

Report of

Community Need Assessment

Marib City and Marib Wadi Districts of Marib
October 2024

Conducted by

PHC Program - Health Sector

Human Access for Development Partnership

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1. Introduction & Background

Yemeni people are exceeding the tenth year of conflict and the already fragile health system is still in need. In 2024, approximately 17.8 million individuals in Yemen will require health assistance, including 3.2 million IDPs. Yemen has the double burden of disease and armed conflict. The most vulnerable groups include IDPs, children, women, the elderly, individuals with disabilities and mental health conditions, marginalized communities, and those affected by conflict-related injuries.

The purpose of this need assessment is to explore the situation of returnees, internal displaced persons (IDPs), and the host communities in 15 sub-districts of highly affected five districts (*Table 1*).

2. Methods

The data collected by HUMAN ACCESS health coordinators at the governorate level through interviews with key informants from each targeted district or sub-district in coordination with district health officers (DHOs), the Executive Unit for IDPs Camps Management (Ex.U.IDPs), and sub-national health clusters (SNHCs). The tool used in data collection was the Health Cluster's tool of Community Assessment.

The main strengths of the process were the active participation of the key informants and the accessibility to the targeted communities. However, the poor archival data sources were a limitation that should be aware of as read and interpret the key findings. This process was led by Dr. Abdullah Khaled, PHC Program Manager at HUMAN ACCESS. The data was collected over two days by Dr. Mohammed Fuad, Taiz Health Coordinator at HUMAN ACCESS, and Dr. Abdulkareem Mahmood, Marib Health Coordinator at HUMAN ACCESS.

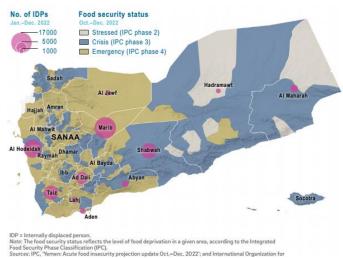


Figure 1: IDPs and food insecurity in Yemen. The figure shows high numbers of newly IDPs and emergency food insecurity in Al Hodeidah, Marib and Taiz. Source: Climate, Climate, Peace and Security Fact Sheet; by the Norwegian Institute of International Affairs (NUPI) and the Stockholm International Peace Research Institute (SIPRI), Jun.2023.



Figure 2: Al Sumaya' IDP Camp in Al Noqaia' sub-district, Marib (wadi), Marib. Source: HUMAN ACCESS, Sep.2023.

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Governorat	:e	District	Sub-District	Areas
		Marib	Al-Naqi'a (Ben Mo'aili)	8
Marib		(Wadi)	Al-Jathwah	8
IVIALID		Marib City	Al-Khusaif	8
Total	5	15		46

3. Key Findings

- The study finds a high poverty level for the majority of the population in all areas of the targeted districts, particularly among IDPs and returnees.
- There are no returnees in Marib governorate but the large numbers of IDPs especially in Al Noqaia', Al Jathwah, and Al Khosaif sub-districts.
- Almost all targeted districts produce agricultural products such as fruits.
- Conversely, commercial activities are the main sources of income for the majority of the host community in the urban areas of targeted districts such as Marib city.
- Nevertheless, the IDPs in the camps depend more on daily wage work or food distributed by humanitarian non-governmental organizations (NGOs).
- As the Marib governorate's weather is very cold in winter, the IDPs in camps need heavy clothes and blankets. Almost all IDP sites need to renew their

- shelter annually as they are living in tents or temporary shelters.
- The risk of floods is high, caused by the rainy season from July to November, and definitely become more frequent as a result of climate change.
- Water sources vary in the areas covered by the assessment, including piped water, water pumps, wells. Cholera is endemic due to the incomplete infrastructure, including sanitation.
- The hard-to-reach areas and IDP sites are in Marib (Wadi) district, where people take around 1 hour to reach the nearest health facility and 2 hours to the referral hospital by the most common transportation through unstable roads.
- HUMAN ACCESS was implementing health activities by YHF in Marib (Wadi) district in six health facilities, including Al-Sumaiya health unit that installed by WHO/HUMAN ACCESS in 2022. However, the activities ended by September 2024. The need is urgent to continue funding health intervention. (*Table 2*).

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

#	Governorate	District	Referral hospital (RH)	District hospitals (DHs)	Maternal & Child Health (MCH)	Health Centers (HCs)	Health Units (HUs)
1.	Marib	Marib (Wadi)	- 1	3	1	2	1
2.	2.	Marib City		1	1	1	0
	Total		1	4	2	3	1

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4. Recommendations

- Provide operational support for the HFs and allowances for HCWs in order to enhance the health system to provide quality primary health care (PHC) services covering the huge demand in the districts receiving large numbers of IDPs (e.g. Al-Khusaif HC in Marib City and Al-Sumaiya' HU in Marib Wadi) and returnees (e.g. Salah and Al-Wazi'yah HFs).
 - The gap of need in detail is updated by Health Cluster.
- Operate mobile medical teams to out-reach the IDP sites (e.g. Marib) and the hard-to-reach areas (Al Wazi'yah and Mawza' district) increasing the PHC utilization and enhancing health education.
- Rehabilitate the non-functional secure HFs to strengthen the fragile health system in recently stabilized areas of Al Wazi'yah and Mawza' districts.
- Enhance the resilience among the local community, returnees, and IDPs in Taiz and Marib through conducting capacity and skill development for women and men to lead a social behavior change and promote health and hygiene between their people and communities.
- Furnishing, equipment, and operating the new HC in Salah after finishing the ongoing construction works.
- Contribute to rehabilitating of sanitation system in Salah district to treat the root causes of epidemics (e.g. Malaria, Dengue, and cholera).



Figure 3: Al-Sumayia HU by WHO/HUMAN ACCESS providing PHC services in Al-Sumayia IDP camp, Marib (Wadi) district, Marib. Source: HUMAN ACCESS, Jun.2023.

 Incorporate protection principles and promote meaningful access, safety, and dignity in humanitarian aid through Protection Mainstreaming.

5. Data Availability

Data available on request from HUMAN ACCESS.

Contacts:

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