarian assistance, with 12.1 million people in acute need. Lack of WASH services is one of the main drivers of need in Yemen, with 15.4 million people in need of WASH assistance. According to YWC findings issued in April 2021, only 33% of individuals had access to safe water through water trucking and 5% received emergency hygiene support.

FOOD INSECURITY

According to the World Food Program (WFP), the conflict in Yemen has left almost 16.2 million people experiencing the third phase of food insecurity according to the Integrated Food Insecurity Phase Classification (IPC 3+), and 2.3 million children under the age of 5 suffering from moderate acute malnutrition. More than 50% of the Yemen population is predicted to be living in poverty.² WFP estimates an additional 425 million USD is needed to ensure the continuity of the operations during the upcoming six months. In May 2021, WFP distributed general food assistance to 8.4 million people: 6.1 million people received food directly, about 1.7 million people received food vouchers, and 1.2 million people received cash assistance.³

The Yemen Food Security Update⁴ (June 2021) issued by WFP shows an increase of 12% in global food prices since January 2021. Even though the Joint Market Monitoring Initiative (JMMI) reports an insignificant decrease of the exchange rate (1%), the food Survival Minimum Expenditure Basket (SMEB) cost increased by 13%.⁵ Moreover, the very hot temperatures in May had a negative impact on agricultural activities especially on the plateaus and near desert areas; prolonged exposure to high temperatures caused an increase in animal and plant diseases, and heightened mortality rates in livestock, according to the Yemen Agrometeorological update issued by FAO.⁶

CONFLICT

Between April and June 2021, a total of 4,002 fatalities were reported across Yemen due to a total of 1,718 conflict events consisting of: 596 battles; 18 riots; 820 explosions and incidences of remote violence; and 91 actions of violence against civilians.⁷

Displacement is largely driven by the ongoing conflict, the International Office for Migration (IOM) reported that almost 10,000 individuals have been displaced across 13 governorates due to the conflict from March to April 2021. The highest estimated number of Internally Displaced Persons (IDPs) was identified in Ta'iz (more than 5,000 individuals) and in Ma'rib (almost 4,400 individuals).⁸ According to The United Nations High Commissioner for Refugees (UNHCR), the highest monthly mortality rate since 2018 occurred in March 2021 with more than 40 civilians killed due to the high number of conflict incidents (1,040 incidents according to Armed Conflict Location and Event Data Project (ACLED)).⁷

COVID-19 and WASH

Yemen's first COVID-19 case was announced in April 2020. As of June 21st, 2021, there have been 6,885 confirmed cases of COVID-19 with 1,355 deaths in Yemen. WASH interventions play an important role in the COVID-19 response, as hygiene is a key component of infection prevention. According to WASH 4W data,⁹ 9 YWC partners conducted COVID-19 activities across 26 districts in 12 governorates in April-May 2021.

The COVID-19 vaccination campaign in Yemen was put in place by WHO and UNICEF in coordination with the Government of Yemen's Ministry of Public Health and Population in order to respond to the ongoing COVID-19 pandemic. It started on 20 April 2021 in Aden. The campaign covers 133 districts in 13 of Yemen's 22 governorates.¹⁰ In May, the YWC, the Yemen General Union of Sociologists, Social Workers and Psychologists (YGUSSWP), and Camp Coordination and Camp Management (CCCM) teams have distributed hygiene kits in Bani, Al-Etizaz site for 548 households.¹¹

1) OCHA [Humanitarian Needs Overview \(HNO\)](#), 2021 2) WFP [Yemen Emergency Dashboard](#) 3) WFP [Yemen Situation Report](#) May,2021. 4) WFP [Yemen Food Security Update](#) June,2021. 5) YWC, REACH [JMMI Situation Overview](#) May,2021. 6) FAO. "Yemen Agrometeorological Update" June Issue (Ref: #11). 7) ACLED [Dashboard](#). Accessed on July 1, 2021. 8) FEWS NET [Yemen Food Security Outlook Update](#), April 2021. 9) WASH Cluster Partners Presence ([4W Matrix](#)) April - May,2021. 10) OCHA [Yemen Situation Report](#) May,2021. 11) YGUSSWP [Yemen Activities](#), May,2021.



KEY INFORMANT INTERVIEW (n=116): the findings below are based on 116 KIIs conducted across ten districts, in Marib, Taizz, Al Hudayda and Shabwah governorates. Data was collected in April-June 2021 by the Bena Charity for Human Development (BCFHD), For Human Development (FHD), Relief International (RI) and the International Office for Migration (IOM). These findings should be interpreted as indicative of the WASH needs in the district where the interviews were collected.

Water

Proportion of KIIs that reported in the 30 days prior to data collection their community:

Used an improved drinking water source ¹ as their main source	14%
Experienced water quality issues	40%

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

Water is too expensive	74%
Storage containers are too expensive	52%
Waterpoints are too far away	48%
Waterpoints are difficult to reach	40%
Waiting time at water points	39%
Some groups lack access	38%
Fetching water is a dangerous activity	15%
Waterpoint is closed	8%
Other	4%

40% KIIs reported people in the community do not treat their drinking water, for the following reasons:

Due to lack of materials	44%
Because it is not needed	21%
Do not know how to treat water	19%
Because water treatment is not affordable	8%
Because it takes too much time	8%

Sanitation

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

Pit latrine without a slab	59%	
Flush or pour flush toilet	36%	
Open defecation	3%	
Open hole	2%	
Pit VIP toilet	1%	
Refuse to answer	1%	

Proportion of KIIs that reported an estimation of people in the community having access to a functional latrine in the 30 days prior to data collection:

All	12%
Most people	64%
About half	16%
Few	9%
None	1%
Don't know	2%



Proportion of KIIs reported that specific groups (minorities, IDPs, women, etc) faced sanitation access problems in the 30 days prior to data collection²

Women/girls	62%	
People with disabilities	57%	
IDPs	54%	
Elderly people	35%	
Marginalized people (minorities)	14%	
Men/boys	13%	
Other	2%	

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%
Most people	8%
About half	16%
Few	66%
None	10%



1) Defined by the WHO as a source that, is accessible on premises, available when needed and free from faecal and priority chemical contamination.

2) KIIs could select more than one answer

Participating partners:



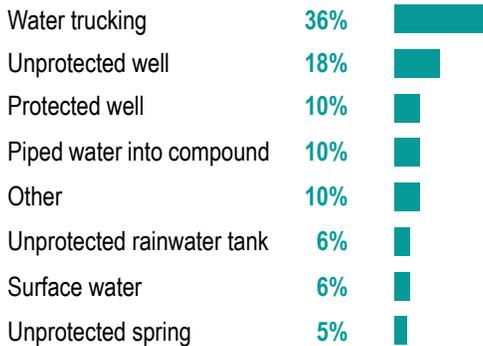
HOUSEHOLDS INTERVIEW (n=757): the findings below are based on 757 household interviews conducted across 12 districts, in Taizz, Al Hudayda and Shabwah governorate. Data was collected in June 2021 by the Bena Charity for Human Development (BCFHD), For Human Development (FHD), Relief International (RI), Première Urgence Internationale and SOUL for Development. These findings should be interpreted as indicative of the WASH needs in the district where the interviews were collected.

Water

Proportion of households that reported in the 30 days prior to data collection their community:

- Used multiple drinking water sources **43%**
- Had enough water for drinking, cooking, bathing and washing **47%**

Proportion of households using each type of main drinking water source:



84% of households reported people in the community do not treat their drinking water, for the following reasons:

- Due to lack of materials **53%**
- Do not know how to treat **18%**
- Because water treatment is not affordable **13%**
- Because it is not needed **9%**
- Because it takes too much time **3%**
- Refuse to answer **2%**
- Other **1%**

Hygiene

Proportion of households using each type of handwashing device:

- Simple basin/bucket, with no tap **46%**
- Sink with tap **17%**
- No device **16%**
- Tippy tap **11%**
- Bucket with tap **7%**
- Other **2%**



79% households had issues accessing soap in the 30 days prior to data collection. Of the households that reported issues, the following issues were reported:

- Soap is too expensive **93%**
- Other **4%**
- The market is difficult to reach/ too far away **3%**

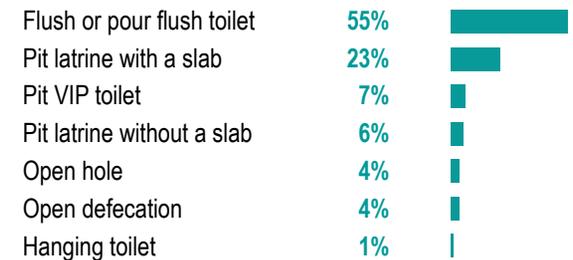


Sanitation

Proportion of households that reported in the 30 days prior to data collection their community:

- Used improved sanitation facilities¹ **85%**
- Share their sanitation facility with at least one other family **18%**

Main sanitation facility type used by households in the community in the 30 days prior to data collection:



1) Defined by the WHO as one that likely hygienically separates human excreta from human contact.

Participating partners:

