



UNHCR/Y.Arhab

**MULTI-CLUSTER NEEDS ASSESSMENT OF IDPS,  
RETURNEES AND HOST COMMUNITIES IN YEMEN  
TASK FORCE ON POPULATION MOVEMENT (TFPM)**

February 2017

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International Organization for Migration (IOM)

The UN Migration Agency



**UNHCR**  
The UN Refugee Agency

# TABLE OF CONTENTS

KEY FINDINGS .....	4
METHODOLOGY .....	7
Coverage .....	8
Demographic Profile .....	8
Sex & Age Disaggregated Data (SADD) .....	9
DISPLACEMENT DYNAMICS .....	9
Reasons for displacement .....	9
Multiple Displacement .....	10
Intentions .....	10
Main factors influencing long term intentions .....	12
PRIORITY NEEDS .....	13
Food .....	13
Nutrition .....	15
Health .....	17
Shelter .....	19
NFIs .....	22
WASH .....	24
Livelihoods .....	26
Education .....	32
Protection .....	34
Child Protection .....	36
Field Observations .....	38
Vulnerability & Humanitarian Assistance Indices .....	40
HUMANITARIAN ASSISTANCE .....	41
TFPM SERVICES AND CONTACTS .....	46

## KEY FINDINGS

### Displacement Dynamics

- 'Generalised violence and armed conflict (no direct personal threat/attack)' (41%) was reported by key informants as the main reason for displacement in identified IDP locations.
- In identified returnee locations, lack of access to sustainable income (46%) and lack of access to basic services (28%) in the place of displacement were reported by key informants as the main push factors for return. On the other hand, improved security (30%), lower housing/rent costs (25%) and intent to re-join family members (17%) were reported as the top pull factors for return.
- With respect to long term intentions (beyond the next 3 months), 81% of key informants reported that IDPs intend to return to their place of origin.

### Food

- Within identified IDP locations, key informants stated that the top three problems associated with access to food among IDPs and host communities were: price was too expensive (44% for IDPs, 45% for host community), distance i.e. too far or difficult to access by road (22% for IDPs, 23% for host community), and quantity i.e. insufficient or inconsistent supply in the markets (17% for both IDPs and host community).
- By comparison, among identified returnee locations, key informants specified that the top three problems associated with access to food among returnees and host communities were: price was too expensive (54% for returnees and host community), quantity i.e. insufficient or inconsistent supply in the markets (15% for returnees and host community), and quality i.e. not fresh or poor quality (11% for returnees, 12% for host community).

### Nutrition

- In identified IDP locations, 78% of key informants confirmed the presence of children in the community who were becoming sick/thin, or had swelling in their feet due to lack of sufficient food to eat; while 79% confirmed the presence of mothers in the community who were becoming sick because they did not have enough food to eat.
- By comparison, in identified returnee locations, 69% of key informants confirmed the presence of children in the community who were becoming sick/thin, or had swelling in their feet due to insufficient food to eat; while 69% confirmed the presence of mothers in the community who were becoming sick due to insufficient food.

### Health

- Malnutrition, diarrheal diseases and malaria were reported in identified IDP locations as the most commonly suffered illnesses among IDPs. In the same locations, the top three types of health facilities that currently exist were reported as: no health facilities exist (30%), health unit (27%) and private clinic (16%).
- Diarrheal diseases, malnutrition and acute respiratory infections were reported as the most commonly suffered illnesses among returnees. In the same returnee locations, the top three types of health facilities that currently exist were reported as: no health facilities exist (22%), private clinic (22%) and hospital (16%).

### Shelter

- The top three shelter problems faced by IDPs in identified locations included: overcrowding (31%), inability to afford rent (17%) and materials to build or undertake repairs to homes were too expensive (14%).

- The top three shelter needs of IDPs in identified locations were: temporary shelter solutions such as family tents (23%), shelter materials (22%) and rental subsidies (16%).
- The top three shelter problems faced by returnees in identified locations included: homes were damaged but still habitable (26%), materials to build or undertake repairs were too expensive (17%), inability to afford rent (16%) and overcrowding (14%).
- The top three shelter needs of returnees in identified locations were: shelter materials - emergency shelter kits (24%), rental subsidies (22%) and winterization materials (21%).
- Returnees also face problems with accessing household items/NFIs in these locations, including: price i.e. they cannot afford household items (54%), poor quality items (17%), and quality i.e. distance i.e. distribution sites/shops are too far and difficult to access by road (10%).

## WASH

- Among identified IDP locations, key informants indicated that just 47% of IDPs and 50% of the host community had access to at least 15 litres/day of potable water. Meanwhile, key informants stated that only 67% of IDPs and 71% of the host community had access to sanitation facilities (toilets and showers).
- In the identified returnee locations, key informants specified that just 55% of returnees and 54% of non-displaced community members had access to at least 15 litres/day of potable water. With respect to access to sanitation facilities (toilets and showers), key informants indicated that 82% of returnees and 84% of the non-displaced community members enjoyed access to sanitation facilities.

## NFIs

- Within identified IDP locations, key informants stated that the top three NFI priority needs among IDP men were: blankets (23%), mattresses (18%) and clothes/bedding (both at 11%); whereas among IDP women the top three NFI priority needs were: kitchen sets (22%), blankets (14%) and clothes (13%).
- IDPs face the following problems with accessing household items/NFIs in these locations: price i.e. they cannot afford household items (46%), distance i.e. distribution sites/shops are too far and difficult to access by road (20%).
- Turning to identified returnee locations, key informants stated that the top three NFI priority needs among returnee men were: blankets (20%), fuel (15%) and bedding equipment/mattresses (both at 11%); whereas among returnee women the top three NFI priority needs were: kitchen sets (24%), blankets (13%) and jerry cans (11%).

## Livelihoods

- In identified IDP locations, key informants also revealed that the top three crisis-related factors affecting IDP and host community livelihoods were: security situation / safety (28% for IDPs, 31% for host community); increase in prices of productive resources (26% for IDPs, 24% for host community); and destruction of essential infrastructure i.e. irrigation, roads, utilities (11% for IDPs, 10% for host communities).
- The same pattern was observed in identified returnee locations where key informants stated that the top three

crisis-related factors affecting livelihoods of returnee and non-displaced community members were: security situation / safety (32% for returnees, 33% for non-displaced community members); increase in prices of productive resources (24% for returnees, 25% for non-displaced community members); and destruction of essential infrastructure i.e. irrigation, roads, utilities (11% for returnees, 10% for non-displaced community members).

## Education

- In identified IDP locations, 64% of key informants indicated that school aged boys (i.e. 6 to 17 years old) attend school on a regular basis, while just 54% stated that school aged girls regularly attend school.
- In identified returnee locations, the gender disparity was not as wide, as 60% of key informants indicated that school aged boys (i.e. 6 to 17 years old) regularly attend school, while 54% stated that school aged girls do so.

## Protection

- Among IDP locations surveyed, key informants reported the presence of significant numbers of IDP and host community members with specific vulnerabilities.
- In surveyed returnee locations, key informants also reported the presence of returnees and non-displaced community members with specific vulnerabilities, albeit in smaller numbers.

## Child Protection

- The top three harmful practices reported by key informants in IDP locations were: child labour (35%); child marriage (9%); and female genital mutilation (4%).
- The top three harmful practices reported by key informants in returnee locations were: child labour (51%); child marriage (5%); and female genital mutilation (3%).

# METHODOLOGY

From August to September 2016, in coordination with OCHA and the Inter-Cluster Coordination Mechanism (ICCM), the Taskforce on Population Movement (TFPM) implemented a multi-cluster location assessment to gather more in-depth data on the IDP, returnee and host populations. The multi-cluster location assessment supplements the regular Area Assessments conducted by the TFPM – published roughly every two months – which gather and publish indicative data on displacement/return figures across Yemen, areas of origin, duration of displacement, shelter types and top priority needs.

The multi-cluster location assessment was jointly conducted by IOM and UNHCR in 3,292 locations hosting IDPs and/or returnees, covering all 22 governorates in Yemen. Key informants in each location were interviewed. In addition, the multi-cluster location assessment was used to collect data about the host community in areas of displacement, and the non-displaced community in return areas, to provide further insight about their needs. The selection of locations to assess was devised from the baseline of IDP and returnee populated locations published in the 10th TFPM report. The coverage encompassed the top 20% most populated locations with IDPs and returnees in each governorate. The sampling plan was based on The Pareto Principle – 80% of the effects (needs) come from 20% of the causes (locations).

In consultation with Clusters and OCHA, two assessment tools were developed, one for IDPs with host community aspects, and the other for returnees with non-displaced community aspects. The multi-cluster location assessment data was collected through physical visits to identified locations by existing TFPM field teams, where the key informants representing the community were interviewed. If a location was not accessible for any reason then it was noted and excluded from the sample. The next most populous location was then added to the sample.

The information captured through the regular Area Assessments, in addition to this multi-cluster location assessment, was already shared with Clusters in September

2016 and provided datasets for the Humanitarian Needs Overview (HNO) for 2017, supporting both the cluster-specific needs analyses and needs severity scoring at the district level, as well as the determination of Population in Need (PIN), which translated into a strengthened evidence-base for the Yemen Humanitarian Response Plan (YHRP) 2017. Overall, through this data collection and analysis, UN agencies, I/NGOs, donors, and other stakeholders gained access to a greater breadth and depth of information that was utilized to inform needs and gap analysis, humanitarian response planning and targeted interventions in Yemen.

As a key informant based approach the information collected for analysis in this report provides indicative data on IDP, host community, returnee and non-displaced community needs in the locations surveyed. The multi-cluster location assessment is not a household level survey or infrastructure/service assessment, although it strives to provide baselines to inform where further data collection and analysis is required. Further assessments are required for valid and reliable data to be used for statistical analysis.

## COVERAGE

The top 20% most populated locations with IDPs and returnees – which were derived from the 10th TFPM area assessment report<sup>1</sup> – corresponds with 1,049,286 IDPs over 2,978 locations and 682,422 returnees across 314 locations in all 22 governorates. All in all, 250 out of 333 districts in Yemen with IDPs and/or returnees were covered in the location assessment. The districts that were not covered did not fall within the selected sample, which was derived from the 10th TFPM area assessment.

Hajjah, Sana'a, Amran, Al Hudaydah and Dhamar governorates had the highest number of locations assessed. While Abyan, Hadramaut, Aden, Al Maharah and Socotra had the lowest number of locations assessed.

### IDPs

#### Key Figures

- 1,049,286 IDP population sample
- 6,791,862 host community sample
- 2,978 locations surveyed
- 6 average household

### Returnees

#### Key Figures

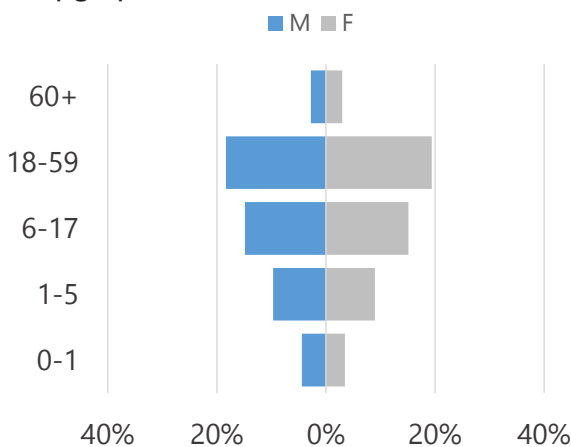
- 682,422 Return population
- 1,309,170 non-displaced
- 314 locations surveyed
- 6 average household size

## DEMOGRAPHIC PROFILE

For every location that was assessed, 20 IDP/returnee households were randomly selected to generate demographic profile. The total number of household members was recorded as well as the age range and sex that each household member belonged to. Data on the age distribution was grouped into five age categories (0, 1-5, 6-17, 18-59, 60+) under each gender.

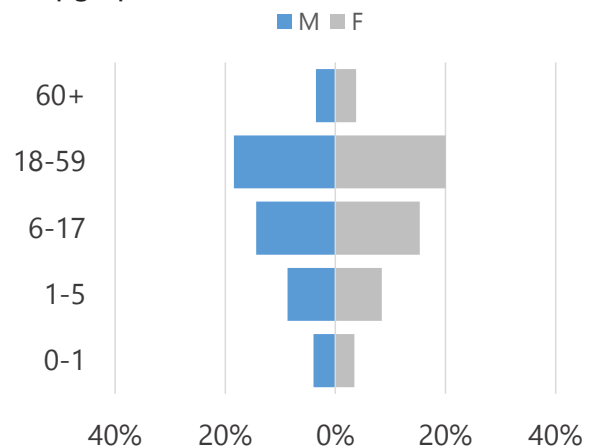
### IDPs

#### Demographic breakdown



### Returnees

#### Demographic breakdown



<sup>1</sup> 10th TFPM Report – July – [Link](#)



## SEX AND AGE DISAGGREGATED DATA (SADD)

Sex ratios indicate the ratios between females and males i.e. the number of females for every 100 males. The sex ratio of the Yemeni population - according to the Central Statistics Office (CSO) – is 0.94, or 94 women per 100 men. The location assessment shows a ratio of 1.06 for IDPs and returnees combined, indicating the number of women slightly edges that of men nationwide.

National Average	Men	Women	Boys	Girls
General population	%25	%29	%22	%23
IDPs and returnees	%21	%22	%29	%27

Table 1: CSO and location assessment national SADD averages

As illustrated in Table 1 above, the percentage of boys and girls in IDP/returnee populations is higher than that of the general population while the reverse is true for the men and women population in displaced/returnee situations.

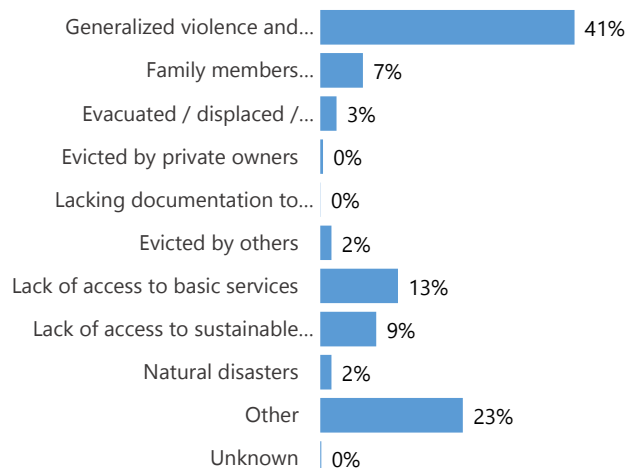
## DISPLACEMENT DYNAMICS

### REASONS FOR DISPLACEMENT

**IDP Locations** – ‘Generalised violence and armed conflict (no direct personal threat/attack)’ (41%) was reported by key informants as the main reason for displacement in identified IDP locations. In other IDP locations, lack of access to basic services (13%), lack of access to sustainable income (9%), family members attacked/killed in generalised violence (7%), evacuated/displaced/relocated by authorities for their own protection (3%), evicted by others (2%) and natural disasters (2%) were reported as the main reason for displacement.

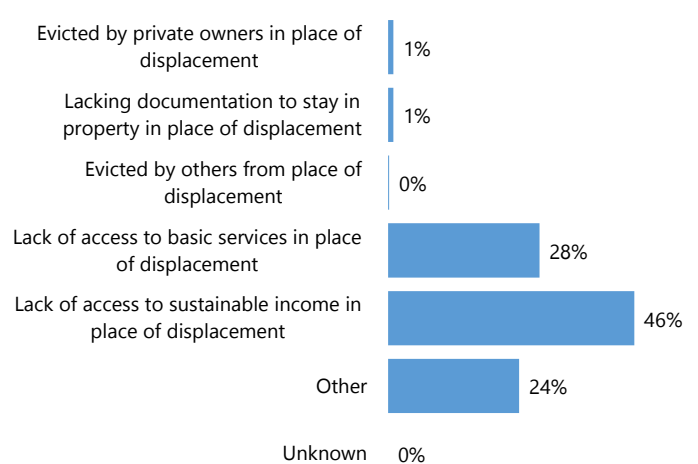
#### IDPs

##### Main Reasons for Displacement



#### Returnees

##### Main Reasons (push factors) for Return



**Returnee Locations** - In identified returnee locations, lack of access to sustainable income (46%) and lack of access to basic services (28%) in the place of displacement were reported by key informants as the main push factors for return. On the other hand, improved security in place of origin (30%), lower housing/rent costs in area of origin (25%) and intent to re-join family members in place of origin (17%) were reported as the top pull factors for return.

**Multiple displacement**

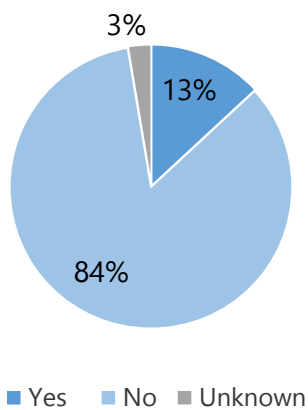
Among identified IDP locations, 13% of key informants stated that the majority of IDPs had experienced multiple displacements since March 2015 prior to their arrival at the current location; whereas among identified returnee locations, 23% stated that the majority of returnees had experienced multiple displacements since March 2015 prior to their return to the current location.

**MULTIPLE DISPLACEMENT**

Among identified IDP locations, 13% of key informants stated that the majority of IDPs had experienced multiple displacements since March 2015 prior to their arrival at the current location; whereas among identified returnee locations, 23% stated that the majority of returnees had experienced multiple displacements since March 2015 prior to their return to the current location.

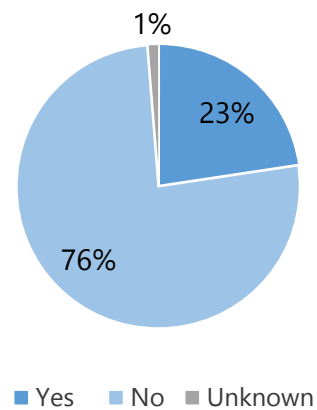
**IDPs**

Multiple Displacements



**Returnees**

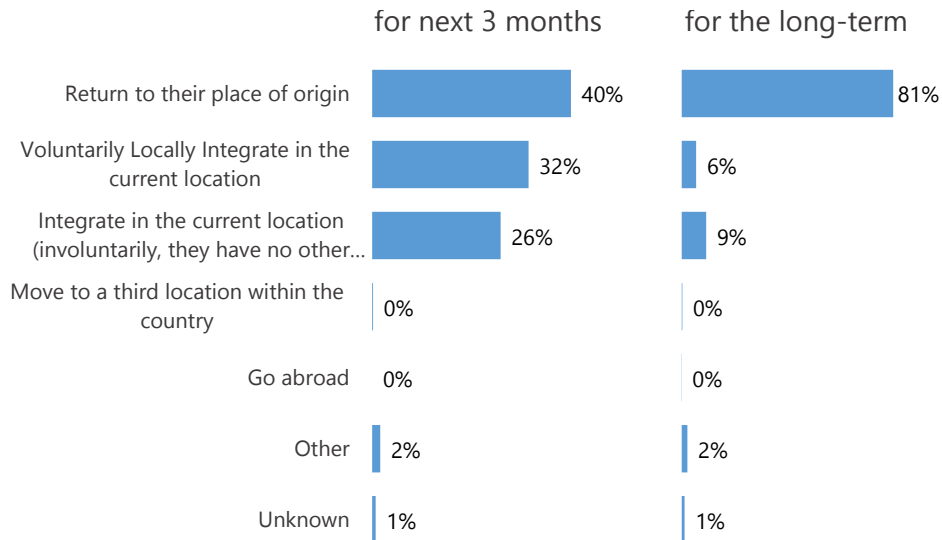
Multiple Displacements



**INTENTIONS**

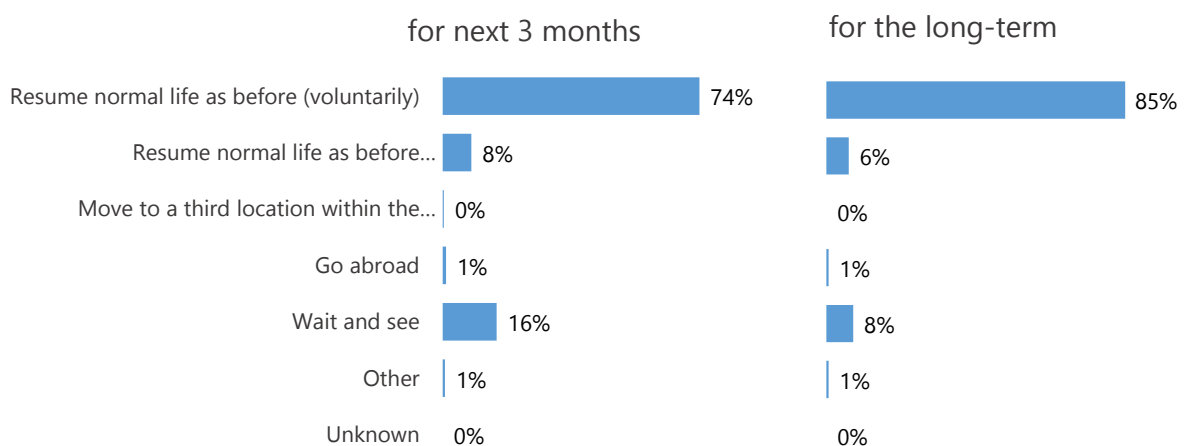
**IDP Locations** - With respect to short term intentions (within the next 3 months) in identified IDP locations, 40% of key informants stated that the majority of IDPs intend to return to their place of origin, 32% stated that IDPs intend to voluntarily locally integrate in the current location, and 26% stated that they intend to integrate in the current location involuntarily as they have no other choices. On the other hand, regarding long term intentions (beyond the next 3 months), 81% of key informants reported that IDPs intend to return to their place of origin, while just 6% stated that IDPs intend to voluntarily locally integrate in the current location, and 9% stated that IDPs intend to integrate in the current location involuntarily as they have no other choices.

## IDPs Intentions



**Returnee Locations** - By way of contrast, in identified returnee locations, key informants indicated that the short and long term intentions of the majority of returnees were remarkably similar: 74% (short-term) and 85% (long-term) intend to resume normal life as before (voluntarily); meanwhile 16% (short-term) and 8% (long-term) intend to wait and see what the future holds.

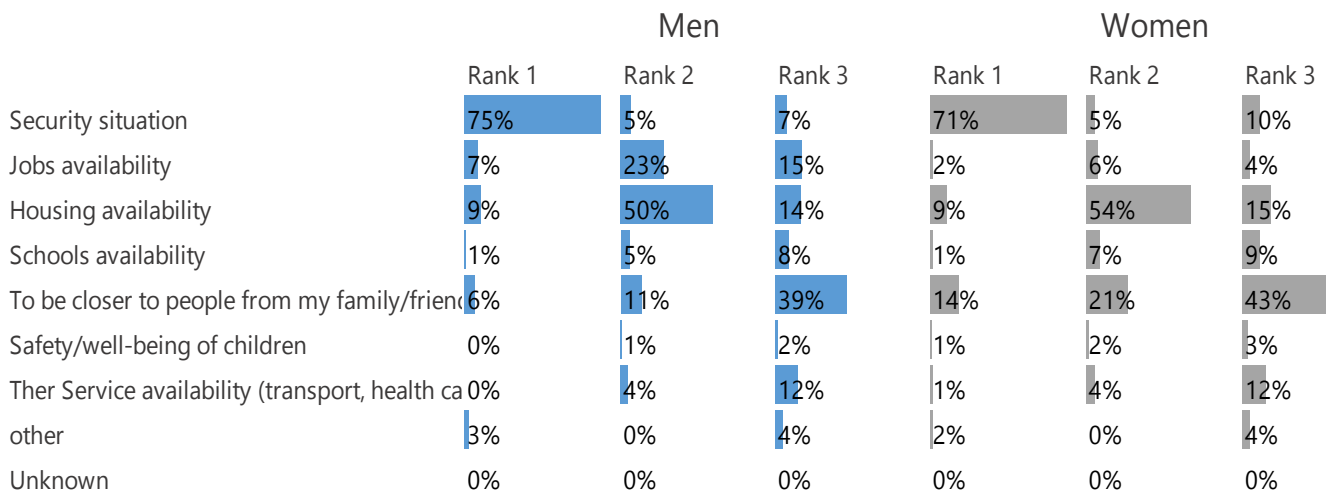
## Returnees Intentions



## MAIN FACTORS INFLUENCING LONG TERM INTENTIONS

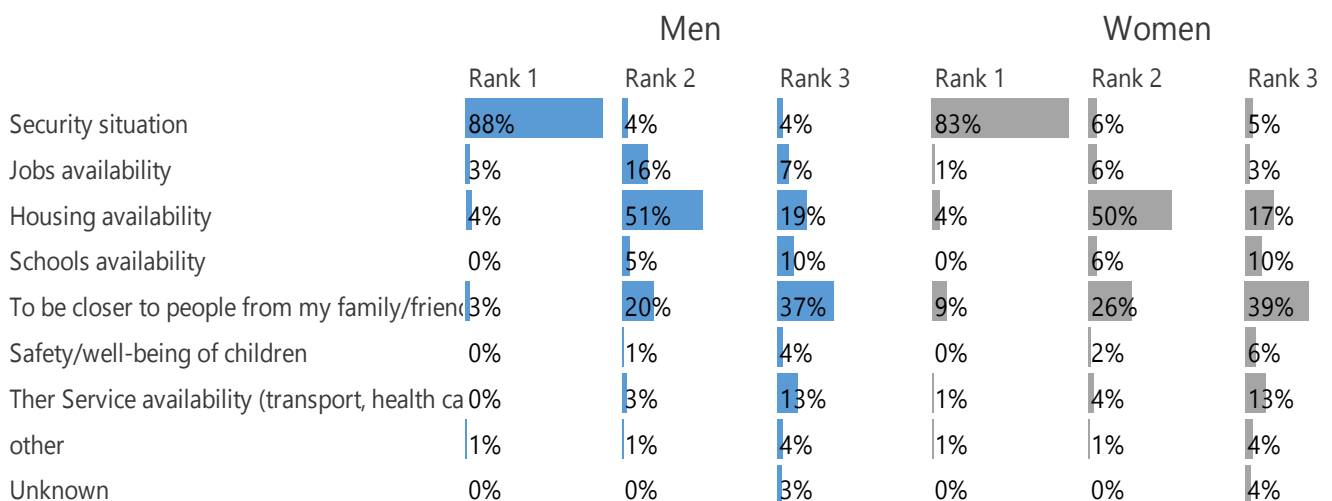
**IDP Locations** - There were no major differences in the way key informants ranked the main factors influencing the long term intentions of IDP and returnee men and women. In identified IDP locations, the security situation (88% men; 83% women), housing availability (51% men; 50% women) and the desire to be closer to family/friends (37% men; 39% women) were cited as the main considerations.

### Main considerations or factors influencing the long term intention:



**Returnee Locations** - Similarly, in identified returnee locations, the same three factors were ranked in the same order as the main consideration for both genders: security situation first (75% men; 71% women), housing availability second (50% men; 54% women) and proximity to family/friends third (39% men; 43% women).

### Main considerations or factors influencing the long term intention:



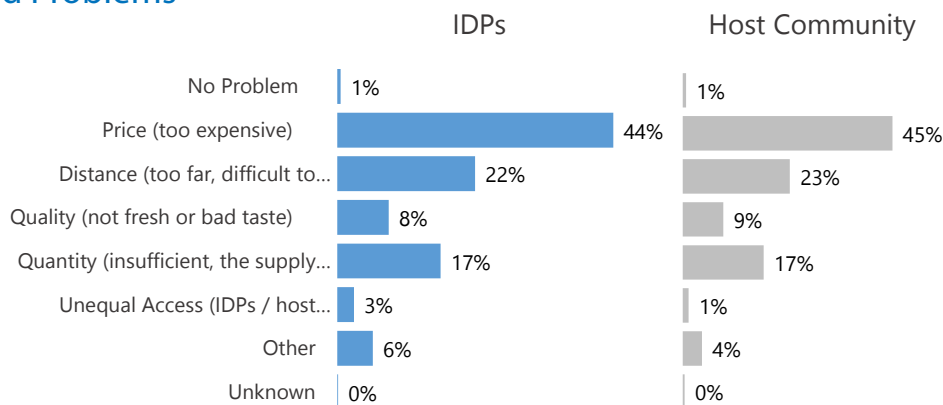
## PRIORITY NEEDS

Key informants ranked food as the most reported priority need by all population groups (IDPs, host community, returnees and non-displaced community). Meanwhile shelter/housing and financial support were ranked as the second and third most reported priority needs among IDPs; whereas among the host community in the same locations food and health/medical support/assistance were ranked as the second and third most reported priority needs. By way of contrast, access to income and financial support were ranked as the second and third most reported priority needs among returnees and non-displaced individuals residing in the same locations.

### FOOD

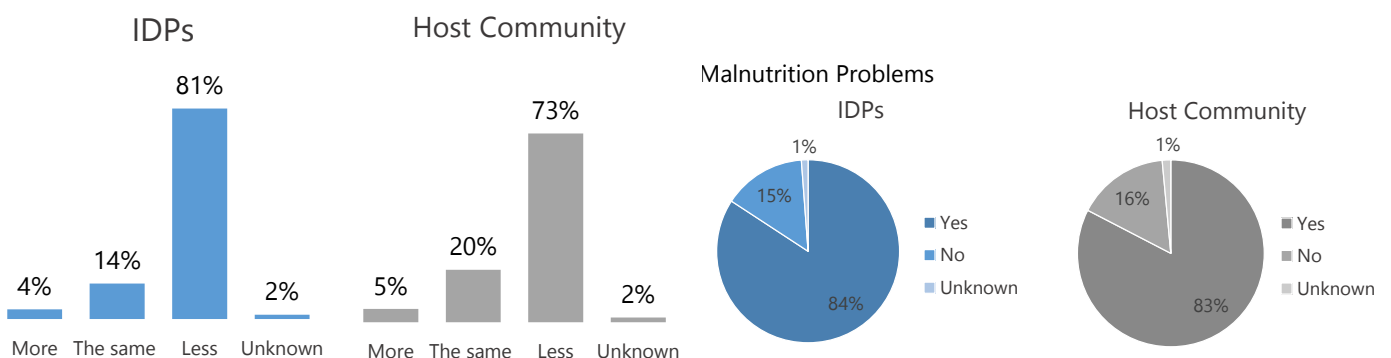
**IDP Locations** - Within identified IDP locations, key informants stated that the top three problems associated with access to food among IDPs and host communities were: price was too expensive (44% for IDPs, 45% for host communities), distance i.e. too far or difficult to access by road (22% for IDPs, 23% for host communities), and quantity i.e. insufficient or inconsistent supply in the markets (17% for IDPs and host communities).

### Access to Food Problems



Significantly, when asked whether the number of meals or quantity of food eaten per household since the end of March 2015 had changed, 81% of IDP locations and 73% of host community locations indicated that it had decreased. In addition, a serious problem of malnutrition was reported in 84% of IDP locations, and 83% of host community locations.

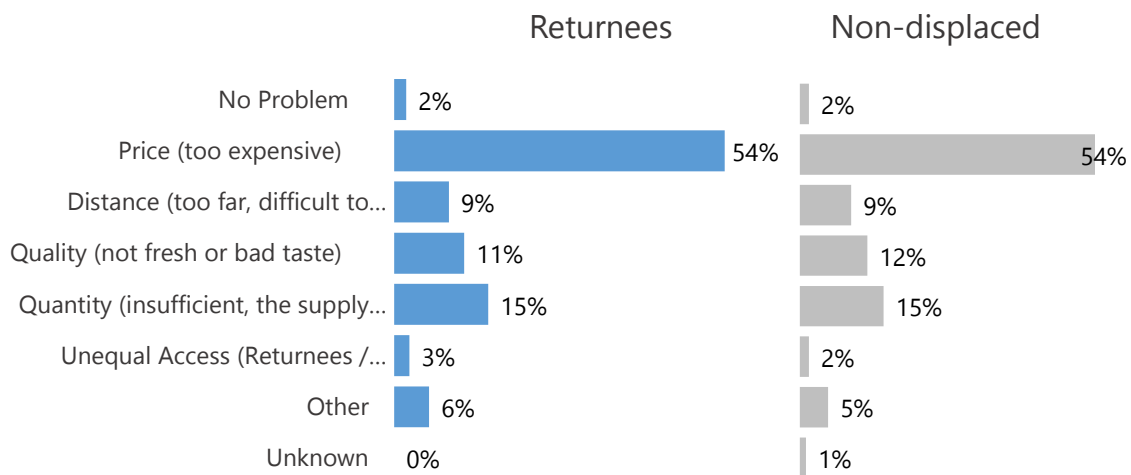
### Meals/Quantity of Food (per household)



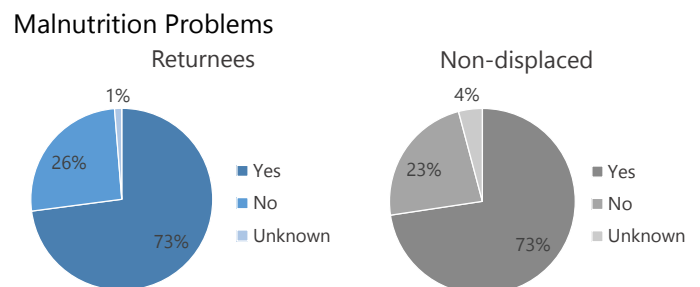
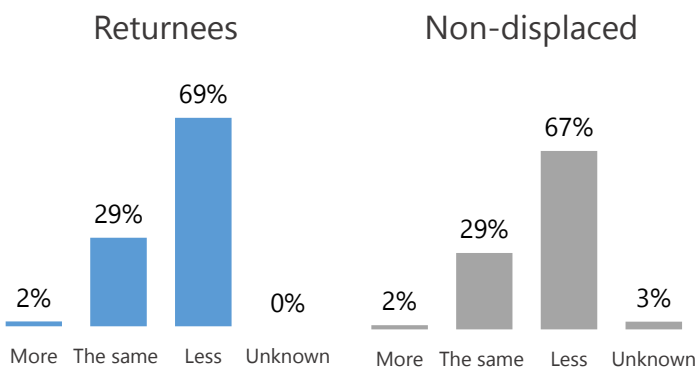
**Returnee Locations** - By comparison, among identified returnee locations, key informants specified that the top three problems associated with access to food among returnees and non-displaced community members were: price was too expensive (54% for returnees and non-displaced community members), quantity i.e. insufficient or inconsistent supply in the markets (15% for returnees and non-displaced community members), and quality i.e. not fresh or bad taste (11% for returnees, 12% for non-displaced community members).

Notably, when asked whether the number of meals or quantity of food eaten per household since the end of March 2015 had changed, 69% of key informants in returnee locations and 67% in non-displaced locations indicated that it had decreased. Moreover, a serious problem of malnutrition was reported in 73% of returnee and non-displaced locations.

**Access to Food Problems**



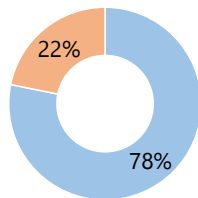
**Meals/Quantity of Food (per household)**



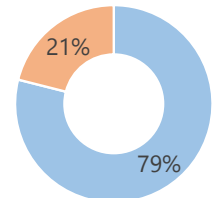
## NUTRITION

**IDP Locations** - In identified IDP locations, 78% of key informants confirmed the presence of children in the community who were becoming sick/thin, or had swelling at their feet due to lack of sufficient food to eat; while 79% confirmed the presence of mothers in the community who were becoming sick because they did not have enough food to eat.

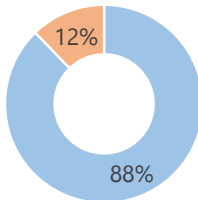
**Children becoming sick, thin because of lack of enough food**



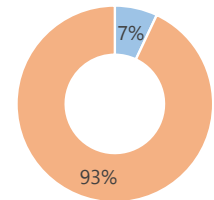
**Mothers becoming sick because of lack of enough food**



**Problems in feeding children <5, Pregnant/Lactating women**

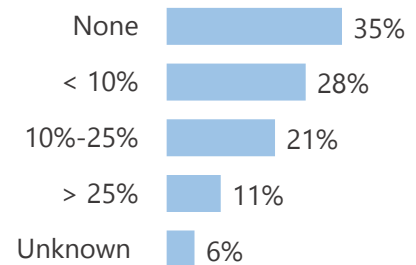


**Infant milk products and / or baby bottles/ teats been distributed**



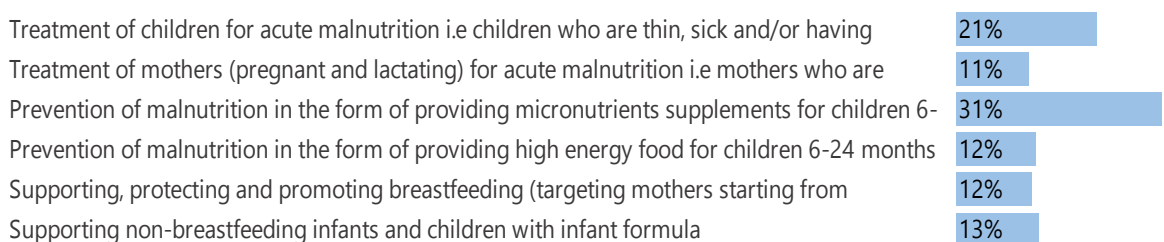
In the same IDP locations, 88% of key informants reported that there had been problems in 'feeding children under 5 and pregnant/lactating women since their arrival in the locations'; while just 7% confirmed that infant milk products (e.g. infant formula/milk) and/or baby bottles/teats had been distributed in the community. At the same time, 35% of key informants in IDP locations reported that no infants were formula-fed/-dependent, while 28% stated that less than 10% were formula-fed/-dependent, and a further 21% indicated that 10 - 25% of infants were formula fed/dependent.

**Percent of infants formula fed/formula dependent**



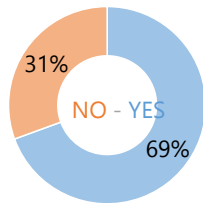
Lastly, key informants in IDP locations specified that the top three most urgent nutrition-related needs in the community were: prevention of malnutrition in the form of providing micronutrient supplement for children (31%); treatment of children for acute malnutrition i.e. children who are thin, sick and/or having swollen feet (21%); and supporting non-breastfeeding infants and children with infant formula (13%).

### Most Urgently needed in terms nutrition in the community

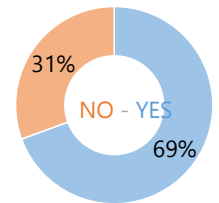


**Returnee Locations** - By comparison, in identified returnee locations, 69% of key informants confirmed the presence of children in the community who were becoming sick/thin, or had swelling at their feet due to insufficient food to eat; while 69% confirmed the presence of mothers in the community who were becoming sick due to insufficient food.

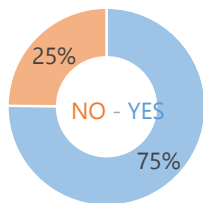
**Children becoming sick, thin because of lack of enough food**



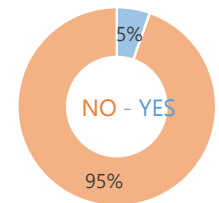
**Mothers becoming sick because of lack of enough food**



**Problems in feeding children <5, Pregnant/ Lactating women**

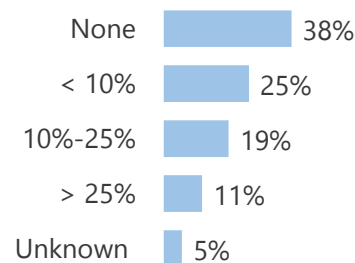


**Infant milk products and / or baby bottles/ teats been distributed**



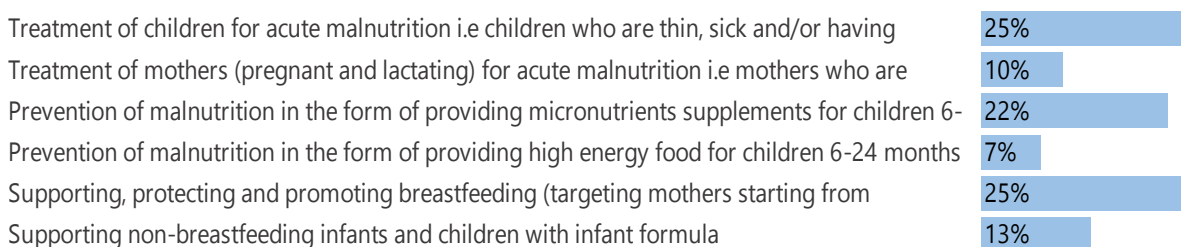
In the same returnee locations, 75% of key informants reported that there had been problems in 'feeding children under 5 and pregnant/lactating women since their arrival in the locations'; while a mere 5% confirmed that infant milk products and/or baby bottles/teats had been distributed in the community. Meanwhile, 38% of key informants in returnee locations reported that no infants were formula-fed/-dependent, while 25% stated that less than 10% were formula-fed/-dependent, and a further 19% indicated that 10 - 25% of infants were formula-fed/-dependent.

**Percent of infants formula fed/formula dependent**



Finally, key informants in returnee locations specified that the top three most urgent nutrition-related needs in the community were: treatment of children for acute malnutrition i.e. children who are thin, sick and/or having swollen feet (25%); supporting, protecting and promoting breastfeeding, targeting mothers starting from pregnancy till the child is 2 years old (25%); and prevention of malnutrition in the form of providing micronutrient supplement for children (22%).

**Most Urgently needed in terms nutrition in the community**

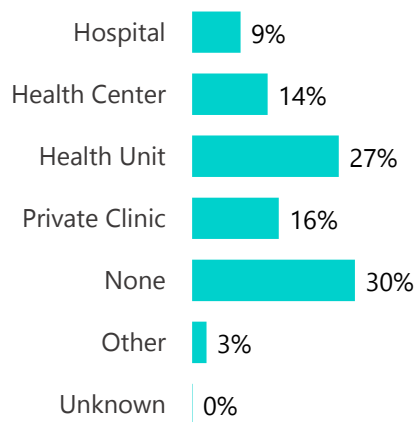




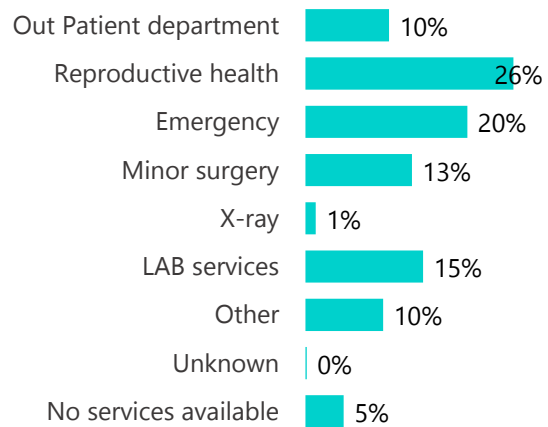
## HEALTH

**IDP Locations** - By frequency of response across the three rankings reported, malnutrition, diarrheal diseases and malaria were reported in identified IDP locations as the most commonly suffered illnesses among IDPs. In the same locations, as reported by key informants, the top three types of health facilities that currently exist were: no health facilities exist (30%), health unit (27%) and private clinic (16%). With these same health facilities, key informants indicated that the top three health services available were: reproductive health (26%), emergency (20%) and laboratory services (15%).

### Health Facilities Currently

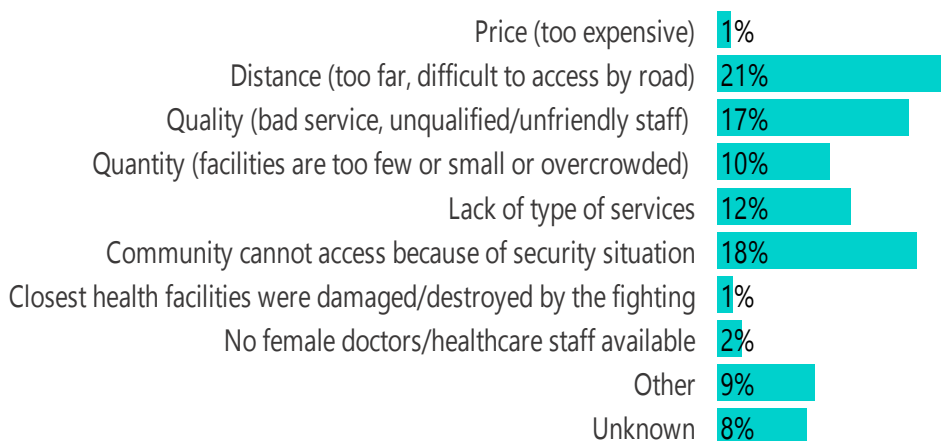


### Health Services Available



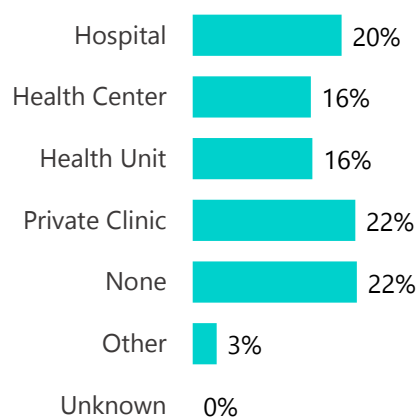
Finally, when asked about the main problems associated with health facilities and access to them, the top three responses from key informants in IDP locations were: distance i.e. too far, difficult to access by road (21%), community cannot access because of security situation (18%) and quality i.e. bad service, unqualified/unfriendly staff (17%).

### Main Problems associated with Health Facilities and Access

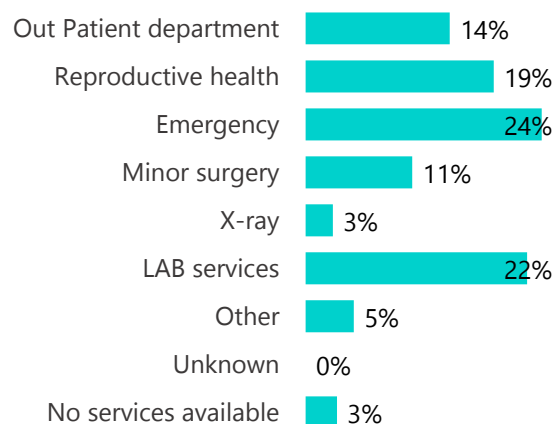


**Returnee Locations** - In identified returnee locations, by frequency of response across the three rankings reported, diarrheal diseases, malnutrition and acute respiratory infections were reported as the most commonly suffered illnesses among returnees. In the same locations, as reported by key informants, the top three types of health facilities that currently exist were: no health facilities exist (22%), private clinic (22%) and hospital (16%). With these same health facilities, key informants indicated that the top three health services available were: emergency (24%), laboratory services (22%) and reproductive health (19%).

### Health Facilities Currently

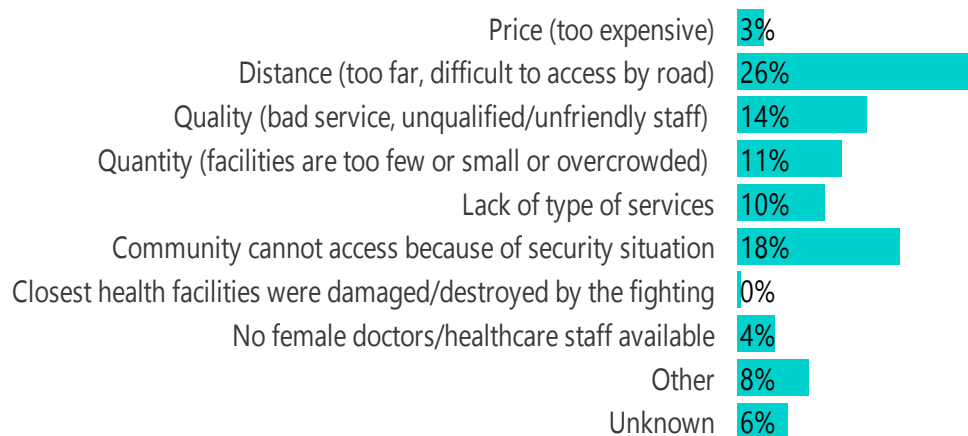


### Health Services Available



Finally, when asked about the main problems associated with health facilities and access to them, the top three responses from key informants in returnee locations were the same as those given in the IDP locations: distance i.e. too far, difficult to access by road (26%), community cannot access because of security situation (18%) and quality i.e. bad service, unqualified/unfriendly staff (14%).

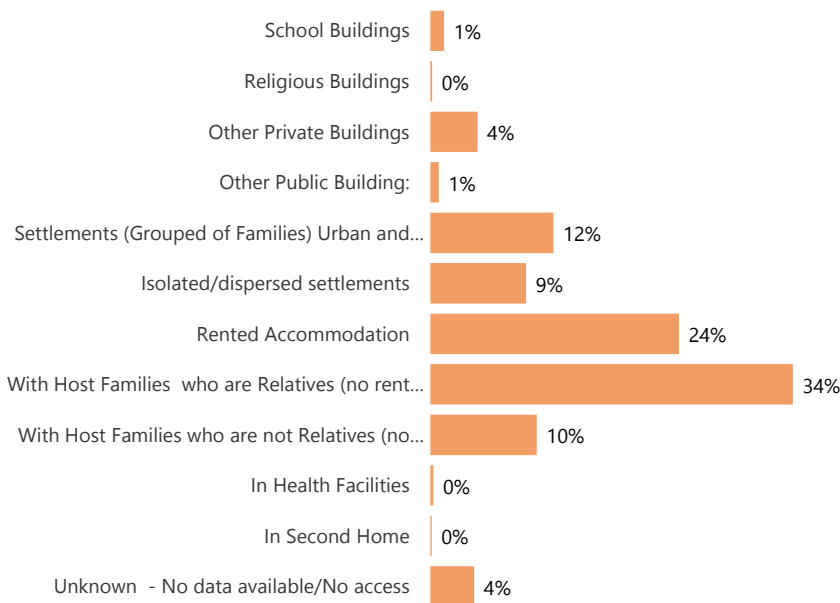
### Main Problems associated with Health Facilities and Access



## SHELTER

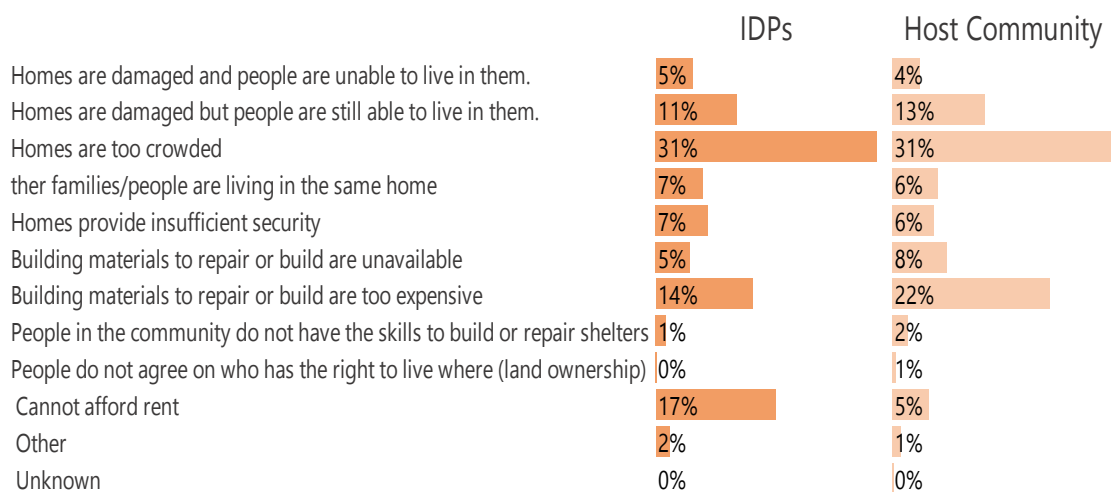
**IDP Locations** - Among identified IDP locations, key informants confirmed that IDPs resided in the following shelter types: with host families who are relatives without paying rent (34%), in rented accommodations (24%), in urban or rural settlements with groups of families (12%), with host families who are not relatives without paying rent (10%), in isolated/dispersed settlements (9%), or in public or private buildings or schools (6%).<sup>2</sup>

### Shelter Types of IDP Populatio



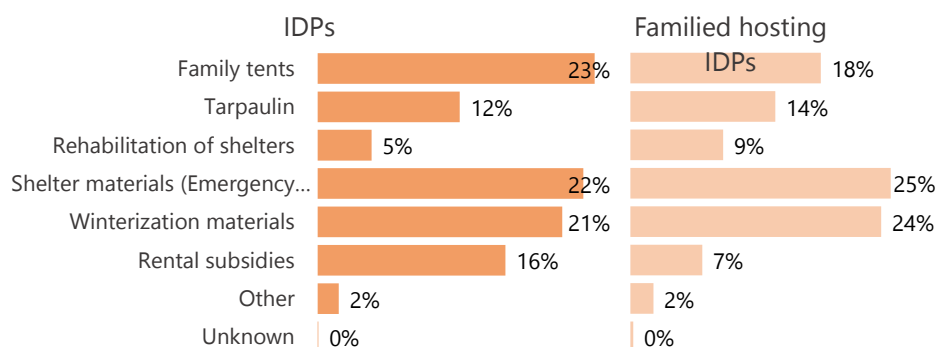
The top three shelter problems faced by IDPs in identified locations included: overcrowding (31%), inability to afford rent (17%) and materials to build or undertake repairs were too expensive (14%).

### Shelter Problems



<sup>2</sup> This data is indicative of the shelter breakdown of the IDP and returnee population and provides context to the other cluster-specific data collected. However, for comprehensive shelter proportions please view the latest TFPM reports.

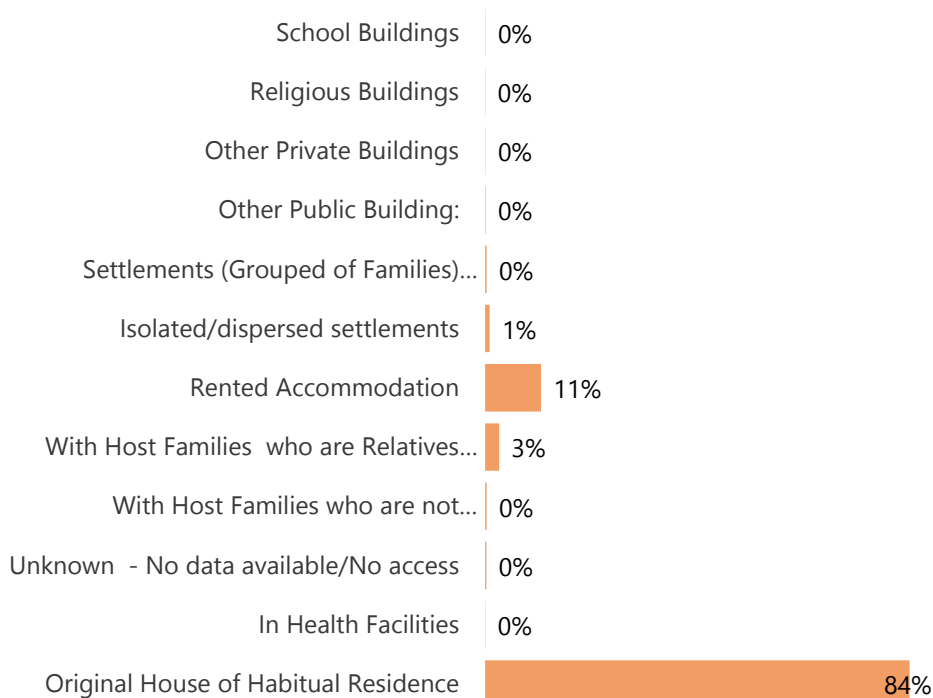
## Shelter needs



The top four shelter needs of IDPs in identified locations were: temporary shelter solutions such as family tents (23%), shelter materials - emergency shelter kits (22%), winterization materials (21%) and rental subsidies (16%); meanwhile, the top four shelter needs among families hosting IDPs were: shelter materials - emergency shelter kits (25%), winterization materials (24%), family tents (18%), and tarpaulin (18%). On the other hand, in the same locations, the top three shelter problems faced by host communities included: overcrowding (31%), materials to build or undertake repairs were too expensive (22%), and homes were damaged but still habitable (13%).

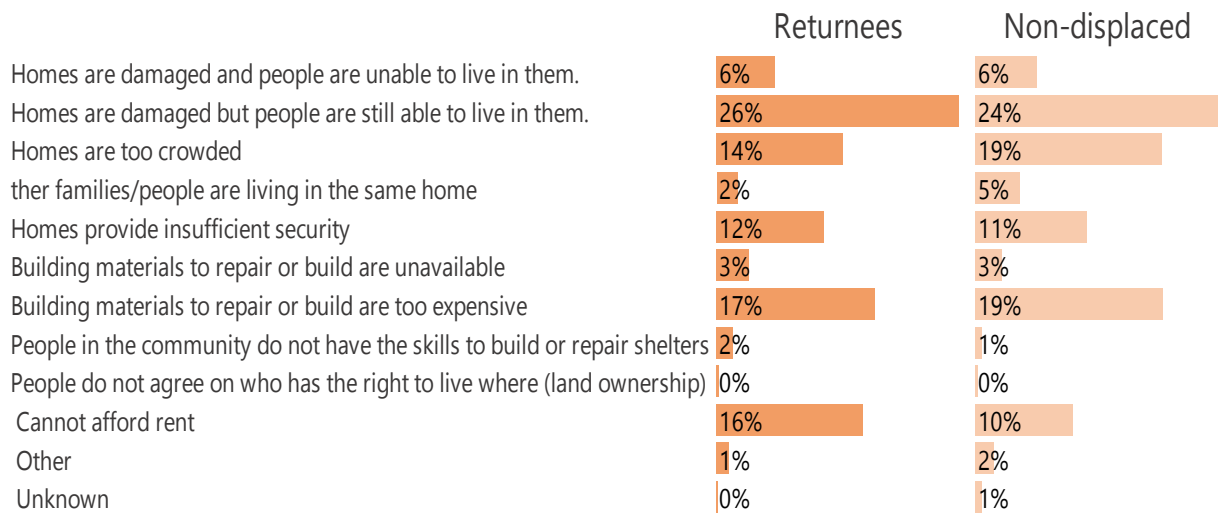
**Returnee Locations** - By way of contrast, among identified returnee locations, key informants confirmed that returnees resided in following shelter types: original house of habitual residence (84%), in rented accommodations (11%), with host families who are relatives without paying rent (3%), and in isolated/dispersed settlements (1%).

## Shelter Types of Returnee Population



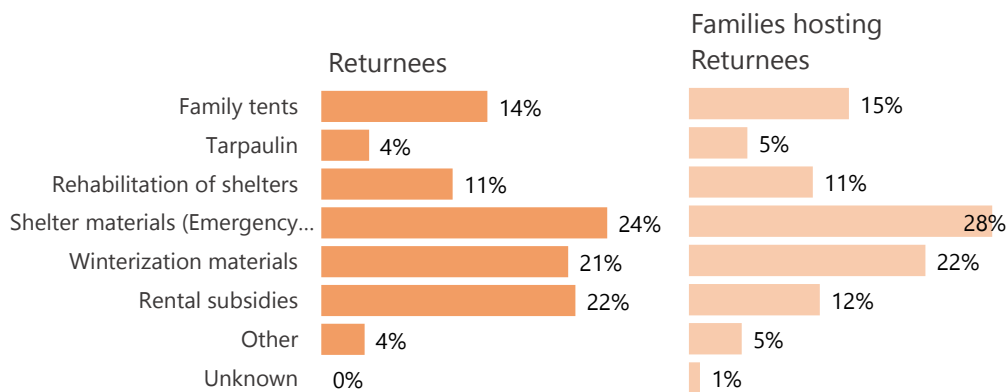
The top three shelter problems faced by returnees in identified locations included: homes were damaged but still habitable (26%), materials to build or undertake repairs were too expensive (17%), inability to afford rent (16%) and overcrowding (14%).

### Shelter Problems



The top four shelter needs of returnees in identified locations were: shelter materials - emergency shelter kits (24%), rental subsidies (22%), winterization materials (21%) and family tents (14%); meanwhile, the top four shelter needs among families hosting returnees were: shelter materials - emergency shelter kits (28%), winterization materials (22%), family tents (15%), and rental subsidies (12%). Finally, in the same locations, the top three shelter problems faced by non-displaced community members included: homes were damaged but still habitable (24%), materials to build or undertake repairs were too expensive (19%) and overcrowding (19%).

### Shelter needs

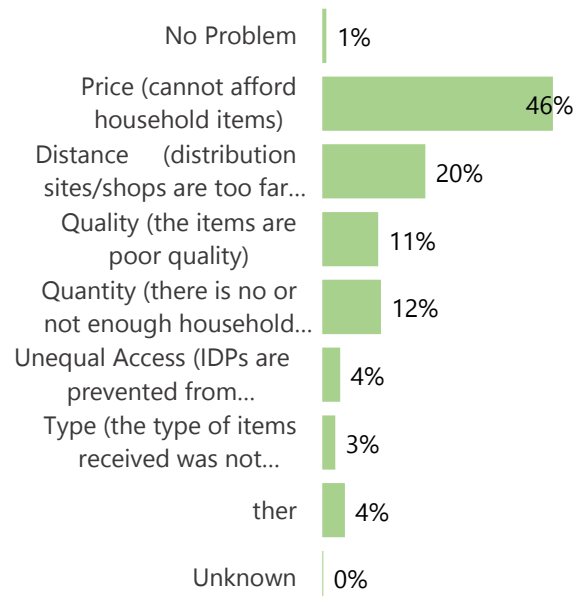


## NON-FOOD ITEMS (NFIs)

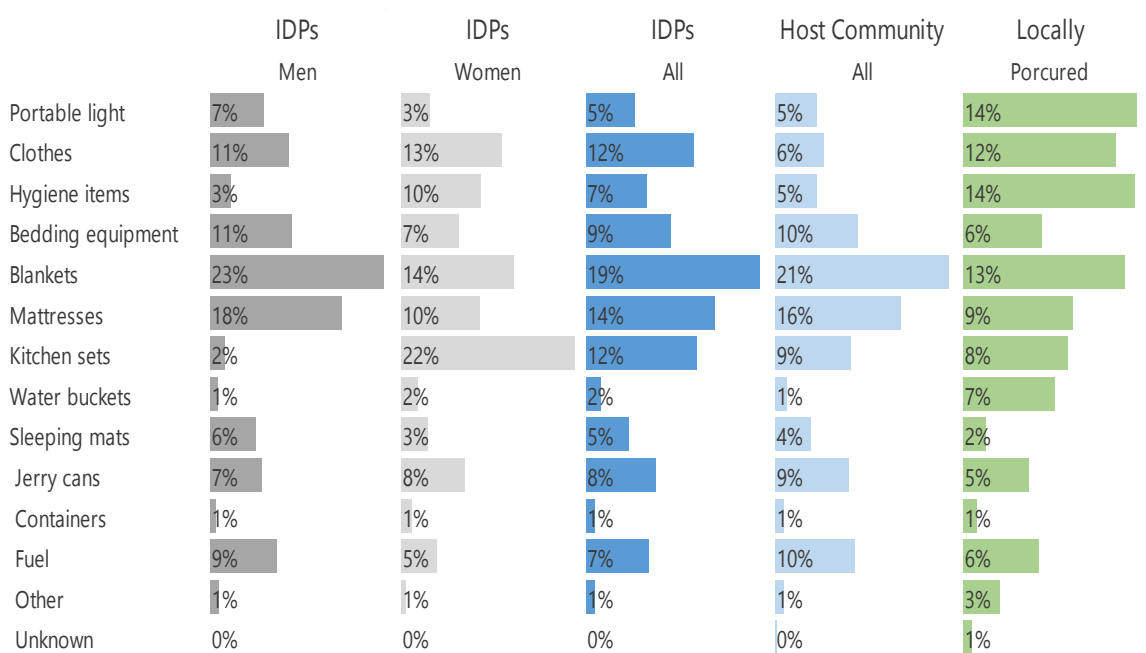
**IDP Locations** - Within identified IDP locations, key informants stated that the top three NFI priority needs among IDP men were: blankets (23%), mattresses (18%) and clothes/bedding equipment (both at 11%); whereas among IDP women the top three NFI priority needs were: kitchen sets (22%), blankets (14%) and clothes (13%); and in the same locations, the top three NFI priority needs among host community members were: blankets (21%), mattresses (16%) and fuel/bedding equipment (both at 10%).

In these same identified IDP/host locations, the following three items were most readily procured locally: portable lights (14%), hygiene items (14%) and blankets (13%). However, IDPs face the following problems with accessing household items/NFIs in these locations: price i.e. they cannot afford household items (46%), distance i.e. distribution sites/shops are too far and difficult to access by road (20%), and quantity i.e. there are no or not enough household items provided in distributions or available in local markets (11%).

## NFI Access Problems



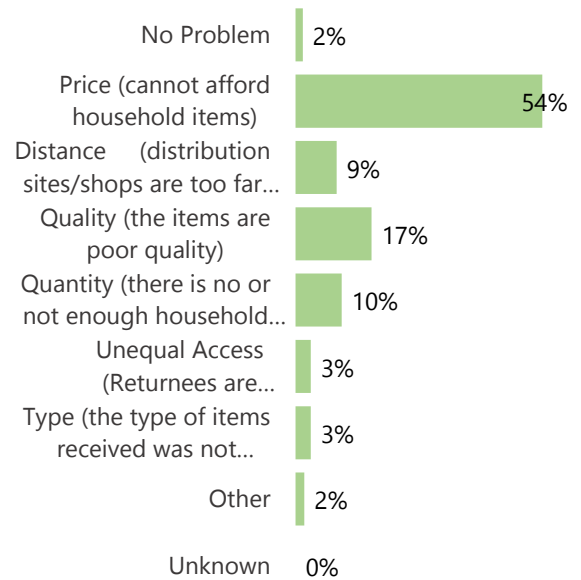
## NFI Priority Needs



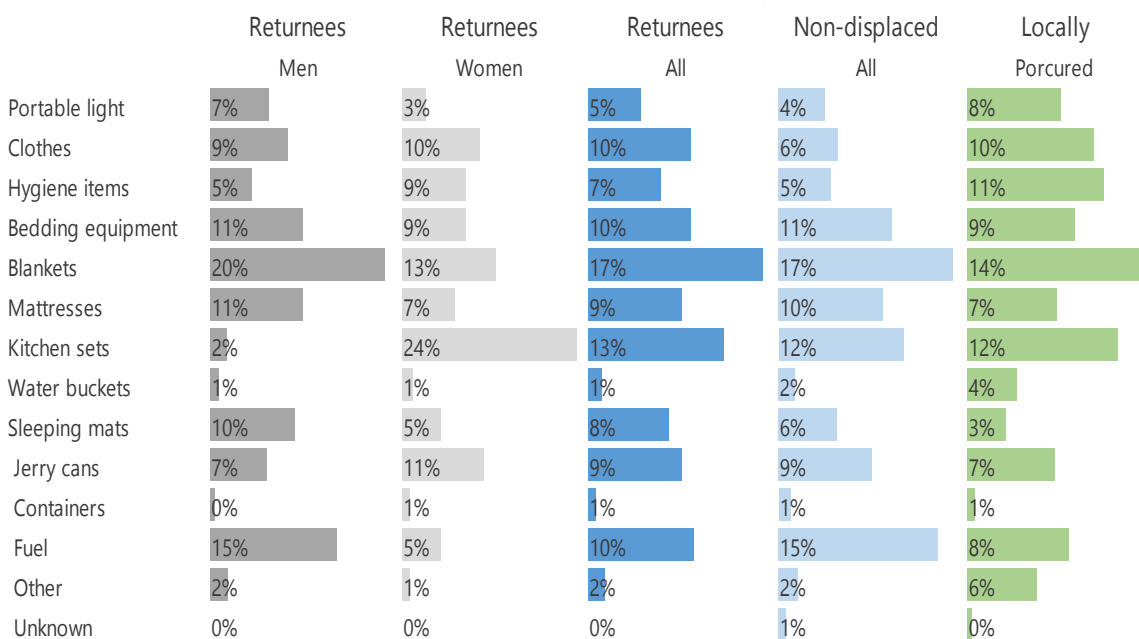
**Returnee Locations** - Turning to identified returnee locations, key informants stated that the top three NFI priority needs among returnee men were: blankets (20%), fuel (15%) and bedding equipment/mattresses (both at 11%); whereas among returnee women the top three NFI priority needs were: kitchen sets (24%), blankets (13%) and jerry cans (11%); and in the same locations, the top three NFI priority needs among non-displaced community members were: blankets (17%), kitchen sets (13%), and clothes/fuel/bedding equipment (all tied at 10%).

In these same identified returnee/non-displaced locations, the following three items were most readily procured locally: blankets (14%), kitchen sets (12%) and hygiene items (11%). However, returnees also face problems with accessing household items/NFIs in these locations, including: price i.e. they cannot afford household items (54%), poor quality items (17%), and quality i.e. distance i.e. distribution sites/shops are too far and difficult to access by road (10%).

**NFI Access Problems**



**NFI Priority Needs**



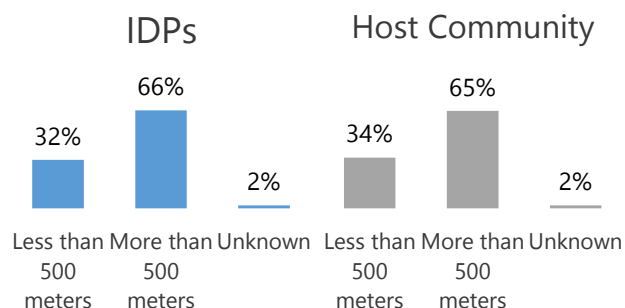
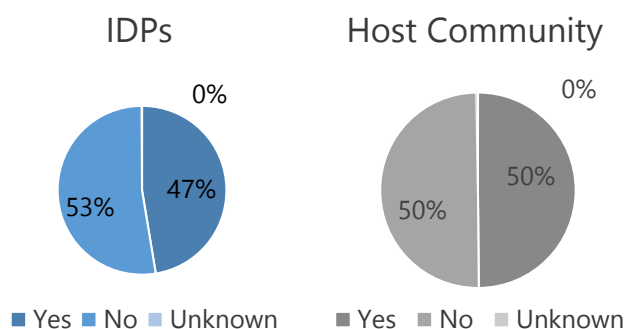
## WASH

**IDP Locations** - Among identified IDP locations, key informants indicated that just 47% of IDPs and 50% of the host community had access to at least 15 litres/day of potable water.

With respect to distance to the nearest potable water point, 66% of IDP households and 65% of host community households lived more than 500 metres away, while 32% of IDP households and 34% of host community households lived less than 500 metres away.

### Access to Water (15 liters/day per person)

### Access to Sanitation/Hygiene

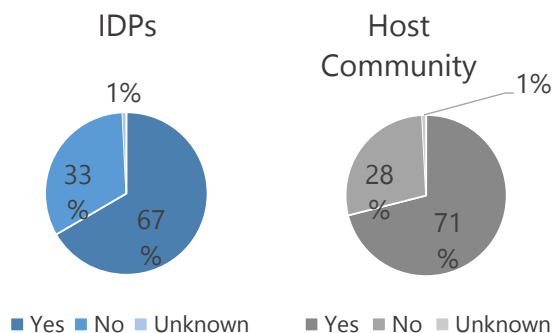
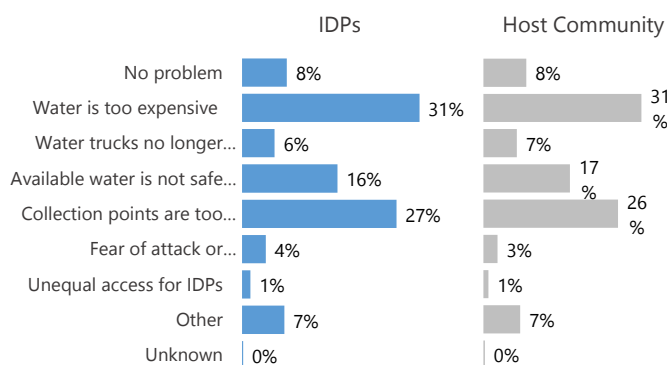


The top three problems with potable water reported among IDPs and host communities in identified IDP locations were: water is too expensive (31% for IDPs and host communities), collection points are too far or difficult to access (27% for IDPs, 26% for host communities), and available water is not safe for drinking or cooking i.e. bad colour or taste (16% for IDPs, 17% for host communities).

Meanwhile, key informants stated that only 67% of IDPs and 71% of the host community had access to sanitation facilities (toilets and showers). The top four problems with access to sanitation/hygiene faced by IDPs and host communities in identified IDP locations were reported as: quantity of toilets i.e. less than 1 per 20 individuals (20% for IDPs, 19% for host communities), lack of waste management / disposal (17% for IDPs, 19% for host communities), quantity of showers (15% for IDPs, 14% for host communities), and lack of facilities for women (15% for IDPs, 14% for host communities).

### Access to Water Problems

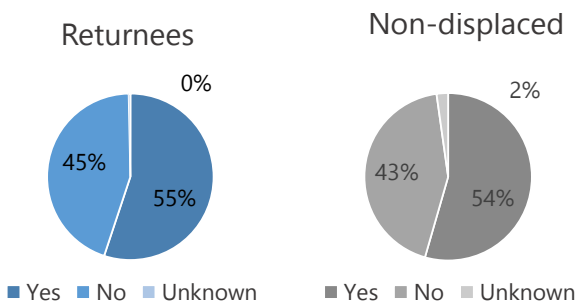
### Access to Sanitation/Hygiene



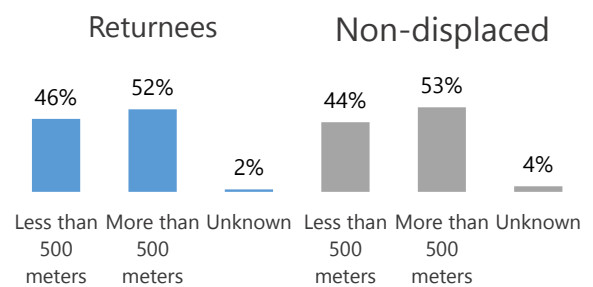


**Returnee Locations** - Similar patterns were observed in the identified returnee locations, where key informants specified that just 55% of returnees and 54% of non-displaced community members had access to at least 15 litres/day of potable water. With respect to distance to the nearest potable water point, 52% of returnee households and 53% of non-displaced households lived more than 500 metres away, while 46% of returnee households and 44% of non-displaced households lived less than 500 metres away.

**Access to Water (15 liters/day per person)**

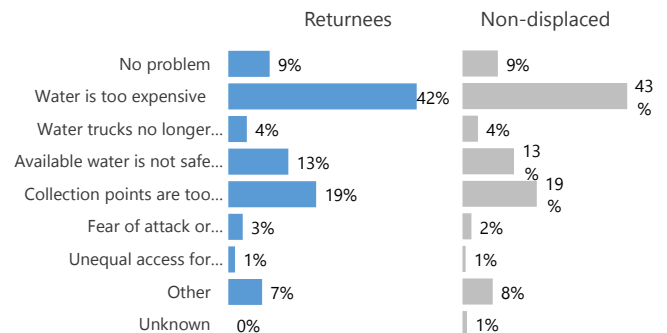


**Access to Water Distance**



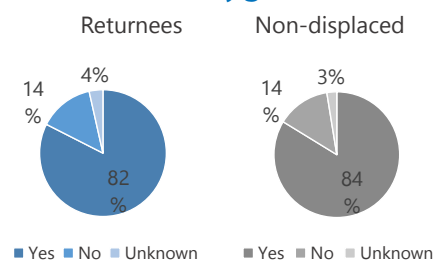
The top three problems with potable water among returnee and non-displaced communities were reported by key informants as: water is too expensive (42% for returnees, 43% for non-displaced communities), collection points are too far or difficult to access (19% for returnees and non-displaced communities), and available water is not safe for drinking or cooking i.e. bad colour or taste (13% for returnees and non-displaced communities).

**Access to Water Problems**

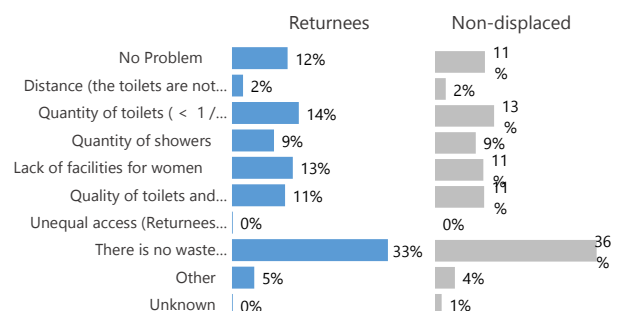


With respect to access to sanitation facilities (toilets and showers), key informants in identified returnee locations indicated that 82% of returnees and 84% of the non-displaced community members enjoyed access to sanitation facilities. The top three problems with access to sanitation/hygiene faced by returnees and non-displaced community members were reported as: lack of waste management / disposal (33% for returnees, 36% for non-displaced community members), quantity of toilets i.e. less than 1 per 20 individuals (14% for returnees, 13% for non-displaced community members), and lack of facilities for women (13% for returnees, 11% for non-displaced community members). Although among non-displaced community members, lack of facilities for women tied with quality of toilets and showers (11%) as the most reported sanitation/hygiene challenge.

**Access to Sanitation/Hygiene**



**Access to Sanitation/Hygiene**



## LIVELIHOODS

**IDP Locations** - Within identified IDP locations, key informants indicated that the top three livelihood options for IDP men were: day labour i.e. working on neighbouring farms, for traders, etc. (22%); aid received from NGOs, WFP, government, etc. (21%); and small business or trading (9%); whereas for IDP women they were: aid received from NGOs, WFP, government, etc. (25%); keeping or herding livestock i.e. pastoralism (13%); and other (10%). By comparison, in the same locations the top three livelihood options for host community men were: farming and keeping livestock – crops and pastoralism (19%); day labour (16%); and farming i.e. growing crops (13%); whereas for host community women they were: keeping or herding livestock i.e. pastoralism (20%); farming and keeping livestock – crops and pastoralism (19%); and aid received from NGOs etc., and farming i.e. growing crops (tied 10%).

### Main Livelihood Options

	IDPs		Host Community	
	Men	Women	Men	Women
Farming (growing crops)	7%	5%	13%	10%
Keeping or herding livestock (pastoralism)	7%	13%	9%	20%
Farming and keeping livestock (crops and past)	7%	7%	19%	19%
Fishing	1%	0%	1%	0%
Small businesses or trading	9%	4%	12%	5%
Homestead gardening	1%	5%	1%	7%
Day labour (working on neighbouring farms, f	22%	7%	16%	5%
Public employment	5%	2%	12%	4%
Private employment	3%	2%	3%	3%
No paid activities.	3%	7%	1%	5%
Aid (received from NGOs, WFP, Government.etc	21%	25%	8%	10%
Borrowing	8%	6%	2%	2%
Begging	4%	6%	1%	2%
Other	2%	10%	1%	7%
Unknown	0%	3%	0%	1%

In identified IDP locations, key informants also revealed that the top three crisis-related factors affecting IDP and host community livelihoods were: security situation / safety (28% for IDPs, 31% for host communities); increase in prices of productive resources (26% for IDPs, 24% for host communities); and destruction of essential infrastructure i.e. irrigation, roads, utilities (11% for IDPs, 10% for host communities).

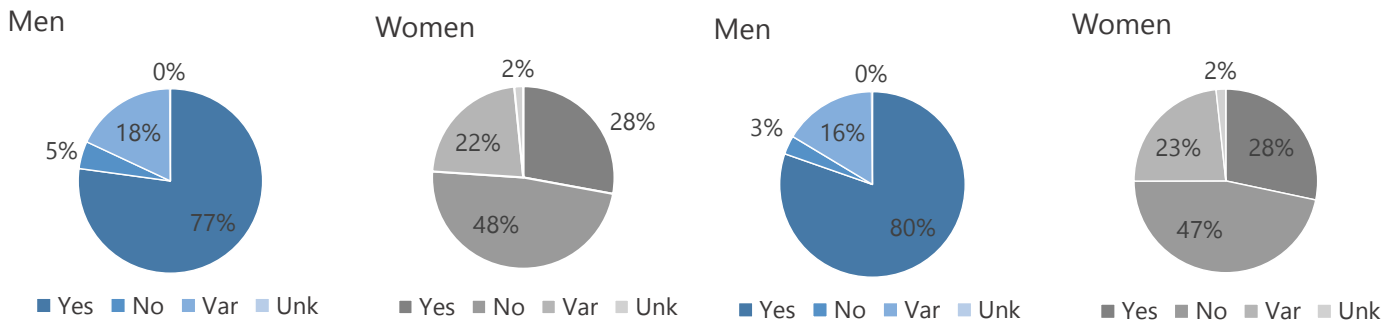
### Main Crisis Related Factors Affecting Livelihoods

	IDPs	Host Community
None	1%	0%
Security Situation/Safety	28%	31%
Freedom of Movement	9%	10%
Productive equipment destroyed	5%	5%
Productive equipment seized	0%	0%
Loss or inaccessibility of productive resources	8%	8%
Increase in prices of productive resources	26%	24%
Closure of markets for selling goods	2%	2%
Loss of livestock (killed/stolen/malnourished)	2%	2%
Destruction or occupation of pastures for graz	1%	1%
Destruction of essential infrastructure (irrigati	11%	10%
Boycott of goods or services due to political su	1%	1%
Other	5%	5%
Unknown	0%	0%

Among IDP locations, 77% of key informants reported that the IDP men enjoyed physical access to the market; while 80% confirmed that host community men have physical access to the market. Among those IDP and host community men who did not enjoy physical access to the market, key informants indicated that the top three reasons for their lack of access were: distance i.e. too far (38% for IDPs, 37% for host communities); lack of transport (32% for IDPs, 31% for host communities); and fear of fighting (13% for IDPs, 14% for host communities).

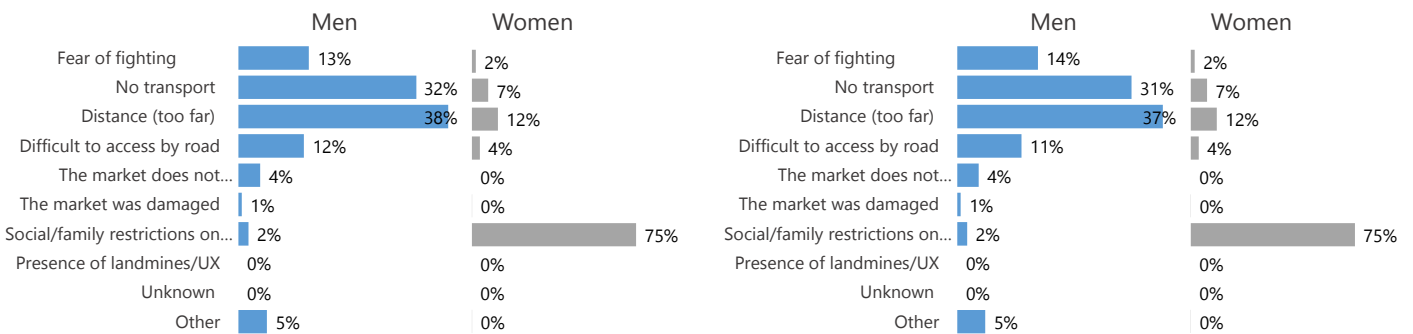
### Physical Access to Market for IDPs

### Physical Access to Market for Host Community



### Lack of Access to the Market for IDPs is due to:

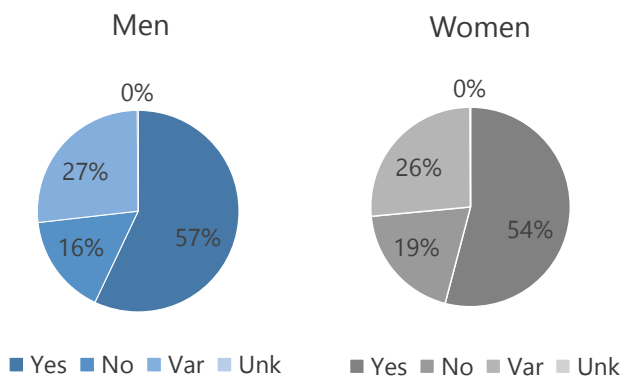
### Lack of Access to the Market for Host Community is due to:



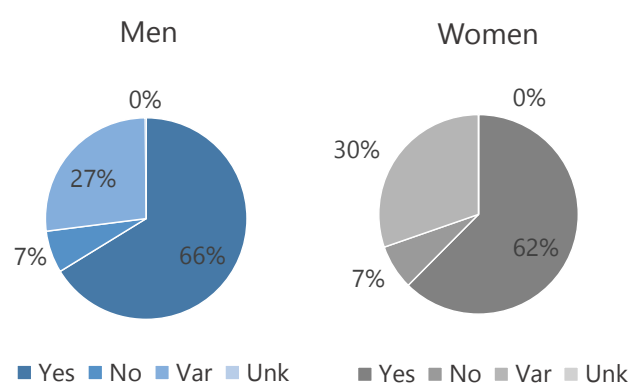
Moreover, 57% of key informants confirmed that IDP men can purchase food at the market; and 66% affirmed that host community men can do the same. Among those IDP men who could not purchase food at the market, the top three reasons provided by key informants for their inability to do so were: prices increased (59%); community does not have the means to purchase anymore (12%); and other reasons (9%). In comparison, among those host community men who could not purchase food at the market, the top three reasons provided by key informants for their inability to do so were: prices increased (59%); quality of food is not good (13%); and community does not have the means to purchase anymore (12%).

With respect to IDP and host community women, only 28% of key informants reported that they enjoyed physical access to the market. Notably, among those IDP and host community women who did not enjoy physical access to the market, key informants indicated that the top three reasons for their lack of access were: social/family restrictions on movement (75% for IDPs and host communities); distance i.e. too far (12% for IDPs and host communities); lack of transport (7% for IDPs and host communities). In addition, 54% of key informants confirmed that IDP women can purchase food at the market; while 62% of key informants confirmed the same about host community women. Of those IDP women who could not purchase food at the market, the top three reasons provided by key informants for their inability to do so were: prices increased (62%); other reasons (14%); and quality of food is not good (13%). Whereas the top three reasons cited by key informants for host community women's inability to purchase food at the market were: price increases (56%); poor food quality (19%); and other reasons (9%).

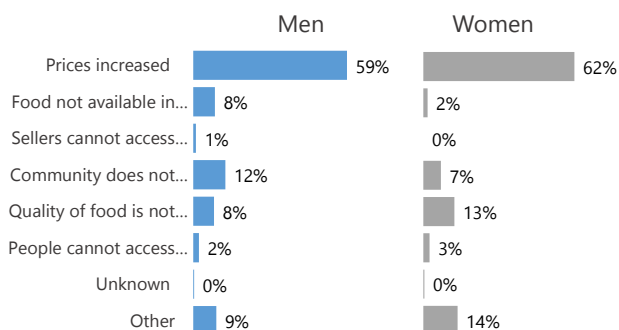
### IDPs can Purchase Food at the Market



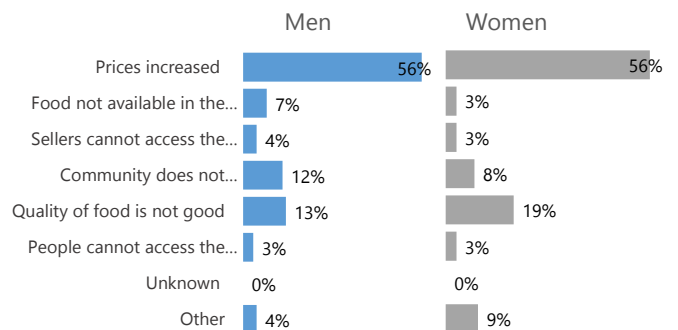
### Host Community can Purchase Food at the Market



### Reason IDPs cannot Purchase Food at the Market



### Reason Host Community cannot Purchase Food at the Market



**Returnee Locations** - On the other hand, within identified returnee locations, key informants indicated that the top three livelihood options for returnee men were: day labour (22%); small business or trading and public employment (tied at 14%); whereas for returnee women they were: farming and keeping livestock (14%); aid received from NGOs, etc. and keeping or herding livestock i.e. pastoralism (tied at 12%). By comparison, in the same locations the top three livelihood options for non-displaced men were: public employment i.e. government (20%); day labour (18%) and small business or trading (14%); whereas for non-displaced women they were: farming and keeping livestock (15%); public employment and keeping or herding livestock i.e. pastoralism (tied at 12%).

### Main Livelihood Options

	Returnees		Non-displaced	
	Men	Women	Men	Women
Farming (growing crops)	7%	4%	7%	5%
Keeping or herding livestock (pastoralism)	5%	12%	5%	12%
Farming and keeping livestock (crops and past)	11%	14%	12%	15%
Fishing	3%	0%	2%	1%
Small businesses or trading	14%	10%	14%	8%
Homestead gardening	0%	2%	0%	4%
Day labour (working on neighbouring farms, f	22%	8%	18%	6%
Public employment	14%	9%	20%	12%
Private employment	7%	6%	9%	8%
No paid activities.	1%	7%	1%	6%
Aid (received from NGOs, WFP, Government.etc)	8%	12%	5%	8%
Borrowing	4%	4%	3%	3%
Begging	2%	2%	0%	1%
Other	1%	6%	0%	5%
Unknown	0%	4%	1%	5%

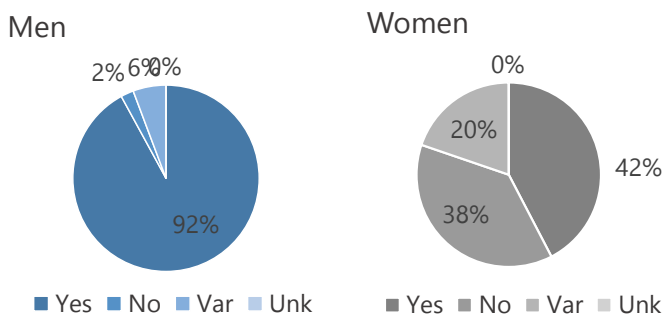
In identified returnee locations, key informants stated that the top three crisis-related factors affecting returnee and non-displaced individuals' livelihoods were: security situation / safety (32% for returnees, 33% for non-displaced individuals); increase in prices of productive resources (24% for returnees, 25% for non-displaced individuals); and destruction of essential infrastructure i.e. irrigation, roads, utilities (11% for returnees, 10% for non-displaced individuals).

### Main Crisis Related Factors Affecting Livelihoods

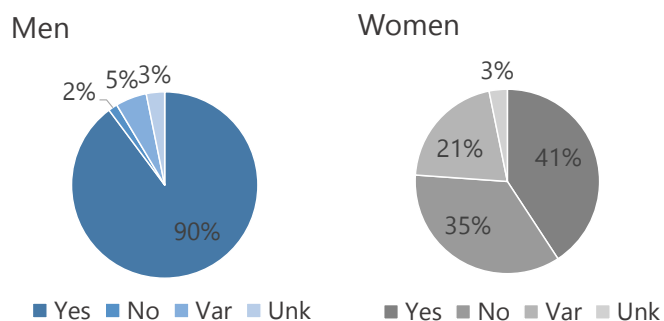
	Returnees	Non-displaced
None	0%	1%
Security Situation/Safety	32%	33%
Freedom of Movement	9%	8%
Productive equipment destroyed	5%	6%
Productive equipment seized	0%	0%
Loss or inaccessibility of productive resources	5%	6%
Increase in prices of productive resources	24%	25%
Closure of markets for selling goods	3%	2%
Loss of livestock (killed/stolen/malnourished)	1%	3%
Destruction or occupation of pastures for graz	1%	1%
Destruction of essential infrastructure (irrigati	12%	11%
Boycott of goods or services due to political su	1%	1%
Other	4%	3%
Unknown	1%	0%

Within these same locations, 92% of key informants reported that the returnee men enjoyed physical access to the market; and 90% affirmed that non-displaced men do as well. Among those returnee men who did not enjoy physical access to the market, key informants indicated that the top three reasons for their lack of access were: distance i.e. too far (32%); fear of fighting (26%); and difficult to access by road (21%). Similarly, key informants indicated that the top three reasons non-displaced men did not enjoy physical access to the market were: distance i.e. too far (38%); difficult to access by road (25%); and fear of fighting and lack of transport (tied at 13%).

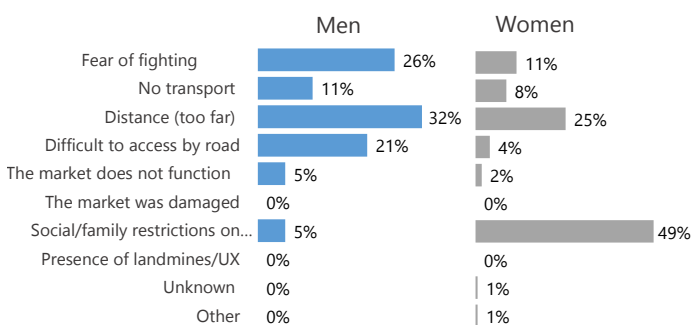
### Physical Access to Market for Returnees



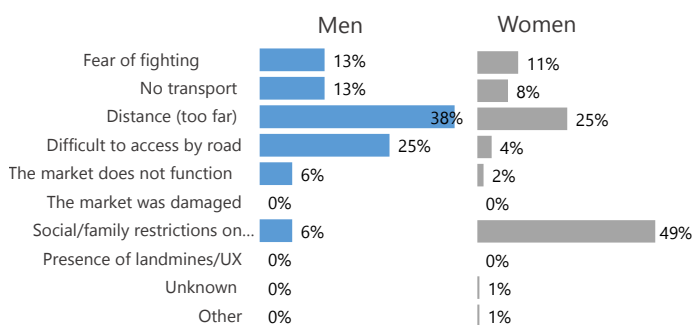
### Physical Access to Market for Non-displaced



### Lack of Access to the Market for Returnees is due to:



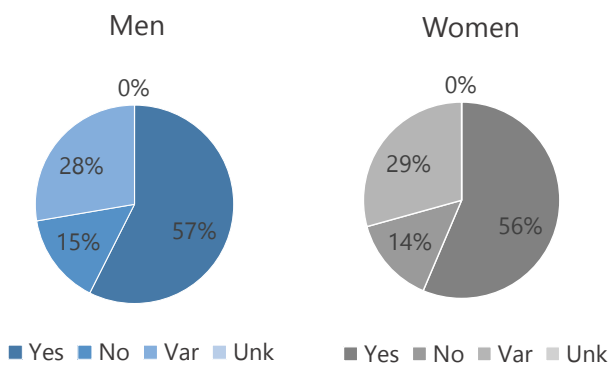
### Lack of Access to the Market for Non-displaced is due to:



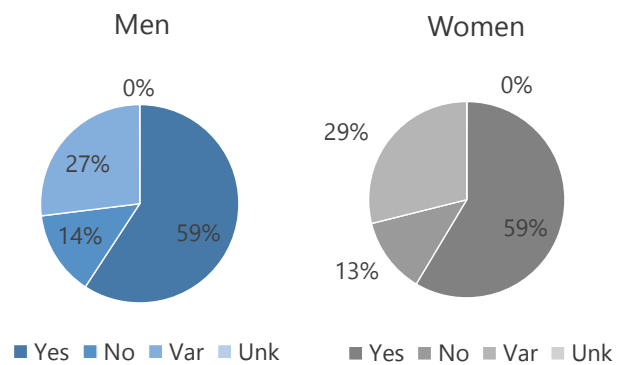
Meanwhile 57% of key informants confirmed that returnee men are able to purchase food at the market; and 59% revealed that non-displaced men can do the same. Of those returnee and non-displaced men who could not purchase food at the market, the top three reasons provided by key informants for their inability to do so were: prices increased (49% for returnees, 58% for non-displaced); community does not have the means to purchase anymore (27% for returnees, 28% for non-displaced); and food not available in the market (18% for returnees and non-displaced alike).

With respect to returnee and non-displaced women, only 42% and 41% of key informants reported that they enjoyed physical access to the market, respectively. Significantly, among those returnee and non-displaced women who did not enjoy physical access to the market, key informants indicated that the top three reasons for their lack of access were: social/family restrictions on movement (49% for returnees and non-displaced); distance i.e. too far (25% for returnees and non-displaced); and fear of fighting (11% for returnees and non-displaced). In addition, 56% of key informants confirmed that returnee women can purchase food at the market; while 59% confirmed the same about non-displaced women. Of those returnee and non-displaced women who were unable to purchase food at the market, the top three reasons provided by key informants for their inability to do so were: prices increased (58% for returnees and non-displaced); other reasons (25% for returnees, 14% for non-displaced); and quality of food is not good (8% for returnees and 9% for non-displaced).

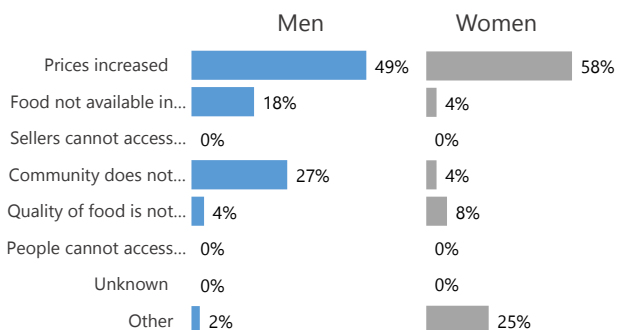
### Returnees can purchase Food at the Market



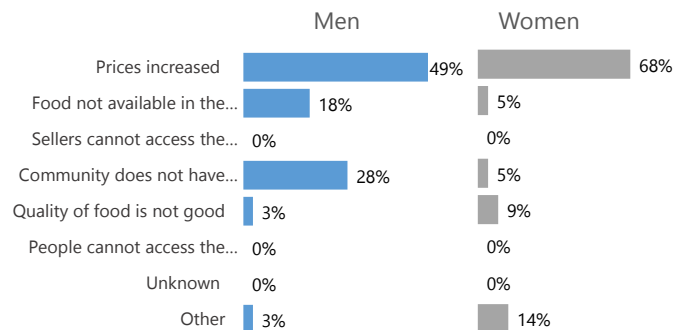
### Non-displaced can Purchase Food at the Market



### Reason Returnees cannot Purchase Food at the Market



### Reason Non-Displaced cannot Purchase Food at the Market



## EDUCATION

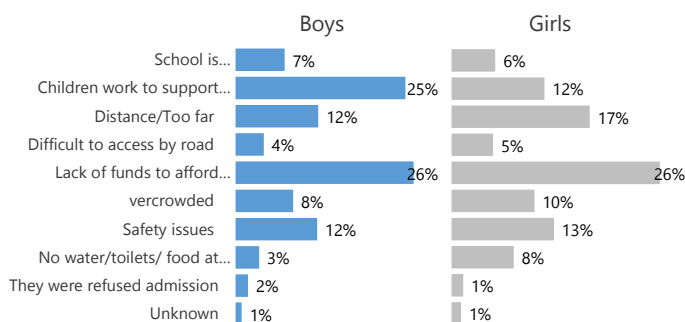
**IDP Locations** - In identified IDP locations, 64% of key informants indicated that school aged boys (i.e. 6 to 17 years old) attend school on a regular basis, while just 54% stated that school aged girls regularly attend school.

The top four reasons for non-attendance by school aged boys in IDP locations were reported as: lack of funds to afford school equipment (26%), children work to support households (25%), distance / too far (12%) and safety issues (12%); whereas for school aged girls the top four reasons for non-attendance were: lack of funds to afford school equipment (26%), distance / too far (17%), safety issues (13%) and children work to support households (12%).

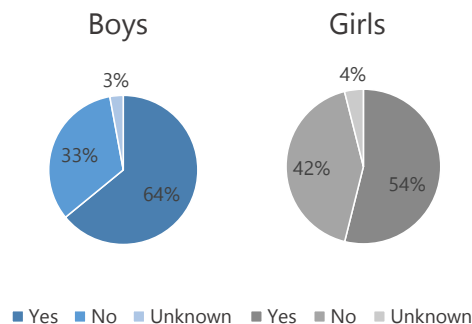
Also, 37% of key informants in identified IDP locations stated that the level of attendance by school aged boys varied between IDPs and host communities; while 39% indicated that the attendance level among school aged girls varied between IDP and host populations.

In the same IDP locations, key informants reported that the following school aged groups experienced the greatest difficulty in accessing regular education: IDPs (29%), males i.e. boys (27%) and females i.e. girls (26%). Finally, when asked about teacher attendance levels, 61% of key informants in IDP locations stated that the level of attendance among male teachers remained the same as before the crisis; while 58% stated that the level of attendance among female teachers remained the same as pre-crisis levels.

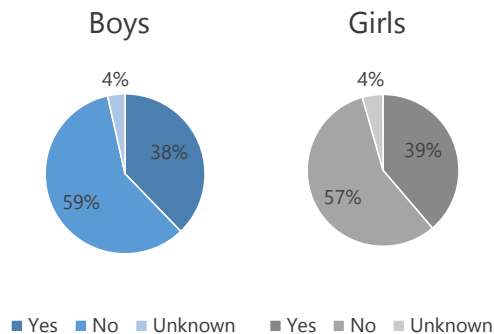
### Reason School Aged Children Do Not Attend Education



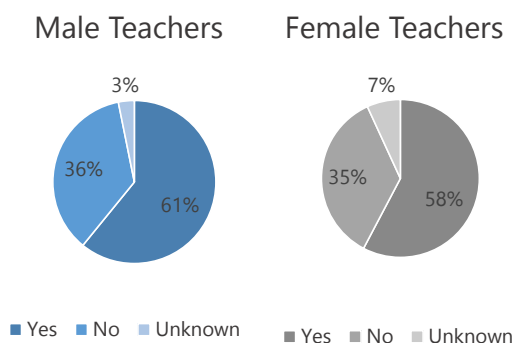
### Attend School Regularly (6 - 17 years)



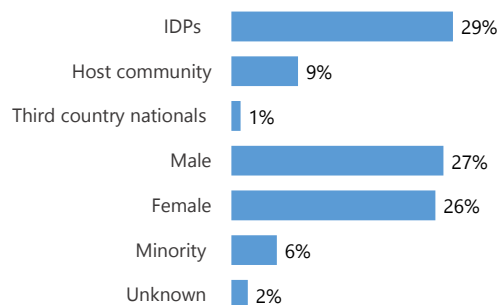
### Attendance Level Vary between IDPs & HC



### Teachers Attendance Level (the same)



### Group(s) with Difficulty in Accessing Education





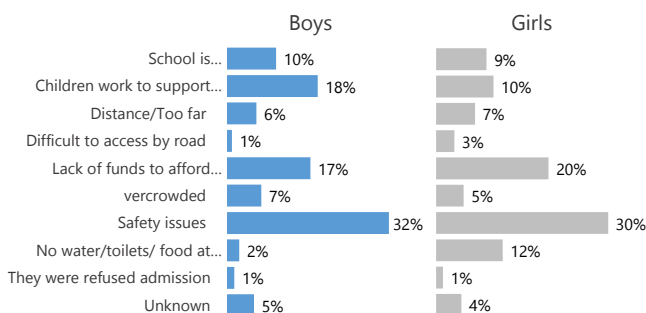
**Returnee Locations** - In identified returnee locations, the gender disparity was not as wide, as 60% of key informants indicated that school aged boys (i.e. 6 to 17 years old) regularly attend school, while 54% stated that school aged girls do so.

By way of contrast to IDP locations, the top four reasons for non-attendance by school aged boys in returnee locations were reported as: safety issues (32%), children work to support households (18%), lack of funds to afford school equipment (17%), and damaged/destroyed/occupied schools (10%); whereas for school aged girls the top four reasons for non-attendance were: safety issues (30%), lack of funds to afford school equipment (20%), lack of water/toilets/food at school (12%), and children work to support households (10%).

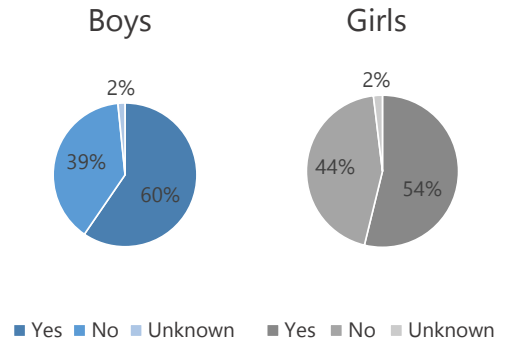
Unlike IDP locations, in returnee locations just 19% of key informants in identified returnee locations stated that the level of attendance by school aged boys varied between returnees and those who had not been displaced communities; while only 20% indicated that the attendance level among school aged girls varied between returnees and non-displaced populations.

In the same returnee locations, key informants reported that the following school aged groups experienced the greatest difficulty in accessing regular education: males i.e. boys (30%), females i.e. girls (29%) and minorities (9%). Finally, when asked about teacher attendance levels, 61% of key informants in returnee locations stated that the level of attendance among male teachers remained the same as before the crisis; while 58% stated that the level of attendance among female teachers remained the same as pre-crisis levels.

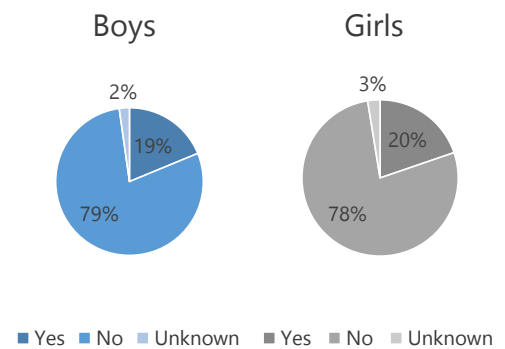
### Reason School Aged Children Do Not Attend Education



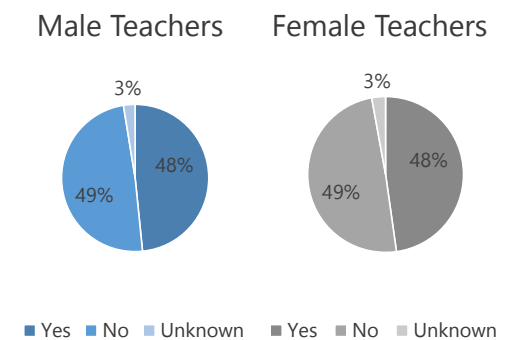
### Attend School Regularly (6 - 17 years)



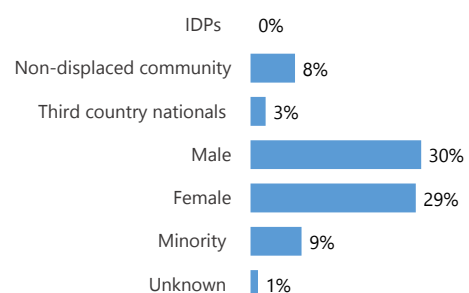
### Attendance Level Vary between IDPs & HC



### Teachers Attendance Level (the same)



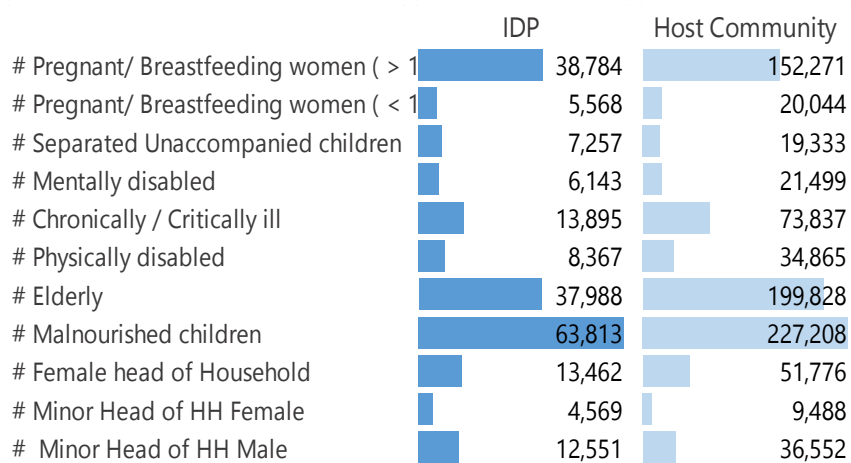
### Group(s) with Difficulty in Accessing Education



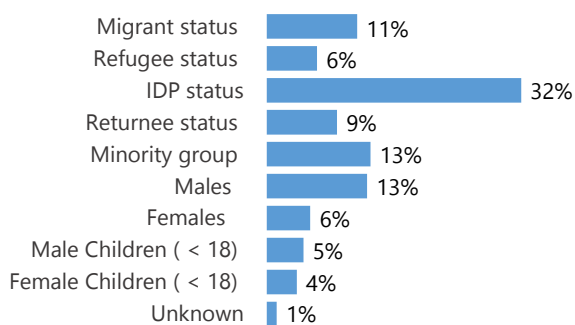
## PROTECTION

**IDP Locations** - Among IDP locations surveyed, key informants reported the presence of significant numbers of IDP and host community members with specific vulnerabilities, including: 291,021 malnourished children; 237,816 elderly; 191,055 pregnant/breastfeeding women (over 18 years old); 87,732 chronically/critically ill individuals; 70,874 persons with physical and mental disabilities; 65,238 female heads of household; 49,103 minor heads of household (male); 26,590 separated/unaccompanied children; 25,612 pregnant/breastfeeding girls; and 14,057 minor heads of household (female).

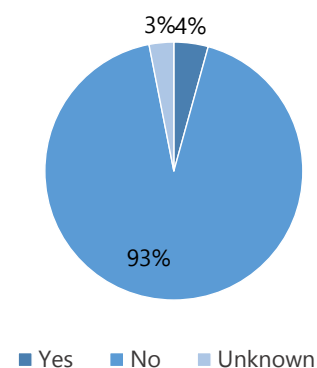
### Protection Characteristics



### Specific Group Targeted

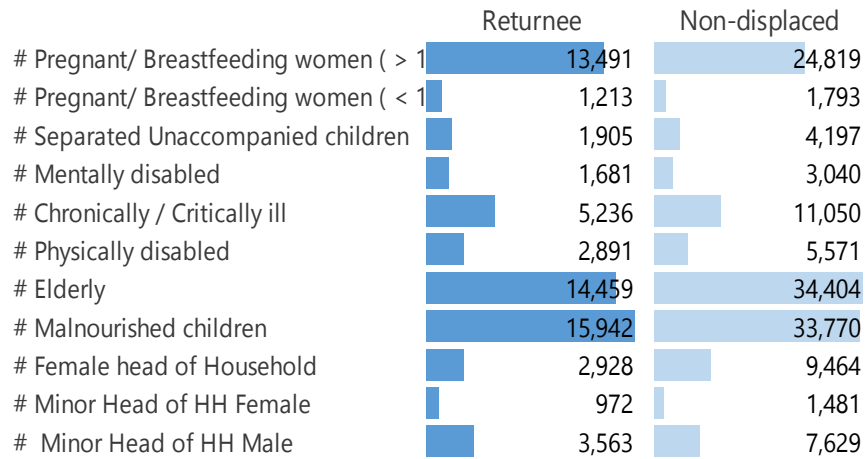


### Specific Group targeted because of their Status

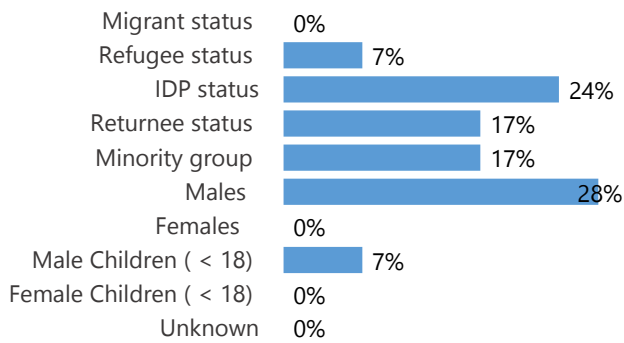


**Returnee Locations** - In surveyed returnee locations, key informants also reported the presence of returnees and non-displaced individuals with specific vulnerabilities, albeit in smaller numbers, including: 49,712 malnourished children; 48,863 elderly; 38,310 pregnant/breastfeeding women (over 18 years old); 16,286 chronically/critically ill individuals; 13,183 persons with physical and mental disabilities; 12,392 female heads of household; 11,192 minor heads of household (male); 6,102 separated/unaccompanied children; 3,006 pregnant/breastfeeding girls; and 2,453 minor heads of household (female).

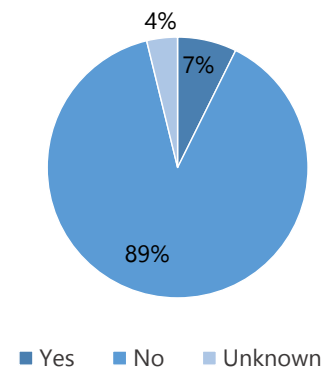
### Protection Characteristics



### Specific Group Targeted



### Specific Group targeted because of their Status



**Third Country Nationals** - Key informants also confirmed the presence of 8,001 non-Yemeni nationals in identified IDP locations, and 3,192 in returnee locations.

**Specific Groups Targeted** - When asked if specific groups are targeted by threats because of their status, only 4% of key informants in IDP locations and 7% in returnee locations answered in the affirmative. The top three groups targeted in IDP locations based on their status were reported as: IDPs (32%), minorities (13%) and males (13%); whereas the top three groups targeted in returnee locations based on their status were reported as: males (28%); IDPs (24%); returnees and minorities (tied at 17%).

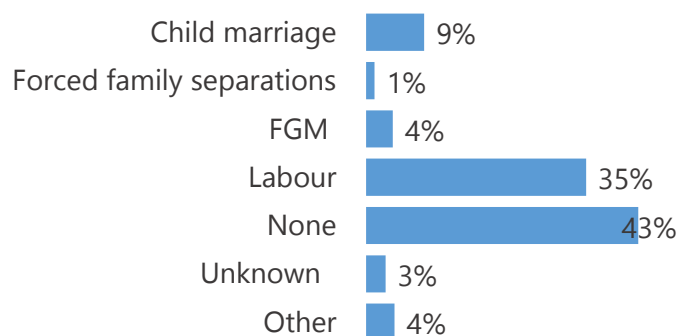
## CHILD PROTECTION

**IDP Locations** - Among IDP locations surveyed, key informants reported the presence of significant numbers of IDP and host community children with specific vulnerabilities, including: 147,774 orphaned children; 11,055 children with mental health disabilities; and 10,538 children with physical disabilities. The top three harmful practices reported by key informants in IDP locations were: child labour (35%); child marriage (9%); and female genital mutilation (4%); although a highest proportion of key informants indicated that no harmful practices were present (40%).

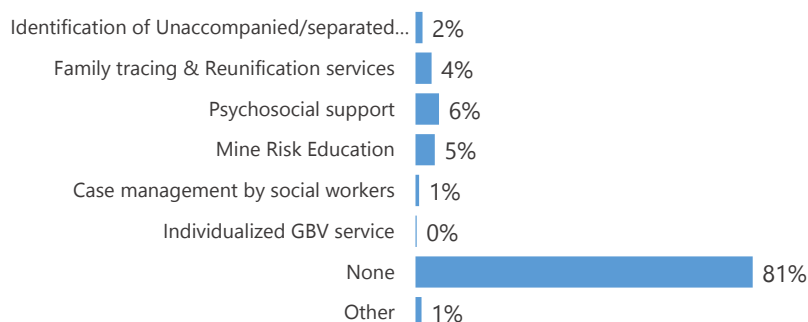
### Child Protection Characteristics

	IDPs	Host Community
# Orphaned children	35,513	112,261
# . Mentally disabled (> 18)	4,472	13,132
# . Mentally disabled (< 18)	2,964	8,091
# Physically disabled (>18)	5,475	17,240
# Physically disabled (<18)	3,643	10,538

### Occurrences of most common types of harmful practices



### Child protection services are provided



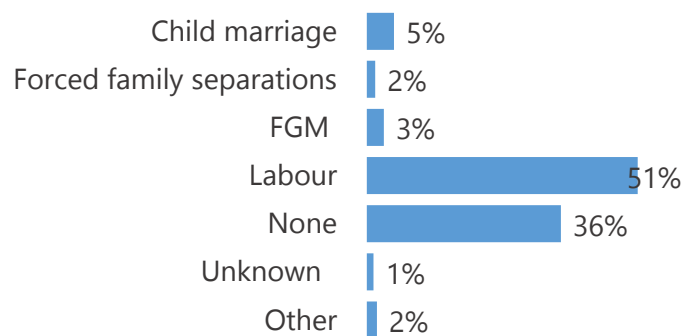
**Returnee Locations** - In surveyed returnee locations, key informants also reported the presence of returnee and host community children with specific vulnerabilities, albeit in smaller numbers, including: 25,128 orphaned children; 2,157 children with mental health disabilities; and 2,953 children with physical disabilities. The top three harmful practices reported by key informants in returnee locations were: child labour (51%); child marriage (5%); and female genital mutilation (3%); although a significant proportion of key informants indicated that no harmful practices were present (36%).

In identified IDP locations, the presence of 543 designated safe/recreational places for children was confirmed; compared to just 69 safe/recreational spaces for children in returnee locations. On the other hand, very small percentages of key informants in both IDP and returnee locations confirmed the presence of specific types of child protection services, including: psychosocial support (6%); mine risk education (5%); and family tracing and reunification services (4%); while a significant proportion indicated that no specialized child protection services existed in their areas (81%).

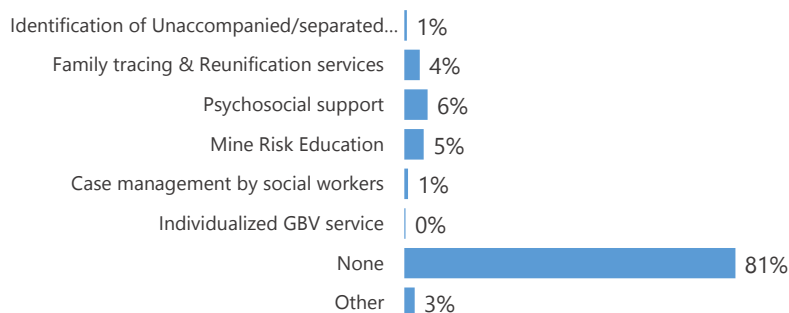
### Child Protection Characteristics

	Returnees	Non-displaced
# Orphaned children	8,726	16,402
# . Mentally disabled ( > 18)	1,063	1,758
# . Mentally disabled (< 18)	784	1,409
# Physically disabled (>18)	1,901	2,824
# Physically disabled (<18)	1,023	1,930

### Occurrences of most common types of harmful practices



### Child protection services are provided

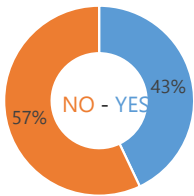


## FIELD OBSERVATIONS

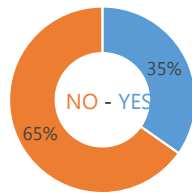
As part of the multi-cluster location assessment, enumerators were asked to make field observations about the area where the assessment was taking place, including on the presence of specific vulnerable groups in the community, or on the state of local infrastructure. The enumerators' observations are summarized in the visualizations below.

### Identified IDP locations:

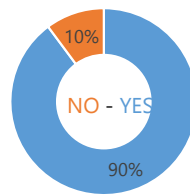
School-aged children not in school



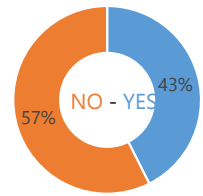
Large number of shops or other services closed



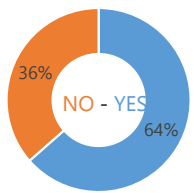
Local utilities and services not functioning (electricity, water)



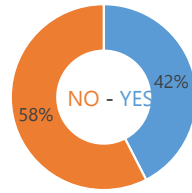
Significantly fewer people in the streets than normal



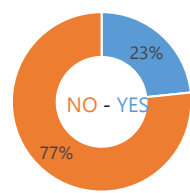
Shortage of basic food in markets or shops



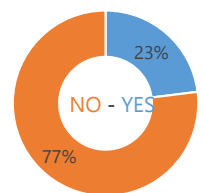
Some damage to buildings



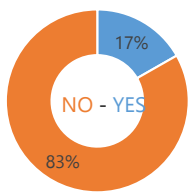
Significant damage to buildings



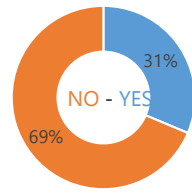
1 or 2 completely destroyed buildings



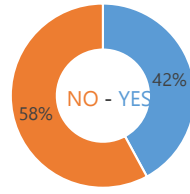
Many destroyed buildings



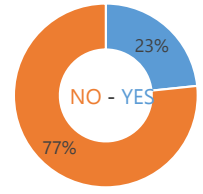
Many people begging in the streets



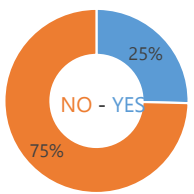
Any damage to key infrastructure (water tanks, roads, hospitals, etc.)



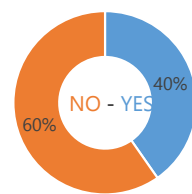
Significant damage to key infrastructure (roads, hospitals, etc.)



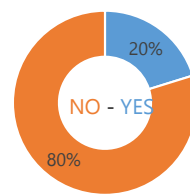
IDPs gathering in groups outside of shelters



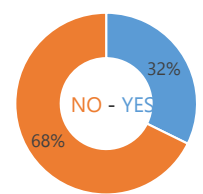
People queuing to access water points or toilets



Significant absence of a sex or age group. (E.g. no young women)

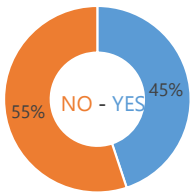


High number of people with disabilities (mental or physical)

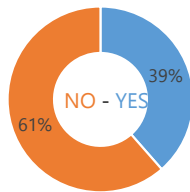


Identified returnee locations:

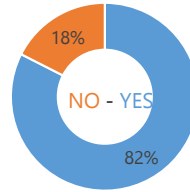
School-aged children not in school



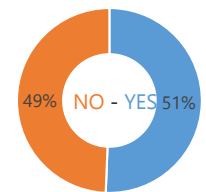
Large number of shops or other services closed



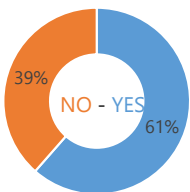
Local utilities and services not functioning (electricity, water)



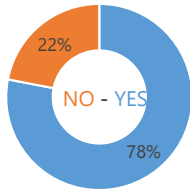
Significantly fewer people in the streets than normal



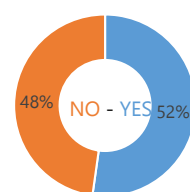
Shortage of basic food in markets or shops



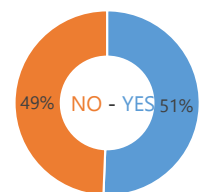
Some damage to buildings



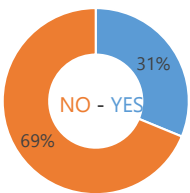
Significant damage to buildings



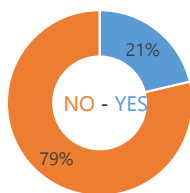
1 or 2 completely destroyed buildings



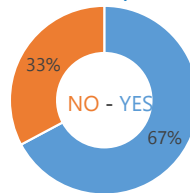
Many destroyed buildings



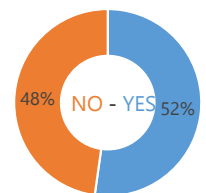
Many people begging in the streets



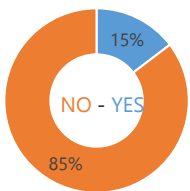
Any damage to key infrastructure (water tanks, roads, hospitals, etc.)



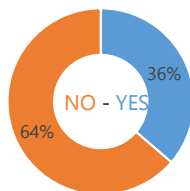
Significant damage to key infrastructure (roads, hospitals, etc.)



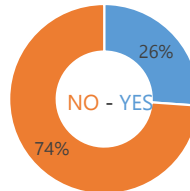
IDPs gathering in groups outside of shelters



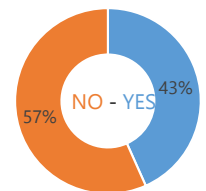
People queuing to access water points or toilets



Significant absence of a sex or age group. (E.g. no young women)



High number of people with disabilities (mental or physical)



## Vulnerability & Humanitarian Assistance Indices

Clusters were requested to select questions from the location assessment tools – IDP and returnee versions – that could serve as proxy indicators of vulnerability in relation to their sector. The data gathered in relation to each proxy indicator was scored on a scale of 0 to 1. On the basis of data gathered for each of the selected proxy indicators, a combined vulnerability score was developed per governorate, which is calculated by adding individual scores of the thirteen different proxy indicators of vulnerability, namely: IDP to host community ratio; multiple displacement; number of non-Yemenis; elderly dependency ratio (elderly to adult); children dependency ratio (children to adult); sex ratio (female to male); girl enrolment (ages 6 – 17); food consumption level; access to markets; access to water; access to sanitation; access to health; and shelter inadequacy. This method and selected proxy indicators were used for both the IDP and returnee data sets.

In addition, a combined humanitarian assistance score was developed per governorate, which is calculated by adding individual scores for two proxy indicators for humanitarian assistance, namely: degree assistance is not supporting priority needs; and degree assistance is not reaching the most vulnerable. Again, this method and selected proxy indicators were used for the both the IDP and returnee data sets related to humanitarian assistance.

A visualization of the data from the Combined IDP Vulnerability Score is presented below:

A visualization of the data from the Combined IDP Humanitarian Assistance Score is presented below:

A visualization of the data from the Combined Returnee Vulnerability Score is presented below:

A visualization of the data from the Combined Returnee Humanitarian Assistance Score is presented below:



## HUMANITARIAN ASSISTANCE

In addition to gathering information on humanitarian response, the location assessment sought to gather data on perceptions among IDPs, returnees and host community members on the delivery of humanitarian, information needs related to humanitarian assistance, and accountability to affected populations.

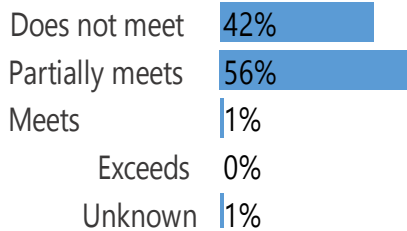
By frequency of response, food assistance was reported in identified IDP / host locations as the most recent type of assistance provided; with shelter, and NFI or WASH assistance coming in at a distant second and third place, respectively. In terms of numbers, key informants indicated that a total of 219,190 IDP households and 502,4334 host community households received one of these assistance types recently, the majority of which can be assumed to be food assistance.

### 3 most recent types of assistance provided

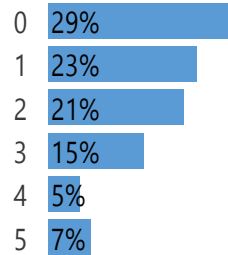
	Most Recent 1	Most Recent 2	Most Recent 3
Food	82%	49%	55%
NFIs	1%	2%	1%
Shelter	2%	5%	3%
WASH	1%	2%	1%
Cash assistance	1%	2%	2%
Livelihoods grants/support	0%	0%	0%
Legal counselling	0%	0%	0%
Winterization NFIs	0%	0%	0%
Shelter Winterization	0%	0%	0%
Psychosocial counselling	0%	0%	0%
Medical supplies	0%	1%	1%
Health services	0%	1%	2%
Legal representation	0%	0%	0%
Unknown	0%	0%	1%
None	12%	33%	31%
Other	1%	4%	3%

Alarming, within identified IDP locations, when asked whether humanitarian assistance was supporting the community in meeting priority needs, 56% of key informants indicated that it does so partially, and 42% reported that it does not. Also of note, on a scale of 0 to 5 where 0 is the lowest and 5 is the highest, the majority of key informants indicated that the IDP / host community did not have any - or had insufficient - information needed to access humanitarian assistance (73% of responses fell within the 0 to 2 scale). To compound matters, 70% of key informants indicated that the IDP / host community were not aware of how to provide feedback or a complaint to humanitarian agencies. Using the same scale of 0 to 5, the majority of key informants stated that the IDP / host community did not feel involved at all - or sufficiently involved - in the way humanitarian assistance is provided (69% of responses fell within the 0 to 2 scale).

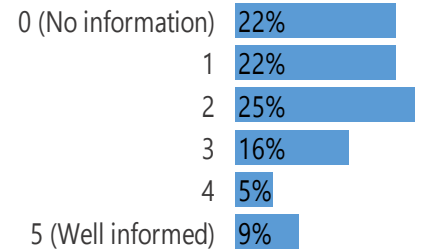
Humanitarian assistance meeting priority needs of community



Community has information they need to access humanitarian assistance

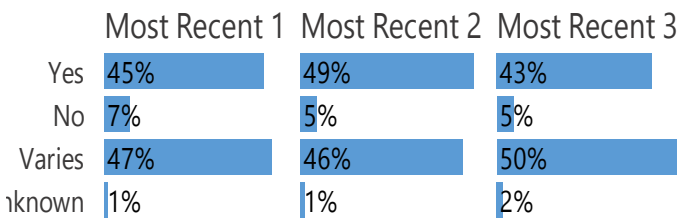


Community feels involved in the way the humanitarian assistance is provided

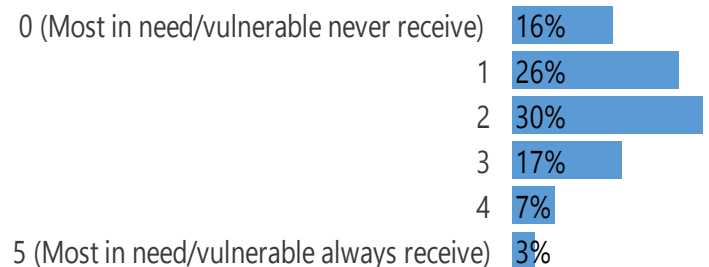


In addition, on a scale of 0 to 5 where 0 signifies that those most in need/vulnerable never received assistance and 5 signifies that those most in need/vulnerable always received assistance, the majority of key informants stated that those most in need/vulnerable either never received assistance or they received insufficient assistance (72% of responses fell within the 0 to 2 scale). In fact, 73% of key informants in identified IDP locations confirmed that IDPs faced challenges in accessing assistance. Key informants indicated that the top three challenges IDPs faced with respect to accessing humanitarian assistance were: assistance is not provided regularly enough (32%); assistance is diverted (27%); and beneficiary selection was unfair (14%).

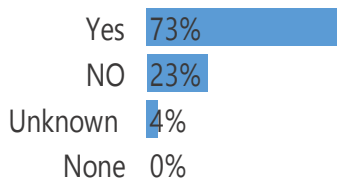
Assistance reached the most vulnerable



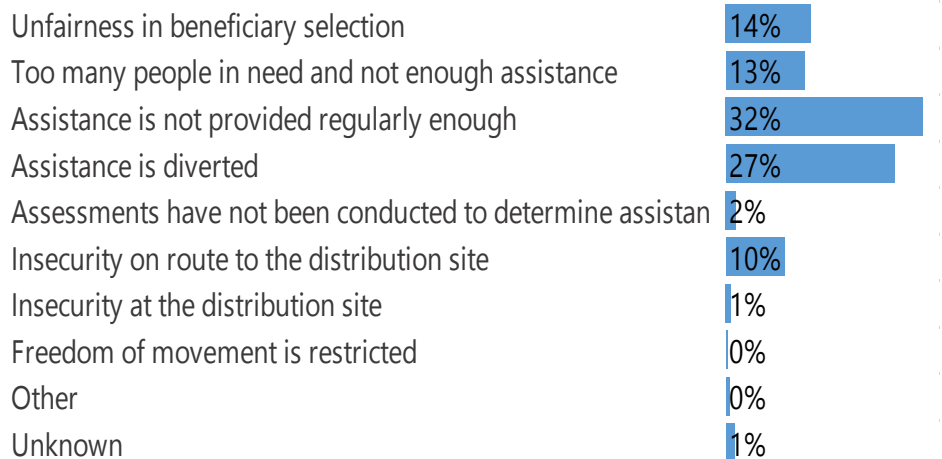
Most vulnerable and in need IDPs receiving humanitarian assistance



Challenges to accessing humanitarian assistance for the IDPs



Specified Challenges to accessing humanitarian assistance for the IDPs



Turning to identified **returnee** locations, by frequency of response, food assistance was once again reported as the most recent type of assistance provided; with WASH, and Shelter or NFI assistance coming in at a distant second and third place, respectively. In terms of numbers, key informants indicated that a total of 83,205 returnee households and 139,276 non-displaced households received one of these assistance types recently, the majority of which can be assumed to be food assistance.

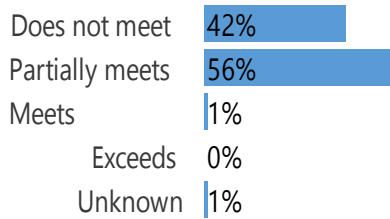
### 3 most recent types of assistance provided

	Most Recent 1	Most Recent 2	Most Recent 3
Food	80%	62%	68%
NFIs	0%	1%	2%
Shelter	1%	1%	1%
WASH	0%	3%	2%
Cash assistance	0%	1%	3%
Livelihoods grants/support	0%	0%	0%
Legal counselling	0%	0%	1%
Winterization NFIs	0%	0%	0%
Shelter Winterization	0%	0%	1%
Psychosocial counselling	0%	0%	0%
Medical supplies	0%	0%	1%
Health services	0%	1%	2%
Legal representation	0%	0%	0%
Unknown	0%	0%	1%
None	17%	27%	17%
Other	1%	3%	3%

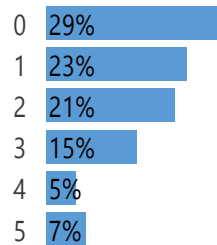
Within identified returnee locations, when asked whether humanitarian assistance was supporting the community in meeting priority needs, 54% of key informants indicated that it does so partially, and 44% reported that it does not. Notably, the majority of key informants indicated that the returnee / non-displaced community did not have any - or had insufficient - information

needed to access humanitarian assistance (76% of responses fell within the 0 to 2 scale). Furthermore, 78% of key informants indicated that the returnee / non-displaced community were not aware of how to provide feedback or make a complaint to humanitarian agencies. Moreover, the majority of key informants stated that the returnee / non-displaced community did not feel involved at all - or sufficiently involved - in the way humanitarian assistance is provided (75% of responses fell within the 0 to 2 scale).

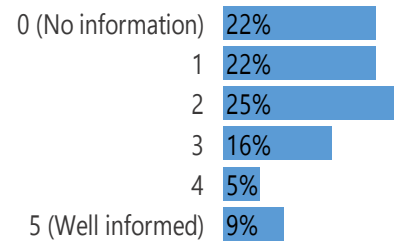
Humanitarian assistance meeting priority needs of community



Community has information they need to access humanitarian assistance

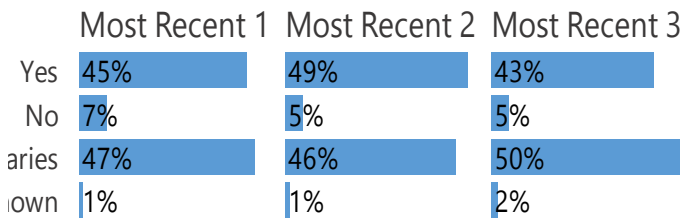


Community feels involved in the way the humanitarian assistance is provided

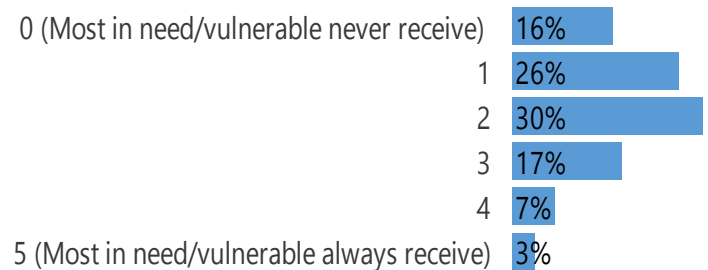


In addition, in returnee locations the majority of key informants stated that those most in need/vulnerable either never received assistance or they received it insufficiently (68% of responses fell within the 0 to 2 scale). Indeed, 63% of key informants in identified returnee locations confirmed that returnees faced challenges in accessing assistance. Key informants indicated that the top three challenges returnees faced with respect to accessing humanitarian assistance were: assistance is not provided regularly enough (32%); assistance is diverted (26%); and too many people were in need of assistance and there was not enough assistance (18%).

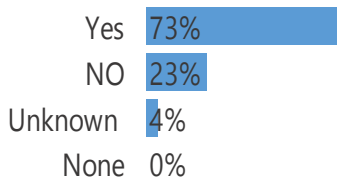
Assistance reached the most vulnerable



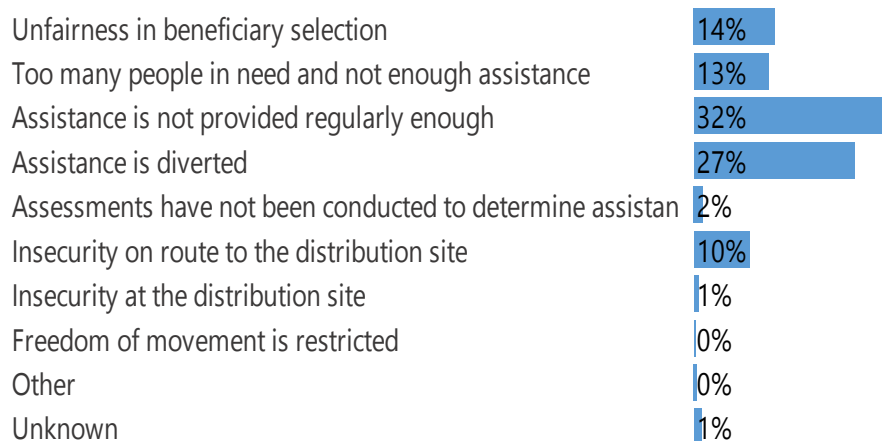
Most vulnerable and in need IDPs receiving humanitarian assistance



Challenges to accessing humanitarian assistance for the IDPs



Specified Challenges to accessing humanitarian assistance for the IDPs



While the data on perceptions of humanitarian assistance is certainly negative, it is important to consider the context in which humanitarian actors operate in Yemen, as well as the progress that has been made since the data for this multi-cluster location assessment was collected in August-September 2016. For instance, it should be noted that UNHCR through its implementing partner AMideast used to operate an IDP Call Centre in Yemen – called Tawasul (meaning dialogue in Arabic) – from December 2015 to April 2016. The Call Centre served as a common service for the entire humanitarian community, providing IDPs, returnees and host community members with information about humanitarian assistance. It also served as a feedback/complaint mechanism in relation to humanitarian assistance. However, the IDP Call Centre was suspended by the authorities in April 2016. Negotiations with the authorities to reactivate the Call Centre in 2017 are ongoing.

In the meantime, with the support of the Community Engagement Working Group (CE WG) – a technical working group of the Inter-Cluster Coordination Mechanism (ICCM) – an Accountability to Affected Populations (AAP) Framework was adopted by the humanitarian community in Yemen in November 2016. The Framework aims to support clusters and organizations to operationalise accountability through community engagement activities, particularly information provision, participation and feedback components. The commitment to AAP was central to the development of the 2017 Yemen Humanitarian Response Plan (YHRP) as all humanitarian actors who are coordinated under this plan committed to adopting the AAP Framework within their respective organizations. Clusters are operationalizing the AAP Framework, supporting their members to engage in coordinated participatory needs assessments, developing or strengthening feedback and complaint mechanisms, as well as providing relevant information to affected community members in accordance with their information needs.

However, lack of funds, coupled with continued conflict and access constraints imposed by parties to the conflict, have severely hampered the level of response. As of year end, the 2016 YHRP received only 60% funding against the \$1.6 billion appeal. Moreover, aid diversion is a recognized problem faced by UN agencies and I/NGO partners, for which there are no easy solutions. More humanitarian organizations are engaging in direct and third party monitoring as a means to monitor and address these challenges. With respect to beneficiary selection, cluster-specific vulnerability criteria are in place, however, these have not been widely disseminated among affected populations and local authorities, nor have affected populations contributed to defining the criteria, which can lead to the perception of unfair beneficiary selection. On a positive note, as part of development of the HNO 2017, Clusters utilized the data from this multi-cluster location assessment to conduct district-level severity scoring, and this translated into geographic targeting of areas with the most acute needs in the YHRP 2017.

## TFPM SERVICES AND CONTACTS

The TFPM's multi-cluster location assessment aims to inform the humanitarian response in Yemen through the implementation of an in-depth and coordinated multi-sectoral location based assessment. The assessment has allowed access to a greater breadth and depth of information that was used to inform needs and gap analysis, humanitarian response planning and targeted interventions in Yemen. In addition to the analysis, charts, graphs and tables included in this report, the full dataset is being released with this report on the [www.humanitarianresponse.info](http://www.humanitarianresponse.info) website. This includes pivot tables for IDP, host returnee and non-displaced populations, which allows for the manipulation of the fields included in the dataset to generate specific data. The TFPM is willing and able to generate data based on specific requests. The contacts within IOM and UNHCR as per their respective areas of operation are as follows:

IOM		UNHCR	
Duncan Sullivan dsullivan@iom.int		Mohammed Khan khanmo@unhcr.org	
<ul style="list-style-type: none"> <li>• Abyan</li> <li>• Aden</li> <li>• Al Bayda</li> <li>• Al Dhale'e</li> <li>• Al Jawf</li> <li>• Al Maharah</li> </ul>	<ul style="list-style-type: none"> <li>• Hadramaut</li> <li>• Ibb</li> <li>• Lahj</li> <li>• Shabwah</li> <li>• Socotra</li> <li>• Taizz</li> </ul>	<ul style="list-style-type: none"> <li>• Al Hudaydah</li> <li>• Al Mahwit</li> <li>• Amanat Al Asimah</li> <li>• Amran Dhamar</li> </ul>	<ul style="list-style-type: none"> <li>• Hajjah</li> <li>• Marib</li> <li>• Raymah</li> <li>• Sa'ada</li> <li>• Sana'a</li> </ul>

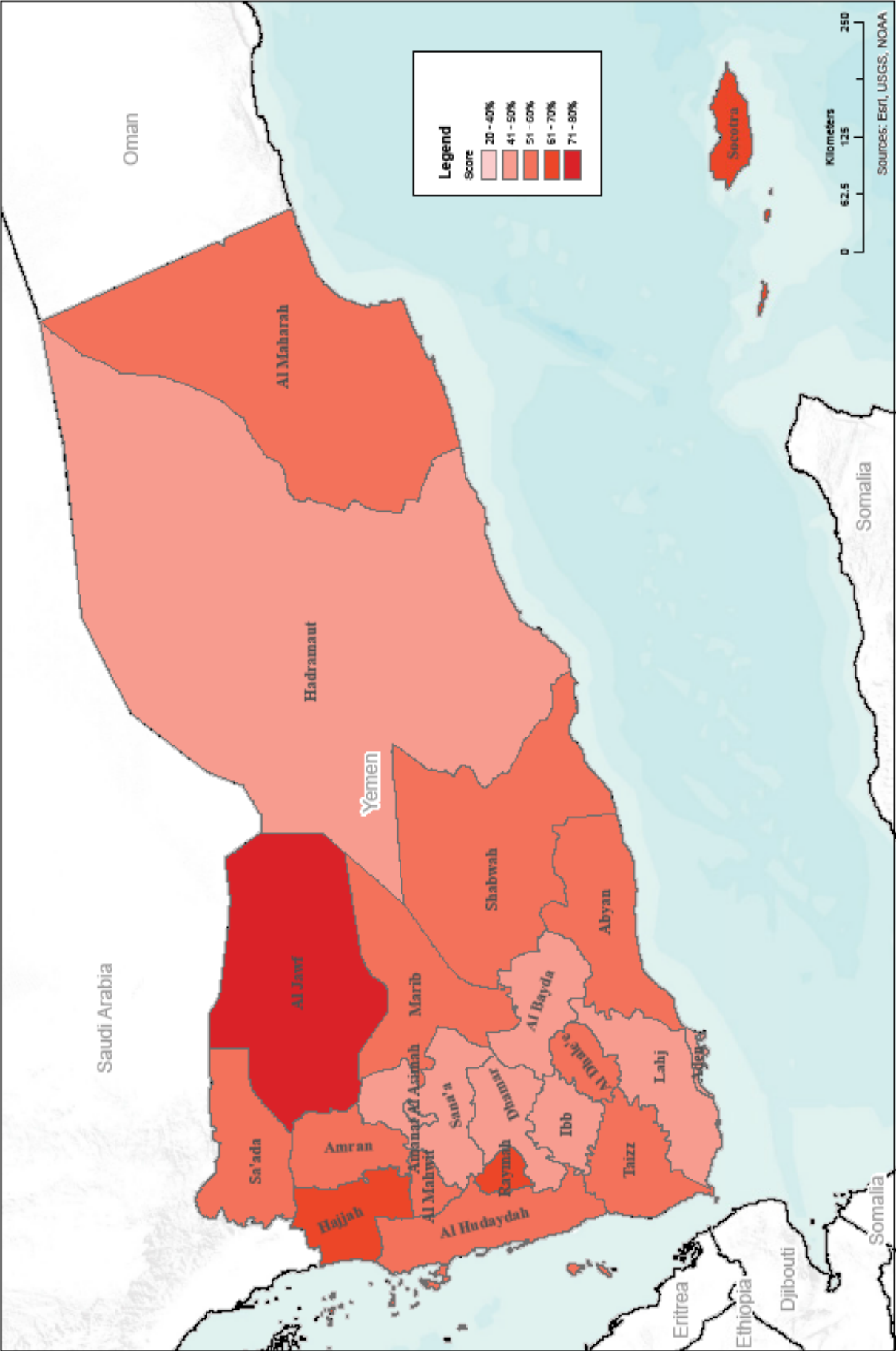
# Annexes

## DATA VISUALIZATION MAPS

- i. Annex 1: A visualization of the data from the Combined IDP Vulnerability Score
- ii. Annex 2: A visualization of the data from the Combined IDP Humanitarian Assistance Score
- iii. Annex 3: A visualization of the data from the Combined Returnee Vulnerability Score
- iv. Annex 4: A visualization of the data from the Combined Returnee Humanitarian Assistance Score



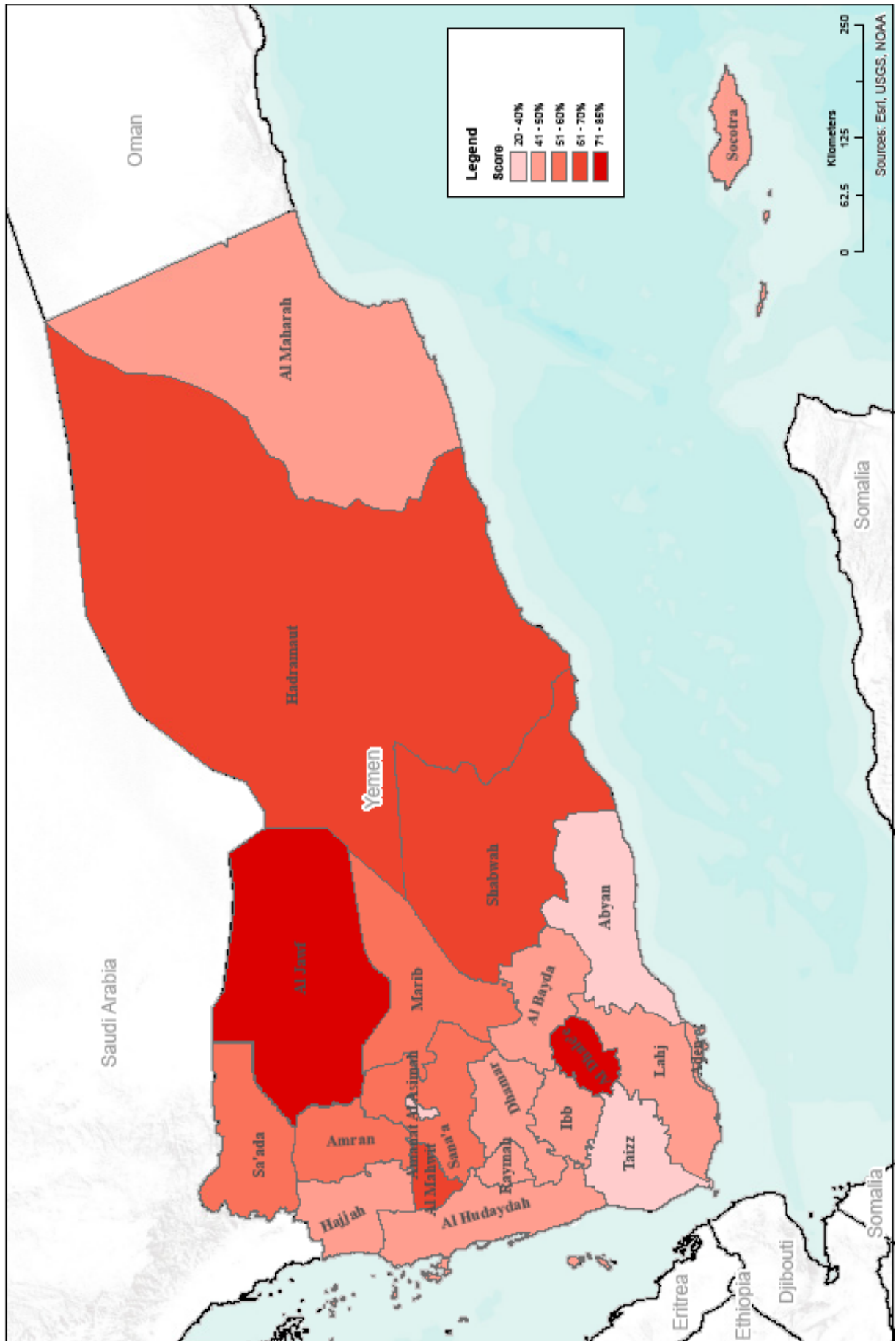
**Combined IDP Vulnerability Score**







**Combined Returnee Humanitarian Assistance Score**



A photograph of two children in a makeshift shelter. The child on the left is a girl wearing a red and white striped headscarf and a patterned jacket. The child on the right is a boy wearing a white headscarf and a dark jacket. They are both holding onto a thick rope that runs across the frame. The background shows a structure made of blue tarps and wooden planks, suggesting a temporary living space. The overall scene is one of displacement and hardship.

**MULTI-CLUSTER NEEDS ASSESSMENT OF IDPS,  
RETURNEES AND HOST COMMUNITIES IN YEMEN**

**TASK FORCE ON POPULATION MOVEMENT (TFPM)**

February 2017