



الوصول الإنساني
HUMAN ACCESS

Report of Health Needs Assessment

Al Mudaffar & Al Qahirah Districts of Taiz
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1. Background

Over 21.6 million Yemeni people are in need while they are approaching the tenth year of conflict with the already fragile health system. More than 20M people need health assistance, including 13M with acute needs (United Nations OCHA, HNO, Dec. 2022). Nowadays, Yemen is facing dramatic deterioration in public health and increasing attacks of disease outbreaks such as cholera and measles. From 01 January to 31 August 2023, the Executive Unit for internal displaced persons (IDPs) monitored 5,690 households (31,424 individuals) who were displaced from 20 different governorates and they were distributed among 10 governorates.

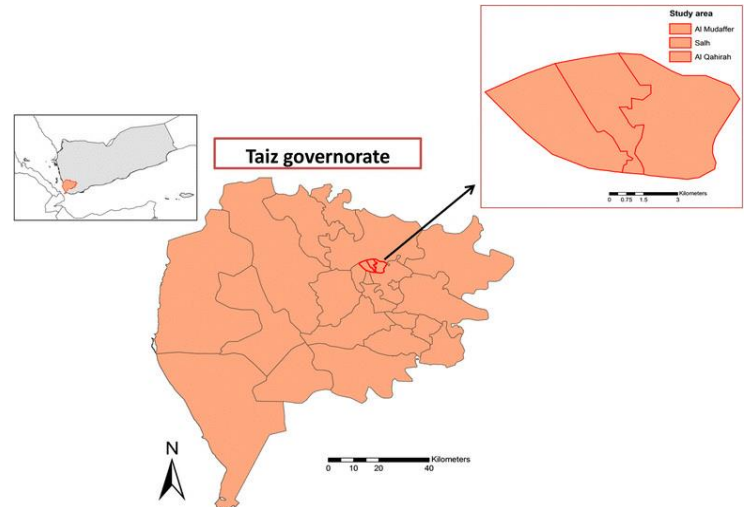


Figure 1: Al Mudaffar & Al Qahirah districts of Taiz governorate.

The health situation in **Al Mudaffar and Al Qahirah** districts of **Taiz** governorate is acutely in need. People in these overcrowded districts are markedly vulnerable due to the high GAM rate: 16.3%, huge numbers of people in need (PiN), particularly pregnant and lactating women (PLW): 66.4K and children under 5 years old: 55.5K (Nutrition Cluster), big number of IDPs: 37,397 individuals, and many groups of marginalized people 239 (Yemen PiN 2023). In addition, the peak of AWD/Cholera wave between W41 & W43 reached 24, 25, 22 cases in AlMudaffar with attack rate 36.81 (eIDeWS). Moreover, the governorate's Mental Health Hospital is located in this district serving ~800 people per month with no support in medicines or operational costs.

The purpose of this needs assessment is to explore the health needs of the IDPs and the host communities in **Al Mudaffar and Al Qahirah** districts (Table 1).

2. Method

The data collected by HUMAN ACCESS health coordinator at the governorate level through interviews with key informants from each targeted district health officer (DHO) in coordination with governorate health officer (GHO) and sub-national health clusters (SNHCs). The tool used in data collection was the Health Cluster's tool of Health Needs Assessment.

3. Findings

- Al Mudaffar district involves a large number of IDPs (20,584) in houses and 22 sites distributed among 12 sub-districts with total population 254,457 individuals.
- Al Qahirah district involves (16,813) IDPs in houses and 14 sites distributed among 10 sub-districts with total population 217,947 individuals.

Table 1: The IDP sites per catchment areas of the targeted HFs.

#	Gov.	District	Sub-District	IDP Site	Targeted HF	HHs	Ind.	IDPs in HF's catchments		
1	Taiz	Al Mudaffar	البعرة	عمائر السلامي	Al Wafa HC	60	225	660		
2	Taiz	Al Mudaffar	البعرة	عمائر خط شارع الاربعة		61	303			
3	Taiz	Al Mudaffar	البعرة	مدرسة علي بن ابي طالب		22	132			
4	Taiz	Al Mudaffar	العقيبات	مكتب النقل	Al Rahma HC	63	437	892		
5	Taiz	Al Mudaffar	الاجينات	عمارة العيساني		25	150			
6	Taiz	Al Mudaffar	المحروقات	تجمع حي الضرية (المحروقات)	Leprosy HC	66	305	279		
7	Taiz	Al Mudaffar	مدينة النور	الجدام	22May HC	46	279	5505		
8	Taiz	Al Mudaffar	المطار القديم	عمائر الحداد		32	180			
9	Taiz	Al Mudaffar	بير باشا	تجمع حي العديني		61	353			
10	Taiz	Al Mudaffar	المطار القديم	عمارة محمد سيف		67	402			
11	Taiz	Al Mudaffar	المطار القديم	موقع حي المناشير		304	2443			
12	Taiz	Al Mudaffar	الظهرة	حي الظهرة		137	876			
13	Taiz	Al Mudaffar	المطار القديم	بئر شعبة		104	624			
14	Taiz	Al Mudaffar	بئر باشا السفلي	موقع مدرسة عائشة (سيبي مول)		33	199			
15	Taiz	Al Mudaffar	المطار القديم	تجمع حي شارع الامام		119	428			
16	Taiz	Al Mudaffar	المناخ	تجمع المناخ (عمارة سيلان والطار)		100	600			
17	Taiz	Al Mudaffar	المناخ	تجمع عمائر محمد الزغروري - المرور		Senah HC	42		126	726
18	Taiz	Al Mudaffar	الاجينات	تجمع حي المسبح (الحمرة)		Al Mudaffar H	33		167	167
19	Taiz	Al Mudaffar	الجراجر	الجراجر - حي الجامعة	Al Loqaiya HC	124	743	1560		
20	Taiz	Al Mudaffar	الدحي	تجمع عمائر محمد عبدالجليل - الدحي		140	817			
21	Taiz	Al Mudaffar	الحصب	موقع كدش		80	560			
22	Taiz	Al Mudaffar	الحصب الاسفل	مخيم الناشري	Mental Health H	43	301	861		
				22		1762	10650	10650		
1	Taiz	Al Qahirah	الجنوبي المسبح	دي لوكس	Al Taawon H	51	175	375		
2	Taiz	Al Qahirah	السلخانة	السلخانة الغربية		50	200			
3	Taiz	Al Qahirah	القبليّة الضبوعة	القبليّة الضبوعة		85	478			
4	Taiz	Al Qahirah	الضبوعة السفلي	حول صدام	Al Wahda HC	108	646	1124		
5	Taiz	Al Qahirah	دار المعلمين	محوى مدرسة الصديق (بنايات عمارة العبد)	22May HC	18	106	240		
6	Taiz	Al Qahirah	دار المعلمين	المعهد العالي		11	49			
7	Taiz	Al Qahirah	دار المعلمين	ادارة امن القاهرة القديم		18	85			
8	Taiz	Al Qahirah	عصيفرة الوسطي	تجمع الواقش		119	457			
9	Taiz	Al Qahirah	الروضة	تجمع عمارة سنترمول	53	290	2614			
10	Taiz	Al Qahirah	الروضة الشماليّة	(عمارة تبة الوكيل + عمارة عبدالجليل)	63	376				
11	Taiz	Al Qahirah	نجد الله اكبر	نجد الله اكبر وحي جامع السعيد	123	718				
12	Taiz	Al Qahirah	الجنيد	تبة نجمي	51	356				
13	Taiz	Al Qahirah	الروضة الشماليّة	7 يوليو	14October HC	77		417		
14	Taiz	Al Qahirah	النقطة الرابع	عمارة السعودي	Swaidi H	52		307	307	
				14		1341	7374	7374		
		2		36		2641	15310	15310		

- The topographic characteristic of the **both districts** is mountain and valley. The roads condition is paved with easy access to all areas.
- There is piped water and piped sewer system in **both districts**. The main sources of water are wells and tanker-truck. However, the public electricity is not available.
- The most common diseases in **both districts** are Acute Malnutrition, Measles, Diarrheal Diseases including Acute Water Diarrhea (AWD), Malaria & Dengue Fever, and Upper Respiratory Tract Infection (URTI).
- In **Al Mudaffar** district, there are **1** Referral Hospital (Mental Health Hospital), **1** District Hospital (DH), **2** Maternal & Child Health (MCH), and **5** Health Centers (HCs) including Leprosy Center. Nevertheless, **Al Qahirah** district involves **3** Referral Hospitals (RH), **4** Maternal & Child Health (MCH), **1** Health Center (Tumors HC), and **1** Health Unit (HU).

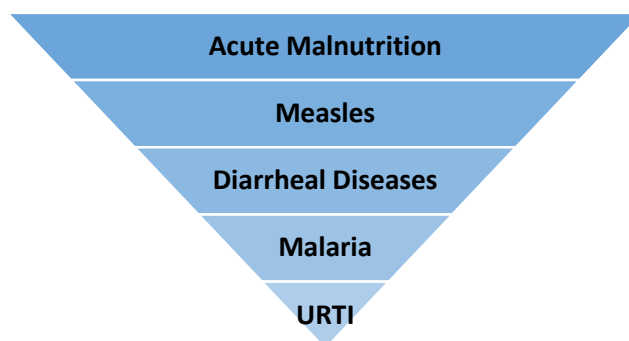


Figure 2: The most common diseases in the district. (URTI: Upper Respiratory Tract Infection)

Table 2: Number and type of public health facilities (HFs) at the district level according to the providing service.

#	Governorate	District	Referral/ General hospital (RH/GH)	District hospital (DH)	Maternal & Child Health (MCH)	Health Center (HC)	Health Unit (HU)
1.	Taiz	Al Mudaffar	1 (Mental H)	1	2	5	0
2.	Taiz	Al Qahirah	3	0	4	1	1
Total			4	4	6	6	1

- In **both districts**, the assessment finds that the incentives for Health Care Workers (HCWs), medicines, supplies, and operational costs are most commonly provided by non-governmental organizations (NGOs) when they are supporting the HFs.
- The most important **constraints** noted in these districts are:
 - The scarcity of pharmaceutical supplies and the lack of sufficient operational budgets enable us to provide the service to the fullest extent, and this is reflected in the level and quality of medical services provided in health facilities.
 - Leakage of HCWs from public HFs to private ones and outside the governorate in search of a better income.
 - The lack of financial allocated for rehabilitation and training of human cadres.

4. Recommendations

- Provide operational support for the HFs, essential medicines, and supplies including IPC/PPE materials to enhance health system in response to outbreaks.
- Pay allowances for HCWs and ensure providing quality health care services covering the huge demand in the district that receiving Large numbers of IDPs.
- Refresh training for HCWs on Case Management, Outbreak Combat, and Infection Prevention & Control (IPC) to contribute in strengthening health system.
- Enhance the resilience among the local community and IDPs in Marib through conducting capacity and skill development for women and men community health volunteers to lead a social behavior change and promote health and hygiene between their people and communities.

5. Appendices

- Data Collection tool: Health Needs Assessment Tool of National Health Cluster (NHC).
- Coordination letter of GHO.

6. Data Availability

- eIDEWS: [Microsoft Power BI](#)
- Nutrition Cluster HNO, HRP Dashboard: [Microsoft Power BI](#)
- Data available on request from HUMAN ACCESS

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