

Impact Assessment of Aid Interventions in Yemen



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Cover photo: A displaced woman at the Dhahra camp in the Al-Safiyah area of Taiz, March 17, 2021 // Sana'a Center photo by Albaraa Mansoor.



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Acronyms

Accountability to Affected Populations.	AAP
Civil Society Organization.	CSO
Community-Based Organization.	CBO
Genuine Score of Impact.	GSI
Humanitarian Action.	HA
Humanitarian Needs Overview.	HNO
Impact Assessment.	IA
Internally Displaced Person.	IDP
International Non-Governmental Organization.	INGO
Internationally Recognized Government.	IRG
Monitoring and Evaluation.	M&E
Process and Localization Assessment.	PLA
Subjective, Participatory, Interpreted, Cross-Checked, Empowering, and Diverse.	SPICED
United Nations Office for the Coordination of Humanitarian Affairs.	UNOCHA
Water, Sanitation, and Hygiene.	WASH

Executive Summary

In aid work, traditional monitoring and evaluation (M&E) processes frequently place a high priority on quantitative indicators and short-term project outcomes. This results in a cursory grasp of the impact of these projects rather than an understanding of the real and long-lasting changes or advantages experienced by beneficiaries and their communities. Furthermore, there is a limited understanding of the complex effects on communities because standard M&E frameworks frequently lack meaningful metrics of stakeholder participation.

This research proposes a novel impact evaluation metric, the Genuine Score of Impact (GSI), for assessing aid programs, which is being piloted through a case-study methodology. Through evaluating the impact of aid interventions in Yemen's Lahj and Marib governorates, the framework examines perceived material wealth, social well-being, and empowerment, highlighting the aspects of aid that contribute to achieving sustainable and genuine impact. By offering detailed insights into how aid affects these factors at the individual, home, community, and institutional levels, the GSI framework tries to account for the difficulties of quantifying the impact of aid.

Geographically, this pilot case study is restricted to two governorates in territories controlled by the internationally recognized government, where local officials helped with access and permits for research and data collecting. The study covers six projects that were completed during the research period. The projects under study entailed interventions in the following clusters: nutrition; food security; water, sanitation, and hygiene (WASH); and health. Because the results are context-specific, they might be difficult to extrapolate to other regions, timeframes, or other kinds of aid initiatives.

Using a mixed methods approach – surveys and interviews – and interpreting the data through the novel GSI framework, the study produced a number of findings.

Summary of Findings

- In Lahj, respondents reported significant health advantages and said community cohesion was enhanced by focused health and sanitation efforts.
- In Marib, respondents said aid mostly offered a temporary respite, with little emphasis on sustainability.
- Across governorates and beneficiary groups, perceptions of aid differed considerably. Members of a control group, exposed to lower levels of aid, complained about unfulfilled needs and governance problems, while aid-targeted communities in Lahj reported greater satisfaction and long-lasting benefits.

- Aid projects in Marib were seen as helpful but mostly short-term, perhaps indicating a need for greater coordination between immediate relief and long-term development objectives to cope with the large internally displaced population.^[1]
- Respondents reported reduced healthcare costs and better access to water in some locations, and dimensional analysis showed that aid helped alleviate beneficiaries' financial burdens.
- Nevertheless, many households in Lahj and Marib continue to rely on short-term assistance, underscoring the need for income-generating initiatives to promote resilience and financial stability.
- Host communities are still under stress due to population displacement, highlighting the significance of social infrastructure. Social solidarity has been reinforced by better access to services, especially in Lahj, and this could be a model for elsewhere.
- Local calls for more localization in planning and execution have been strengthened by the reported discontent and sense of exclusion caused by the absence of transparent and participatory procedures.
- Women were more optimistic about the financial, social, and empowerment effects of aid, especially infrastructure improvements like water points. Although they encountered obstacles, including uneven service delivery, they also reported better health and hygiene outcomes.
- Women were less likely to generate a steady income from initial monetary assistance, suggesting a higher level of financial dependence. They did not feel excluded from local committees involved in project planning but reported little influence over decisions.
- Men and women reported similarly limited levels of knowledge about project management and funding, especially when it came to international aid initiatives. The benefits of health and water programs in lowering community tensions, especially in internally displaced person (IDP) contexts, were also emphasized by female respondents.
- Projects that included infrastructure and economic empowerment activities were perceived by those targeted as being more effective in creating community resilience than those that did not include such activities.
- Where processes were more localized, beneficiaries' perception of their impact was higher. This suggests integrating support for livelihoods with efforts to strengthen infrastructure and foster community ownership of aid projects could enhance perceptions of sustainability.

[1] "Marib Field Office site profile, February 2024," UNHCR, March 21, 2024, <https://data.unhcr.org/en/documents/details/107496>

Summary of Recommendations

For Humanitarian Organizations and Donors:

- Economic Empowerment: Shift from direct aid to cash-based assistance, integrating vocational training, microfinance, and small business support to foster resilience.
- Health and Social Services: Invest in maternal and children's health, strengthen local healthcare, and ensure education continuity for displaced children.
- Sustainable Infrastructure: Prioritize water, sanitation, and flood mitigation projects, ensuring local maintenance and long-term impact.
- Monitoring and Evaluation: Strengthen post-project evaluations and update the Gender and Social Inclusion framework.

For Community-Based and Civil-Society Organizations (CBOs and CSOs):

- Community Engagement: Involve local actors in planning and governance to foster ownership and trust.
- Localization and Transparency: Strengthen partnerships, improve communication on aid priorities, and enhance accessibility.

For the Government and Local Authorities:

- Women's Leadership: Support women's roles in community initiatives and provide skills training for long-term impact.
- Regional Focus:
 - Marib: Prioritize economic empowerment and include host communities to ease IDP tensions.
 - Lahj: Focus on sustainable infrastructure and strengthen partnerships with local actors.

While the GSI framework is piloted in this study, subsequent evaluations will enhance it. The GSI framework could be useful as a guide for the shift from relief-focused aid to longer-term, resilience-building development and provide an additional tool for policymakers and aid organizations to use in Yemen and beyond. The dependency-resilience duality of donor-led and internationally driven initiatives might also be addressed by refocusing attention on the ecology of relief and humanitarian action. Overall, this study aims to offer more thorough, nuanced evaluations of the social and long-term effects of relief and development interventions than traditional M&E methods.

Introduction

Yemen's multifaceted challenges, including conflict, instability, and socioeconomic disparities, necessitate effective humanitarian action and development interventions. However, traditional monitoring and evaluation (M&E) efforts often fall short of capturing their nuanced social and sustainable impacts, or lack thereof. They especially fail to measure the degree to which an intervention is localized and how or whether localization impacts the efficacy of the aid being provided.

Traditional M&E approaches in humanitarian and development contexts often prioritize quantitative metrics and short-term project outcomes, leading to a superficial understanding of their impact measured against baseline data, which is rarely available. These methods tend to focus heavily on outputs, such as the number of beneficiaries reached or activities conducted, rather than on outcomes and impact, which relate to actual and sustained changes or benefits experienced by beneficiaries and their communities. This emphasis on output can result in interventions that appear successful on paper but which fail to address underlying issues or generate lasting positive change. Moreover, traditional M&E frameworks often lack meaningful measures of stakeholder engagement, particularly for those directly affected by interventions, leading to a limited understanding of the nuanced impact on communities. Life-saving humanitarian assistance projects have extremely short timelines, meaning that there is limited accountability to affected populations (AAP).^{[3][3]} Likewise, these approaches may not adequately measure social and sustainable impact, neglecting critical aspects like local ownership, social cohesion, resilience, agency, and long-term sustainability.

This study argues that a more holistic impact assessment of aid interventions in Yemen and elsewhere can be achieved through a combination of comprehensive data collection methods, meaningful stakeholder engagement, a focus on long-term outcomes and sustainability, and an emphasis on subjective assessments of social impact and empowerment by beneficiaries. It builds on the author's findings in two other reports published by the Sana'a Center for Strategic Studies on the shift from humanitarian to development assistance in Yemen and the importance of participatory, locally driven approaches to aid implementation.^[4]

The research employs a case-study approach to pilot an impact assessment formula designed by the research team to evaluate aid programs. Used in conjunction with stakeholder interviews, it seeks to provide deeper, more nuanced assessments of the social and sustainable impacts of aid projects than conventional M&E approaches.

[3] AAP is defined as "an active commitment to use power responsibly by taking account of, giving account to, and being held to account by the people humanitarian organisations seek to assist." "Accountability to Affected Populations (AAP): A brief overview," Inter-Agency Standing Committee, 2015, https://interagencystandingcommittee.org/sites/default/files/migrated/2015-12/iasc_aap_psea_2_pager_for_hc.pdf

[3] "Report: Inter-Agency Humanitarian Evaluation of the Yemen Crisis," Inter-Agency Humanitarian Evaluation, July 2022, p. XVI, <https://reliefweb.int/report/yemen/inter-agency-humanitarian-evaluation-iache-yemen-crisis>

[4] Nadia Al-Sakkaf, Alex Harper, and Joel Thorpe, "Development is Coming: Be Careful What You Wish For," Sana'a Center For Strategic Studies, March 8, 2024. <https://sanaacenter.org/publications/main-publications/21886>; Nadia Al-Sakkaf, "Localizing Aid and Development in Yemen," Sana'a Center For Strategic Studies, October 25, 2024, <https://sanaacenter.org/publications/main-publications/23687>

This new tool, which assigns a Genuine Score of Impact (GSI), is intended to help better measure the impacts of projects and guide the design of future interventions. By shifting emphasis to the ecosystem of relief and humanitarian action, the dependency-resilience dichotomy of donor-led and internationally driven interventions might also be better addressed.

This paper uses the GSI to evaluate different types of aid interventions, including those intended to provide both short-term, life-saving assistance and longer-term development. While this may seem counterintuitive, the intent is to focus on the lived experience of the beneficiaries that interventions are intended to assist and the actual benefits afforded them by aid. In areas of protracted crisis, such as Yemen, “short-term” assistance is being provided year after year. In such contexts, the lines between humanitarian and development aid often become blurred, and it is necessary to interrogate the sustainable benefits of all aid programs, regardless of their intended scope. There is a growing body of literature on the interplay and evaluation of humanitarian and development work in protracted crises and its evaluation.^[5]

International assistance to Yemen peaked in 2018, with reported contributions reaching US\$5.24 billion.^[6] The GSI was applied to selected aid projects in Marib and Lahj governorates undertaken from 2019-2024 to assess the degree of meaningful change brought about on the ground in the targeted districts, which are all under the control of the internationally recognized Yemeni government. This report concludes with practical policy recommendations based on what was assessed to have worked in those areas and advice on how to ensure the sustainability of aid interventions in a complex context while being sensitive to local ownership.

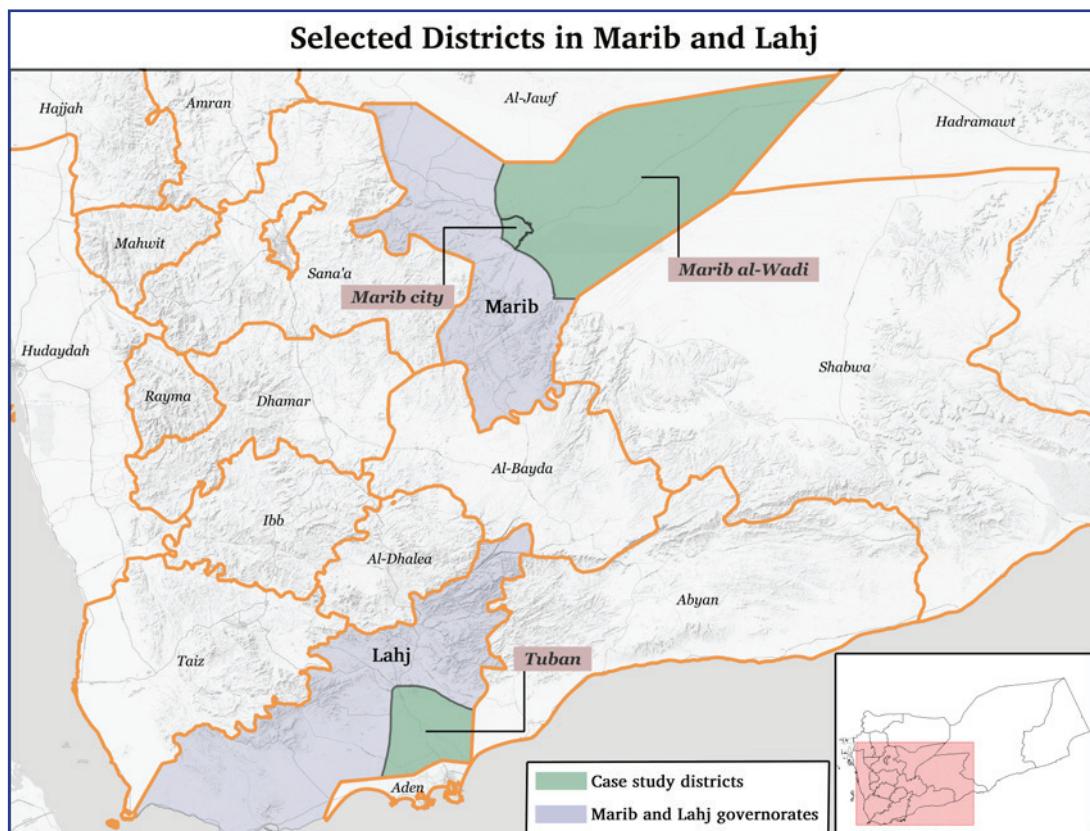
[5] See: Shehu, M., Abba, A. "Humanitarian crisis and sustainable development: perspectives and preferences of internally displaced persons in the northeastern Nigeria," *Int J Humanitarian Action* 5, 17 (2020), <https://doi.org/10.1186/s41018-020-00084-2>; Corbett, C. J., Pedraza-Martinez, A. J., and Van Wassenhove, L. N., "Sustainable humanitarian operations: An integrated perspective," *Production and Operations Management*, 31(12), 4393-4406, (2022), <https://doi.org/10.1111/poms.13848>; "Protracted conflict and humanitarian action: some recent ICRC experiences" International Committee of the Red Cross, Geneva, 2016, https://www.icrc.org/sites/default/files/document/file_list/protracted_conflict_and_humanitarian_action_icrc_report_lr_29.08.16.pdf?utm_; "Humanitarian Action and Sustaining Peace," International Peace Institute, March 2018, <https://www.ipinst.org/wp-content/uploads/2018/03/0306-Humanitarian-Action-and-Sustaining-Peace.pdf>; Michael VanRooyen, "The Need for Humanitarian Research: Addressing Emerging Challenges in a Complex World," Harvard Humanitarian Initiative, September 5, 2024, <https://hhi.harvard.edu/news/need-humanitarian-research-addressing-emerging-challenges-complex-world>; Bain LE, Ngwaya Nkfusai C, Nehwu Kiseh P, Badru OA, Anne Omam L, Adeagbo OA, Desmond Ebuenyi I, Malunga G, Kongnyuy E., "Community-engagement in research in humanitarian settings," Front Public Health. August 2023, <https://pmc.ncbi.nlm.nih.gov/articles/PMC10470624/>

[6] "Yemen 2018," (Country Summary), Financial Tracking Service, United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), <https://fts.unocha.org/countries/248/summary/2018>

Methodology

Researchers conducted an in-depth impact assessment of specific aid projects implemented between 2019 and 2024 in three government-controlled districts located in Marib and Lahj governorates (see Figure 1).^[7] The study's parameters required at least six months between a project's implementation and the impact assessment.

Figure 1.



Researchers used three main criteria to select districts in Marib and Lahj as case studies: the presence of relief interventions based on need;^[8] the accessibility of targeted communities; and the availability of local data collectors who could safely and reliably collect data from beneficiaries. The presence of active local civil society organizations (CSOs) on the ground, local humanitarian action (HA) implementing partners, and/or other local entities were considered as enabling factors.

[7] Marib city and Marib al-Wadi districts in Marib, and Tuban district in Lahj.

[8] "Yemen Humanitarian Needs Overview 2024," UNOCHA, February 1, 2024, https://reliefweb.int/report/yemen/yemen-humanitarian-needs-overview-2024-january-2024-enar?gad_source=1andgclid=CjwKCAjw5Ky1BhAgEiwA5jGujmzMGim24TGy5p2S2yX4kSvObXbl_WiHTxAhHzBhhXhyZTYsPy9jWhoCtkMQAvD_BwE

The impact assessment formula developed by the research team to evaluate whether aid created meaningful change was derived from existing proposals for improved evaluation techniques^[9] as well as local expertise and input from beneficiaries.^[10] The research team designed a set of indicators to measure short- and long-term impacts at the individual and community levels. These indicators were translated into quantitative metrics to provide a Genuine Score of Impact (GSI) for the selected projects. The GSI was validated through 16 qualitative interviews with relevant stakeholders (see Annex A), half of whom were representatives of beneficiaries and local communities. This feedback was integrated into the study. This iterative approach ensured meaningful stakeholder engagement and the inclusion of the local communities' perspectives, needs, and priorities.

[9] Building on the three-dimensional impact assessment approach presented by Chris Roche in *Impact Assessment for Development Agencies: Learning to Value Change*, (Oxford: Oxfam GB, 1999), and Victor Jakupec and Max Kelly, eds., *Assessing the Impact of Foreign Aid: Value for Money and Aid for Trade*, (San Diego: Elsevier Science and Technology, 2016).

[10] Beneficiaries participated in providing responses to the questions. The field research team was fully oriented to the project design, data collection methodology, and protocols. They provided feedback on questions in the initial training as part of refining the tools. Additionally, informal interviews were conducted with various stakeholders to validate the research methodology and to contribute to ideas and shape the approach.

Data Collection and Analysis

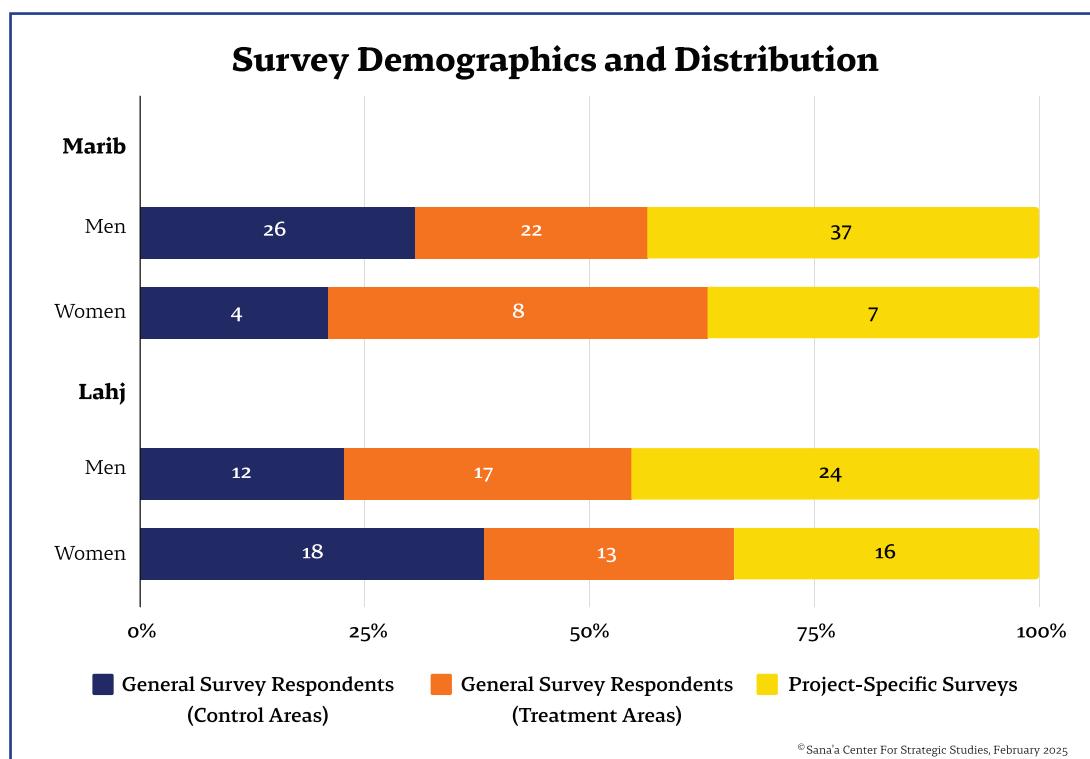
GSI data was generated through eight survey instruments with the objective of evaluating the overall impact of aid and its sustainability in improving the lives of beneficiary communities. Six survey tools were tailored to assess each of the six aid projects studied, while two were designed as general surveys of two separate populations.

One of the general surveys targeted areas with high levels of aid (the treatment group), and the other focused on areas with minimal intervention (the control group). These general surveys were administered in comparable locations in Marib and Lahj. Altogether, surveys were administered to 204 respondents, 104 of whom were in Marib and 100 in Lahj. Only 18 percent of the Marib respondents were women due to the difficulties of locating respondents given the area's conservative nature, whereas 47 percent of Lahj respondents were women (see Figure 2).

The survey sampling method for the control group was a randomized sampling of communities in similar contexts within the treatment governorates but which had received minimal aid due to their remoteness, limited budgets, and other logistical and financial constraints.

Treatment group selection adopted a purposive sampling method, a non-probability technique widely used in qualitative research. This method allows the researcher to intentionally select cases and participants most relevant to the research objectives, ensuring a rich and deep understanding of the subject matter.

A stratified random sampling method was adopted for the surveys to ensure the representation of different beneficiary groups. This was complemented by snowball sampling to identify and include marginalized or hard-to-reach groups. The surveys were designed in Arabic; enumerators went physically to the target areas and used the [Kobo Toolbox](#) system to collect the data.

Figure 2.

Purposive sampling was used to identify interviewees. Criteria for selecting interviewees included their relevance to the research topic, diversity and inclusion considerations, and their impact on the evaluated projects and communities in the target areas. They represented a wide range of actors involved in humanitarian aid, including donors, international non-governmental organizations (INGOs), government officials and local authorities, CSO representatives, and local community leaders. Seven of those interviewed were directly involved in executing the projects studied, three were solely project beneficiaries, five were community leaders, and one was an economic expert focusing on the private sector. Access to interviewees, survey communities, and stakeholders was facilitated through the government's Ministry of Planning and International Cooperation as well as through coordination with donors and the research teams' contacts.

Secondary data sources used in this study included donor, INGO, government, and local CSO reports on the selected projects within the research timeframe; academic publications, including relevant research articles and case studies from peer-reviewed journals; credible media reports providing context and updates on relevant issues in the selected areas; and project evaluations and reviews of humanitarian interventions by implementing organizations and other credible entities. This was followed by stakeholder interviews to provide more qualitative explanations for the survey data and desk research.^[ii]

^[ii] A list of interviewees is available in Annex A.

In addition to research team expertise, observations from local data collectors were used to assess project sites and activities for data validation, and field team observations were included as part of the local data collection process.

Having a control group provided a measure of comparison for outcome variability. Quantitative findings from the survey were analyzed using basic statistical tools to identify trends and impact metrics, while qualitative data derived from the interviews, as well as the limited open survey questions, were thematically analyzed. Finally, data and research team observations were triangulated, with the combination providing comprehensive insights for conclusions and solid recommendations.

It is important to note that this study, as an assessment of aid initiatives, adopted a conflict-sensitive approach in line with the AAP framework. The study also adopted a do-no-harm approach in that researchers acquired the informed consent of target groups, implementers, and donors. Due to sensitivities in Yemen, the names of the interviewees and the projects selected have been omitted.

Limitations

This is a pilot case study, limited geographically to government-controlled areas in two governorates where local authorities assisted with access, research, and data collection permits. It provides evidence from six projects within the study timeframe. The projects studied were limited to interventions in health care; water, sanitation, and hygiene (WASH); food security; and nutrition, as these were the main areas of intervention and the areas with the highest levels of need. The findings are highly context-specific and may not easily be generalized to other areas of the country, other timeframes, or other types of interventions.

Although designed to discern meaningful change in a way conventional impact assessments do not, the GSI metric is an experimental tool being used in the field for the first time. For this reason, inherent limitations exist despite the mitigation efforts made through data triangulation, as noted above. The GSI tool can be improved through subsequent assessments, and the refinement process already underway relies in part on lessons learned in this pilot case study.

Operational limitations stemming from the nature of the target areas, research topic, and methodology include:

- Security Constraints: The volatile security situation hindered access to some key informants and stakeholders, limiting the scope of primary data collection.
- Participant Availability and Safety: Some key stakeholders – beneficiaries, community leaders, and whistleblowers among donors and INGOs – were unavailable or unwilling to participate due to ongoing conflicts, political sensitivities, distrust, or confidentiality concerns.
- Bias in Responses: Participants may have provided biased or self-censored information, especially in politically sensitive or conflict-prone areas. Respondents may have thought that their receiving aid depended on their feedback, and this could have swayed their answers. To mitigate this, enumerators noted that there would be no connection to assistance received or requested when obtaining informed consent.^[12]
- Gender Dimensions: The limited number of female survey respondents (66 of 204 overall, or 32 percent), especially in Marib (19 of 104, or 18 percent) and among key informants (five of 16), constrained gender-differentiated insights.

^[12] Sawsan Al-Refaei, "The security implications of using feminist methodologies to study gender-based violence in Yemen," *Frontiers in Research Metrics and Analytics*, Vol. 9, p. 5, November 18, 2024, <https://www.frontiersin.org/journals/research-metrics-and-analytics/articles/10.3389/frma.2024.1333266/full>

Part I. Theoretical Framework: Measuring the Impact of Aid

Humanitarian assistance is the primary funding mechanism for countries impacted by conflict and natural disasters. It is designed to be short-term in nature, addressing immediate, life-saving needs. For protracted emergencies such as in Yemen, research has shown that in addition to humanitarian assistance, sustainable community resilience projects and longer-term development investments are needed.^[13]

It also has been established that humanitarian assistance can sometimes benefit from being more localized.^[14] A 2020 report on the effectiveness of communication and community engagement in Yemen found that beneficiaries of aid projects “called for more robust transparency and accountability measures to rebuild trust between the affected population and the sector as a whole.”^[15] Better communication and engagement between implementers and donors on the one hand and the local community on the other might ensure the community’s best interests are served. Currently, communication and community engagement tend to unintentionally endorse existing power inequalities.^[16] Other studies suggest integrating feedback from beneficiaries in all stages of the process to achieve the maximum impact and create long-term sustainable changes in the community.^[17]

Impact assessments do not always capture the effectiveness of aid. The 2005 Paris Declaration on Aid Effectiveness cited the need to focus on coordination and harmonization between donors and the effectiveness of the delivery of aid.^[18] More recent discourses on aid impact are gradually taking into account questions of partner engagement, localization, the long-term interplay between aid and development, and inclusivity by engaging other stakeholders, such as the private sector and civil society, in planning.^[19] However, terms like “value for money” and “the three Es” (economy, efficiency, and effectiveness) remain dominant in aid frameworks, sometimes dehumanizing the process and turning it into a transactional relationship between rich and poor countries. Global indices related to developmental outcomes and priorities are driven by quantitative data, a preference for generic analyses and policies, and often result in one-size-fits-all or blanket interventions, which may, in fact, “do harm.”

^[13] Nadia Al-Sakkaf, Alex Harper, and Joel Thorpe, “Development is Coming: Be Careful What You Wish For,” Sana'a Center For Strategic Studies, March 8, 2024, <https://sanaacenter.org/publications/main-publications/21886>;

^[14] Nadia Al-Sakkaf, “Localizing Aid and Development in Yemen,” Sana'a Center For Strategic Studies, October 25, 2024, <https://sanaacenter.org/publications/main-publications/23687>

^[15] Sherine El Taraboulsi-McCarthy, Yazeed Al Jeddawy, and Kerrie Holloway, “Accountability dilemmas and collective approaches to communication and community engagement in Yemen,” ODI Global, July 14, 2020, p. 27. <https://odi.org/en/publications/accountability-dilemmas-and-collective-approaches-to-communication-and-community-engagement-in-yemen/>

^[16] Ibid.

^[17] Nadia Al-Sakkaf, “Localizing Aid and Development in Yemen,” Sana'a Center For Strategic Studies, October 25, 2024, <https://sanaacenter.org/publications/main-publications/23687>

^[18] “Paris Declaration on Aid Effectiveness,” OECD Publishing, 2005, <http://dx.doi.org/10.1787/9789264098084-en>

^[19] Victor Jakupc and Max Kelly, eds., *Assessing the Impact of Foreign Aid: Value for Money and Aid for Trade*, (San Diego: Elsevier Science and Technology, 2016), p.53.

Impact Assessments (IAs) seek to measure the various aspects of change occurring on the ground as a result of aid projects or interventions for targeted groups or beneficiaries, including economic, political, socio-cultural, environmental, and even legal dimensions, against planned or anticipated impacts.^[20] Chris Roche defined them as the “systematic analysis of the lasting or significant changes – positive or negative, intended or not – in people’s lives brought about by a given action or series of actions.”^[21]

As a rule of thumb, the justification for funding foreign aid initiatives is that doing so has a major and positive impact on the lives of those living in recipient countries. The fundamental tenet of development assistance, as embodied in the architecture of the global development system, a Goliath in all of its manifestations, is that it fosters improved outcomes (i.e., the Millennium Development Goals or Sustainable Development Goals), which the international community is ostensibly committed to.^[22] Therefore, a measurement of the impact of a certain intervention needs to account for its effects on diverse aspects of human development, including social, economic, and cultural components.^[23]

Impact Assessment Indicators and the GSI

When measuring change, it is critical to focus on assessment indicators in terms of types (input, output, process, outcome, or impact), properties (specific, measurable, valid, comparable, relevant, etc.), and units (people, time, geography, family, etc.). It is also important to shift the measurement process at the outset from input, process, and output indicators to outcome and impact ones.^[24] This means a project's success is not assessed by the amount of funding, dedicated personnel, etc. (input indicators); the number of applications, signed agreements, or people reached in the implementation of the project, etc. (process indicators); or by the number of participants, beneficiaries, events, workshops, training, or distributed items such as food baskets, etc. (output indicators). Rather, the focus should be on changed behavior, improved health and well-being, increased mobility, access to resources, etc. (outcome/impact indicators).

Impact takes time to be realized, indicators can lag, and there are often questions of attribution or causality. It is easy to say that X number of women learned how to make dresses because of a specific livelihood project. It is harder to attribute their increased empowerment or the improved well-being of their family in a couple of years to that project's activities. This is why aid projects require cyclic processes and close coordination with local communities and partner organizations, which are best placed to report on genuine impact and lessons learned.

^[20] Ibid, p. 22.

^[21] Chris Roche, *Impact Assessment for Development Agencies: Learning to Value Change*. (Oxford: Oxfam GB, 1999), p. 21.

^[22] Rory Horner, “Towards a new paradigm of global development? Beyond the limits of international development,” *Progress in Human Geography*, 44(3), 415-436, March 19, 2019, <https://doi.org/10.1177/0309132519836158>

^[23] Victor Jakupc and Max Kelly, eds., *Assessing the Impact of Foreign Aid: Value for Money and Aid for Trade*, (San Diego: Elsevier Science and Technology, 2016), p.11.

^[24] Input/output indicators are more common with evaluations of humanitarian assistance and found much less often in development circles. However, even with rapid humanitarian assistance, there is a recognized need to focus on sustainable change and impact, especially in prolonged crises such as in Yemen.

According to Roche's framework, there are three general dimensions of impact indicators: material wealth, which includes asset income, status, wages, expenditure, food security, quality of diet, and dependency on money lenders or food aid; social well-being (or human capital), relating to health, water and sanitation, education and knowledge, security and safety, skills and capacities, networks or social capital, and risk of exposure to violence, including gender-based violence; and empowerment (or political capital), including ownership and control over assets, perception of well-being and quality of life, participation in decision-making and public institutions, access to public resources, dependency and mobility, and control over reproductive health (for women in particular).^[25] These indicators are typically measured and defined using SMART performance metrics (Specific, Measurable, Achievable, Relevant, and Timebound). Roche proposed SPICED, a more critical measurement method, which stands for Subjective, Participatory, Interpreted, Cross-checked, Empowering, and Diverse.^[26]

The GSI, inspired by Roche and piloted in this study, is structured around the three core dimensions of impact – material wealth, social well-being, and empowerment, with each dimension evaluated on four levels: individual, household/family, group/community, and enabling environment/institutional.^[27] GSI calculations also took into account the processes involved in implementing aid and the degree to which aid initiatives were localized using the SPICED framework, using cyclic measurement and an iterative process to define indicators across the lifetime of intervention. This additional evaluation is presented in this study as the Process and Localization Assessment (PLA).

Calculating GSI

For each of the three dimensions and the process assessment, sub-scores were calculated by averaging the percentage of positive responses for relevant survey questions and then scaling the result to a 10-point scale. During the survey design, each of the dimensions was addressed through several questions, with three possible answers indicating a positive, neutral, or negative perceived impact or consequences. For example, a question on material wealth could be phrased: "Did you save money on water due to being a beneficiary of Project X?" Possible answers could be, "Yes," "No difference," or "The project made my financial situation worse."^[28]

The percentage of the positive responses was aggregated for each dimension, and an average was calculated to provide the associated subscore.

^[25] Chris Roche, *Impact Assessment for Development Agencies: Learning to Value Change*, (Oxford: Oxfam GB, 1999), p. 45.

^[26] Ibid., pp. 49-50. *Subjective* relates to understanding that key informants, beneficiaries, and other stakeholders have special positions or experience that give them unique insights. *Participatory* means that indicators should be developed with those best placed to assess them, including project beneficiaries, local staff, and other stakeholders. *Interpreted* refers to the need to communicate and explain locally-defined indicators to stakeholders because their significance may not be clear beyond the local context. *Cross-checked* refers to ensuring validity by comparing progress across indicators and using additional methods to verify findings. Empowering reflects the extent of self-determination in developing and assessing indicators, with *empowering* processes allowing stakeholders to reflect critically on their changing situation. *Diverse* indicates there should be a deliberate effort to seek out indicators relevant to a range of groups and across genders. Such data needs to be recorded to allow differences to be assessed over time.

^[27] Annex B details the pros and cons of including specific levels in any given assessment.

^[28] A sample of the survey questions is available in Annex C.

The final GSI for the project was calculated by combining scores from the three dimensions of impact: Material Wealth (MW), Social Well-being (SW), and Empowerment (E), with the Process and Localization Assessment (PLA). Each dimension and process category was scored on a scale from 0 to 10, and the final GSI was a weighted average of these scores.

Figure 3.

The GSI Formula

$$\text{GSI} = (0.3 * \text{MW}) + (0.3 * \text{SW}) + (0.3 * \text{E}) + (0.1 * \text{PLA})$$

A Note on the GSI Scoring System

The three dimensions of impact were given equal weight in the GSI calculation for this study. A more nuanced approach is advisable when a sensitivity analysis determines certain dimensions should be weighted more heavily based on project goals, beneficiary needs, or context. This flexibility makes the GSI adaptable to different types of interventions. The same consideration could be made to the PLA, whose weighting could be changed. Process and localization indicators could also be reflected in each of the three dimensions, ensuring consideration of their influence on all aspects of impact.

Part II. Findings and Analysis from General Surveys

Impact of Aid: Perceptions of Local Communities

The 2024 Yemen Humanitarian Needs Overview (HNO) identified more than 18 million Yemenis in need, 76 percent of them women and children.^[29] Marib governorate, one of the worst conflict zones in Yemen, is among the areas of highest need.^[30] Both Marib and Lahj have experienced war-related violence and face challenges related to the influx of internally displaced persons (IDPs), extreme poverty, water scarcity, climate change, and extreme weather phenomena. Acute child malnutrition, food insecurity, and the spread of infectious diseases keep both areas on international aid groups' radar.

An estimated 90 percent of Marib's 1.6 million people are IDPs.^[31] For this study, projects implemented in Marib al-Wadi district and Marib city were analyzed. More than 100 IDP sites exist in these two districts alone.^[32] For the general survey, the research team selected the following parts of Marib city as treatment areas: Al-Waidhina, Hawsh Al-Jamiya, Al-Sailah, and Al-Arbaieen. The control areas for the general survey, also in Marib city, were Al-Matar and Al-Mujama Hay al-Jamaia. Project assessments were conducted in Wahshan al-Ghabri, Al-Arbaieen, Al-Howidhina, Al-Sailah, and Hawsh al-Jaamia.

Lahj is now home to tens of thousands of IDPs from throughout Yemen in addition to its refugee camps hosting mostly Ethiopian and Somalian migrants.^{[33][34]} For this study, the research team focused on Tuban district. For the general survey, the selected treatment area was Al-Waht and the control area was Qariyat al-Wahrah. Project assessments took place in Al-Mugheibra, Koud al-Douis, Sufyan, Tahrour, Aabar Lisloom, Al-Mahalla, and the Al-Baitra camp.

In both governorates, careful selection of control areas was necessary so that GSI scores could be confidently compared across intensively aid-targeted regions and less-targeted regions. Both treatment and control areas consisted of local host communities and IDP camps. The communities faced similar challenges in local infrastructure as well as additional economic and social pressures. While virtually

[29] "Yemen Humanitarian Needs Overview," OCHA, February 1, 2024, <https://reliefweb.int/report/yemen/yemen-humanitarian-needs-overview-2024-january-2024-enar>

[30] Ibid.

[31] "Marib Field Office site profile, February 2024," UNHCR, March 21, 2024, <https://reliefweb.int/report/yemen/marib-field-office-site-profile-february-2024-enar>

[32] For a recent snapshot of the humanitarian presence in Marib, see: "Yemen: Marib Governorate Humanitarian Presence (4W) - July 2024," OCHA, Sept. 18, 2024, <https://reliefweb.int/report/yemen/yemen-marib-governorate-humanitarian-presence-4w-july-2024>

[33] "Lahj Governorate, Yemen WASH Needs Tracking System (WANTS) Situation Overview July - September 2023," REACH, https://repository.impact-initiatives.org/document/impact/8e2c4480/REACH_YEM1902a_WASH_WANTS_March_2023_Lahj_Governorate.pdf

[34] For a recent snapshot of the humanitarian presence in Lahj, see, "Yemen: Lahj Governorate Humanitarian Presence (4W) - October 2024," OCHA, December 17, 2024, <https://www.unocha.org/publications/report/yemen/yemen-lahj-governorate-humanitarian-presence-4w-october-2024>

no part of Yemen has been untouched by some sort of aid in the past decade, there are areas even within heavily aid-targeted districts that, for geographic, logistical, or budgetary reasons, have received far less and/or less frequent aid.

GSI scores and subscores based on the general survey results are provided for the research areas in each governorate in Tables 2 and 3 below.

Lahj: Results and Comparative Analysis

In Lahj, treatment areas displayed a positive overall outlook. Thirty-three percent of respondents noted sustainable improvements, while the rest reported temporary relief. Notably, no respondents in treatment areas reported that aid had no impact or caused problems. A local leader and sheikh from Lahj described one targeted, sustainable intervention that he attributed to improving the health and daily life of area residents: "The water project in my area had a significant impact on the residents," he said, "providing self-sufficiency when they previously had to go to other villages to fetch water from wells."

In contrast, control group survey results suggested significant dissatisfaction with the limited level and quality of aid in the respondents' areas, with 43 percent stating aid projects had no impact on their lives and another 20 percent indicating they had caused additional problems. Only 3 percent reported sustainable improvements, and 23 percent cited temporary and relative improvements.

Figure 4.

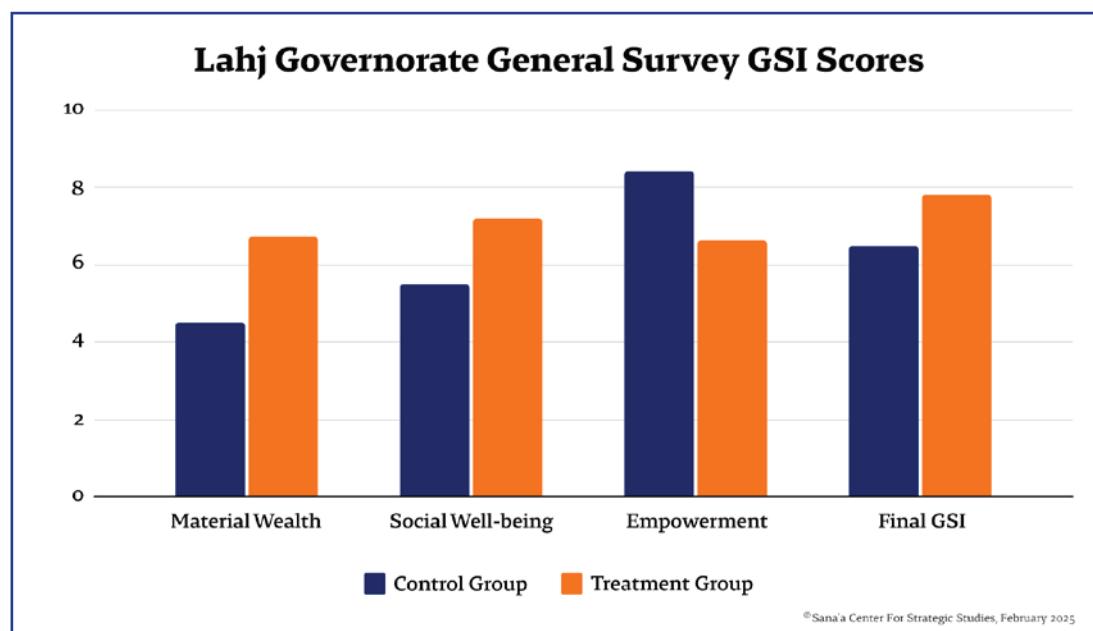


Table 1.

Lahj Governorate General Survey GSI Scores		
Dimension	Control Group	Treatment Group
Material Wealth	4.5	6.7
Social Well-being	5.5	7.2
Empowerment	8.4	6.6
Final GSI	5.6	6.3

Control group communities had experienced occasional access to healthcare and education but had not received sufficient aid for economic stability and experienced more hardship relocation. Still, the material wealth GSI subscore of 4.5 suggests some economic resilience, and the social well-being subscore of 5.5 indicates unmet social needs that more robust aid could address. The 8.4 empowerment subscore reflects the self-sufficiency of a community with limited aid dependency — its members may have fewer available resources, but they retain significant decision-making control within them. This relatively high empowerment subscore, which is evenly weighted with material wealth and social well-being, resulted in a control group GSI overall score of 5.6.

In the final GSI calculation, the PLA score was neutralized by having it at full value (0.1 in the final formula calculation) since a differentiating factor between control and treatment areas is the difference in aid exposure, and therefore, the question of projects' implementation is not applicable.

In the treatment group, the material wealth dimension subscore was 6.7, compared to 4.5 in the control group. This can be attributed to a reduced dependency on borrowing in aid-recipient areas and improved economic stability due to aid interventions. However, the improvement is not significant enough to indicate the full resolution of underlying economic vulnerabilities. In treatment areas, women had a slightly more positive perception of livelihood improvements but also reported dissatisfaction at similar rates to men. Interestingly, in both high- and low-intervention areas, women faced greater financial stress compared to men, as indicated by a higher borrowing frequency, even though women were more likely to benefit from aid than men.

In terms of social well-being, the treatment area scored 7.2 compared to 5.5 in the control group, an indication that aid interventions have, to some extent, positively impacted healthcare access, housing stability, and educational continuity. In high-intervention areas, women and men expressed similar levels of dissatisfaction, though women reported slightly higher improvements in safety. Additionally, women were more likely to indicate slight improvements, while men reported more moderate improvements.

An influential community figure from Lahj said economic interventions in the treatment area, especially those implemented by the Social Fund for Development, an organization funded by the Yemeni government and international entities, provided livestock, agricultural materials, and machinery while supporting education through the construction of new schools. Such interventions, she said, "improved income and education levels in the community. They also enhanced social cohesion by supporting local economies and essential services, which reduced conflict, despite occasional tensions that were addressed through community awareness efforts."^[35]

The empowerment score was lower in treatment areas than in control areas: 6.6 compared to 8.4. This may suggest a dependency on aid. Some empowerment gains in high-intervention areas were achieved through improved safety measures and access to decision-making platforms. In general, women in high-intervention areas had lower levels of familiarity with aid workers compared to men and overwhelmingly reported feeling excluded from consultation processes compared to men. The chairperson of a community-based organization in Lahj said that aid projects need to be designed and continually evaluated in partnership with local communities in order to have substantive and lasting impact.^[36] They described an effective example of this, explaining the role local leaders and villagers played in the success of a water network project. "Locals began digging the well with their own efforts, and then [an aid agency] stepped in to fund the remaining components, such as solar energy and a storage tank," he said.^[37]

The treatment area saw consistently higher subscores in most dimensions, resulting in an overall GSI of 6.3, reflecting the positive impact of recent aid interventions in addressing the community's needs, a conclusion affirmed through stakeholder interviews and field observations. All concurred that aid interventions in the treatment areas have improved livelihoods, food security, and access to essential resources, reducing reliance on coping mechanisms like borrowing. Enhanced healthcare, sanitation, and education services contributed to better social well-being, and interventions left local residents with a generally strong sense of empowerment and access to decision-making platforms. However, gaps remain, particularly in women's inclusion and perceptions of safety, highlighting areas for further improvement.

In contrast, the control area's GSI score of 5.6 demonstrated community resilience but also reflected unmet needs. Without significant targeted interventions, households face greater economic challenges and limited access to services.

^[35] In-person interview conducted on November 3, 2024.

^[36] In-person interview conducted on November 3, 2024.

^[37] In-person interview conducted on November 2, 2024.

Marib: Results and Comparative Analysis

In Marib governorate, perceptions differed considerably from Lahj. In control and treatment areas, all Marib respondents reported only temporary improvement – no respondents reported sustainable improvement, zero impact, or problems caused by aid interventions. With no zero-impact or negative responses, aid, whether in areas that have received minimal or more substantive interventions, appears to have been somewhat effective, though primarily in a short-term capacity. As in Lahj, respondents and interviewees in Marib emphasized the importance of water and sanitation infrastructure projects but said that even where they have been implemented, they have not always met local needs.

Figure 5.

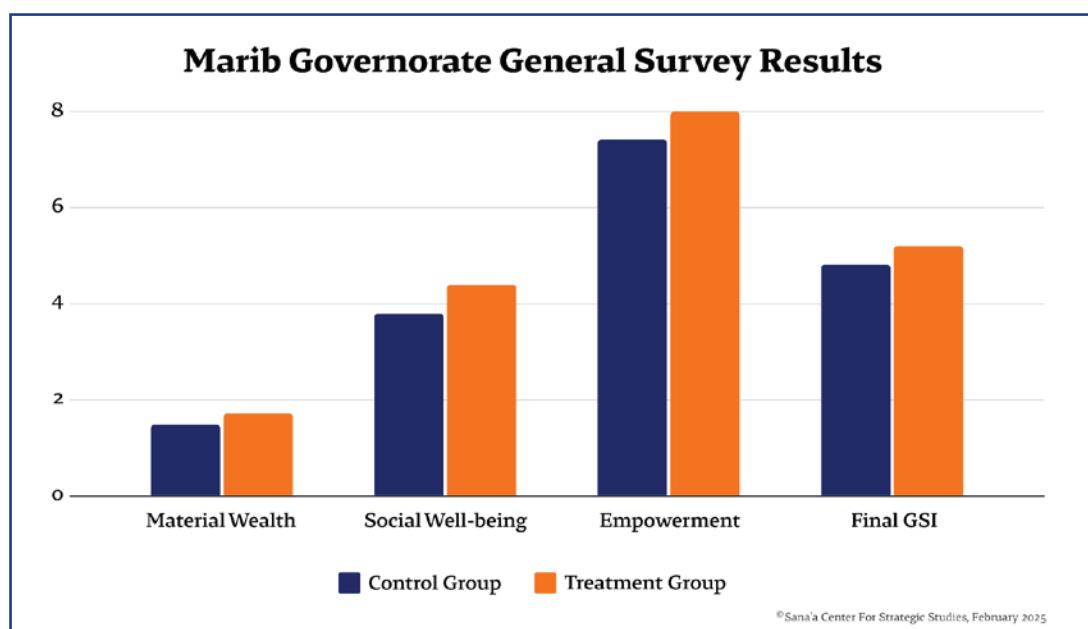


Table 2.

Marib Governorate General Survey Results [38]		
Dimension	Control Group	Treatment Group
Material Wealth	1.5	1.7
Social Well-being	3.8	4.4
Empowerment	7.4	8.0
Final GSI	3.9	4.3

In both treatment and control areas, respondents in Marib reported the limited impact of aid on material wealth (see Table 2). In treatment areas, respondents also cited a lack of long-term economic stability. Male respondents, in particular, voiced concerns about inefficient economic projects and inadequate infrastructure

[38] As in Lahj, the process and localization score was not applicable.

development, frequently mentioning that interventions had not led to sustainable improvements in food security, health, and sanitation. A male aid beneficiary in Marib said a recent donor provided well “may be helpful but does not meet the need, especially in summer when demand is high, and electricity outages exacerbate the problem.” Other interventions, specifically food and cash assistance, he said, are inconsistent, creating disappointment and instability among expectant communities. With an IDP influx and overwhelming need, he said these programs hardly make a difference: “Assistance helps to some extent, but it is not enough to cover the high living costs and the deteriorating currency.”^[39]

An IDP camp leader in Marib praised water projects as successful, largely because they are implemented in close collaboration with the local community. “The displaced people, host community, and landowners worked together to ensure the success of the water tank project. Such collaboration is crucial for overcoming challenges on the ground,” he said, adding that clear complaint mechanisms exist in the camp, including posted contact numbers and regular visits by community committees.^[40]

In control areas of Marib, where interventions were minimal and/or intermittent, men and women said aid was insufficient, leading to continued economic struggles. Food security was a significant concern, with many respondents across genders relying on emergency food baskets or other food aid for sustenance. Three of the four women in the Marib control group reported being economically dependent on family members, indicating a lack of opportunities for economic independence, whereas men focused on community-level economic challenges. This was reflected in the material wealth subscores: 1.5 in control areas and only slightly better, at 1.7, in treatment areas.

In terms of social well-being, the difference in GSI subscores was also small: 3.8 in control areas and 4.4 in treatment areas. Persistent challenges, such as hardship relocations and hosting IDPs, strained both communities. Regardless of the level of intervention, there were reports of inadequate improvements in social well-being, especially in health and sanitation. In areas with heavy levels of intervention, both male and female respondents indicated ongoing challenges in accessing healthcare and sanitation services, with women more frequently describing related household challenges and social tensions. Women, in particular, emphasized the need for more comprehensive health and education services for their families.

The empowerment scores for both control and treatment groups were relatively high: 7.4 and 8.0, respectively, reflecting resilience and autonomy. In the treatment area, empowerment stemmed from access to resources and external support, while in the control group, it might be attributed to self-reliance driven by the absence of aid. All female respondents reported feeling excluded from consultations on aid projects by implementors. This may be due to the conservative nature of Marib society and/or the limited number of female respondents in Marib.

^[39] In-person interview conducted on November 5, 2024.

^[40] In-person interview conducted on November 5, 2024.

A female aid beneficiary in the Marib treatment group explained that many of the projects she sees, including the one that helped her start her sewing business, take into consideration gender disparities and aim to empower women. She explained that the project, which provided training and microcredit, supported her economic empowerment and built respect for her within her family as its sole wage earner. However, she said the process also was disempowering in some ways. “The microcredit was less than what I needed, and I had to borrow and find other sources,” she explained. “Life is very hard as it is, and for a new business, one struggles just to get things started, let alone paying off the credit.” Women in Marib, she said, simply don’t usually have the materials or capital to use the skills they have acquired through training.^[41]

The survey results suggest a moderate level of engagement and inclusion in aid processes in the control areas, which is understandable considering the limited number and/or reach of interventions there. However, even in treatment areas, more than half of women and nearly a third of men reported no connection with any aid worker. The Marib beneficiary noted the limits to community participation in aid-implementation decisions. “The implementing organizations decide on who to train, and this is based on their network,” she said. “I wish we had more freedom in establishing our business. I was constrained by the organization as they controlled what materials I could buy to establish my shop and who the suppliers were.”^[42] Such transparency and participatory governance deficits were apparent in both survey groups, signaling room for improvement in delivery mechanisms for aid and/or in the utilization of local resources.

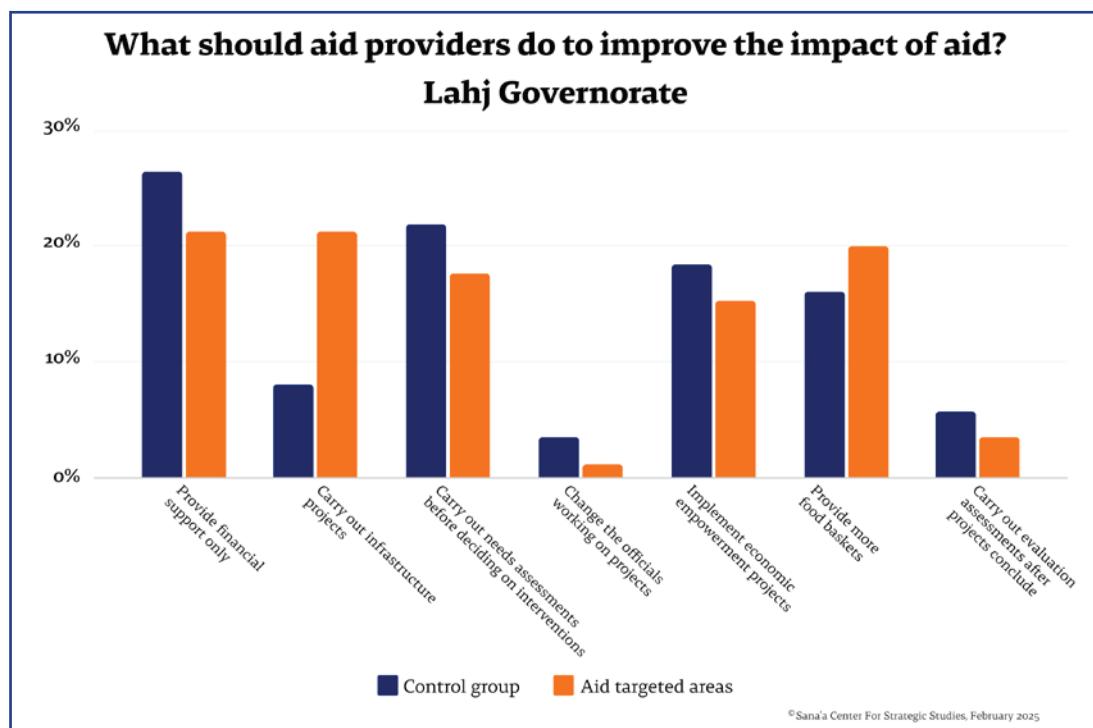
The GSI scores demonstrate the perceived benefits of aid in addressing hardships among the treatment group, but the 4.3 overall score also indicates further comprehensive and inclusive efforts are required to enhance long-term economic sustainability and participatory governance. For the control group, the limitations of resilience in the absence of support are apparent in the subscores, contributing to the overall GSI score of 3.9, underscoring a relative need for targeted interventions.

Recommendations from Survey Respondents

Survey respondents in both governorates were asked what they would recommend the aid community do to improve the impact and sustainability of aid projects in their region.

[41] In-person interview conducted on November 2, 2024.

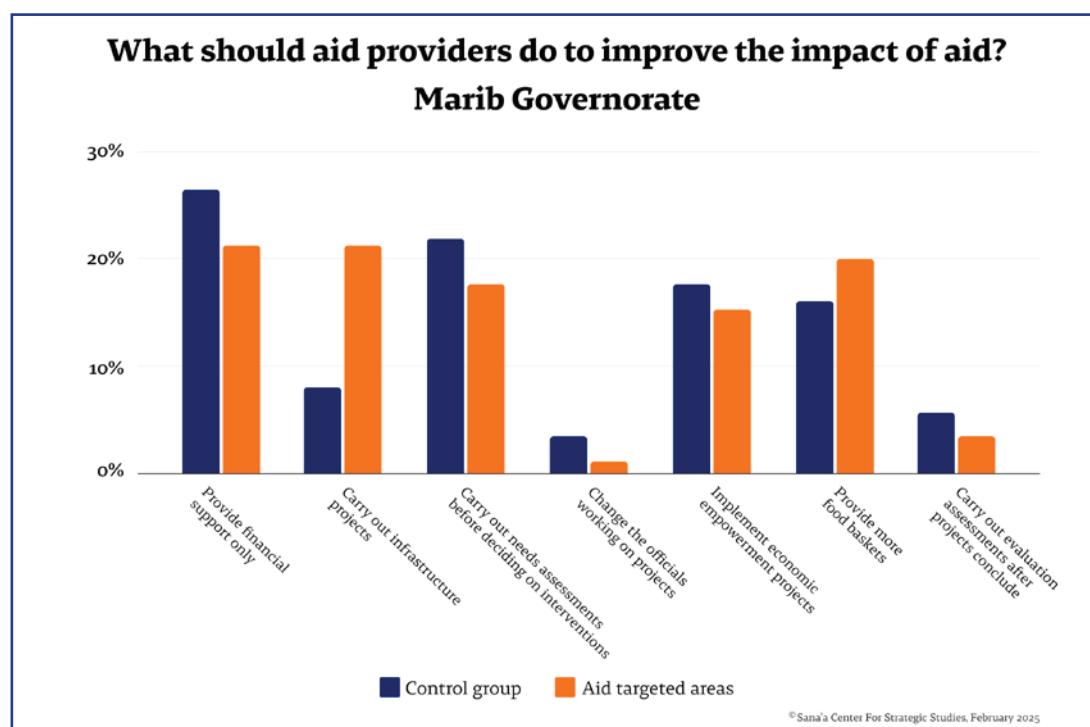
[42] Ibid.

Figure 6.

In Lahj, financial support was the control group's top priority, with more than 25 percent of respondents selecting this option, compared to around 20 percent in aid-targeted areas. This reflects a stronger preference for immediate economic relief in areas with limited aid. A Lahj CBO chair commented on lifesaving efforts in the governorate: "The food baskets were changed to cash in some areas, but there was a problem, and they stopped it. A religious preacher didn't get food and threatened to preach against them, so the donor pulled out. It would have made a difference because it is consistent, and we are able to buy what we need."^[43]

Both control and treatment groups also highlighted economic empowerment initiatives as key priorities, with similar levels of support. However, aid-targeted areas showed a higher preference for food baskets (20 percent) compared to the control group (16 percent). This suggests persistent food security challenges in regions already receiving aid. Recommendations for needs assessments were slightly higher among the control group, indicating a desire for more tailored interventions. There was minimal support for post-project evaluations across both groups.

^[43] In-person interview conducted on November 3, 2024.

Figure 7.

In Marib, respondents from the control group also prioritized financial support (around 26 percent), with a drop in preference among aid-targeted areas (21 percent). Food baskets were supported in both areas (16 and 20 percent, respectively). Both control and treatment groups also placed equal importance on economic empowerment projects (18 and 15 percent), reflecting a shared desire for sustainable income-generating solutions. Infrastructure projects received significantly less emphasis from control group respondents.

Lahj showed a slightly more balanced distribution of recommendations across categories, with a significant percentage of respondents prioritizing infrastructure improvements and community consultations. Marib respondents, particularly in the control group, emphasized governance reforms and financial aid, possibly reflecting dissatisfaction with current mechanisms and a need for immediate relief. In both regions, respondents underscored the importance of economic empowerment and food security, highlighting the universal need for short-term and sustainable interventions.

Across genders, financial aid emerged as a dominant recommendation, with men and women emphasizing its importance in improving community well-being. Women in both areas strongly advocated for community consultation before implementing projects, reflecting concern about blanket approaches to assistance and a desire for more inclusive decision-making processes. Women also emphasized infrastructure investments, particularly in electricity, roads, and water, slightly more frequently than men. Men leaned toward economic sustainability through income-generating activities and job creation, while women tended to combine these recommendations with a focus on food security and community engagement. In

all cases, consultations with the local communities were seen as a priority. “In some areas, the lack of governance and coordination causes problems. This is why projects need to be better planned with input from local leaders and the community,” said the chair of a CBO from Lahj.^[44]

In Lahj, women were particularly vocal about integrating consultation for economic projects, while men often recommended a combination of financial aid and infrastructure development. The CBO chairperson emphasized this more than once, explaining that the water and sanitation projects in his area not only provided much-needed services but also reduced social tension around resources and prevented conflict caused by spillage and contamination of the rudimentary pre-intervention sewage facilities.

In Marib, women similarly highlighted the importance of infrastructure and consultation alongside food baskets, whereas men’s recommendations were more evenly distributed among economic activities, infrastructure, and financial aid. These trends point to a shared recognition of immediate and long-term needs, with women prioritizing inclusive approaches and a broader range of interventions.

^[44] Ibid.

Part III. Project Assessments

Six projects were selected for evaluation in this pilot study in the three targeted districts of Marib and Lahj governorates. For each of the projects, a survey was designed to explore the three measured dimensions of impact (material wealth, social well-being, and empowerment) as well as the process and localization assessment. The results of these surveys, with the data reflected through the GSI framework, are provided for each project below.

Marib Governorate Projects

Three projects were selected in Marib, all of which were funded and implemented by international organizations.

Project A: Water Access, Sanitation & Health

A 2022-2023 infrastructure project providing clean water to IDP and host community members, with the objective of promoting peaceful cohesion among communities and improving water access, sanitation, and health.

Material Wealth: 7.6

The moderate-to-high material wealth score indicates that the project contributed positively to the community's economic situation; it reduced water-related expenses for the majority of respondents, though there was some variability in individual experiences.^[45] Specifically, all respondents reported being able to save some money due to reduced expenses on water, with more than half (10 of 17) saying the savings were significant enough to allow them to redirect funds toward other necessities such as food and clothing. However, there was a near-even split between those who noticed an improvement in their financial situation due to time and cost savings, suggesting that the project did not equally benefit all community members and that there may be room for further economic benefit.^[46] It was interesting to note that women perceived the program's financial benefits more favorably than men.

A Marib IDP camp management official said the project was providing residents with immediate and long-term financial benefits. Immediate savings stemmed from no longer needing to buy clean drinking water.^[47]

Social Well-Being: 8.8

The project's 8.8 subscore reflects significant positive perceptions of its impact on health, education, and overall well-being. Nearly all (16 of 17) respondents reported improved health due to access to clean water, and several (13 of 17) said their children had more time for education because they no longer needed to fetch water from

^[45] Project A's scores are based on 17 survey results, with responses from 15 men and two women.

^[46] Nine respondents perceived improvement, eight did not.

^[47] In-person interview conducted on November 5, 2024.

distant sources. Nearly all respondents perceived a reduction in the physical and psychological burdens on women and children, who most often are responsible for fetching water, with 16 of 17 reporting the new drinking water station had increased comfort and happiness among both groups. Furthermore, 12 of 17 respondents noted a decrease in community tensions over water resources, indicating enhanced social harmony. The IDP camp representative in Marib said that “water services like this project improved social harmony within the camp and between host communities and displaced people.”^[48]

Empowerment: 7.6

The empowerment dimension also scored moderate to high, at 7.6, underscoring the project’s success in fostering community ownership. A local committee was formed to manage the water point, which three-fourths of respondents (including both women) recognized as a form of community empowerment. The rest perceived themselves solely as beneficiaries, with no role in managing the facility, which could indicate gaps in inclusivity. However, the project team’s community consultations on the location of the water point and the establishment of a local management team reflect participatory practices that could contribute to long-term sustainability and self-sufficiency.

The camp manager said the project’s participatory approach was intentional and sought diversity, with committees including representatives from IDP and host communities, as well as both men and women. “We create community committees before we start,” he said, adding that members were trained for maintenance and operations.^[49]

PLA Score: 7.1

The PLA score of 7.1 reflected effective community participation and localized implementation but revealed a lack of financial transparency. All respondents indicated that the organization consulted with local representatives about the water point’s location and that project progress was discussed at regular meetings. However, only two of the 17 respondents, both men, felt adequately informed about the project’s finances. “We hold meetings with community representatives, ask their opinions, and ensure representation from each geographical section,” a project manager said. “There is no monitoring mechanism to track the financial aspects or ensure accountability.”^[50]

Final GSI Score: 7.9

Project A’s GSI score of 7.9 out of 10.0 indicates a positive impact on the community. Survey respondents perceived it to have reduced household water expenses, improved health and educational opportunities, and empowered the community by involving them in management. Strong community engagement, which the project

^[48] In-person interview conducted on November 5, 2024.

^[49] Ibid.

^[50] In-person interview conducted on November 18, 2024.

and community stakeholders said was intentional and ongoing, contributed to the strong GSI score. Addressing gaps in inclusivity and transparency and ensuring households are more broadly realizing economic benefits could further strengthen its impact.

Project B: Water Tank, Pump, and Service Network

A 2022-2023 water network and storage tank project aimed at providing a new water source for displaced populations in Marib.^[51]

Material Wealth: 8.5

This score reflects the project's contribution to reducing financial strain for a majority of respondents. Sixteen of 17 respondents (including all female respondents) reported saving money on water as a result of the project. These savings were substantive enough to allow two-thirds of respondents to cover other essential needs, including food and clothing, a tangible improvement to their economic resilience. However, those who reported no financial improvement (five men and one woman) highlight an important limitation. While the network had a broad positive impact, structural or contextual barriers may have prevented some families from fully benefiting. These might include indirect costs related to water access, varying levels of reliance on the network, or pre-existing financial challenges. The absence of respondents citing additional financial burden underscores the project's affordability, but its inability to provide universal financial improvement points to a need for complementary interventions.

A program coordinator attributed the disparity to structural barriers, such as uneven access or pre-existing financial hardships: "Water access is a collective issue tied to social cohesion and stability. Without a stable economy or government-driven systems, these benefits can be limited."^[52]

Social Well-Being: 7.1

The improvements reflected in this subscore are especially attributable to the easing of the physical and emotional burdens of water collection for women and children. Thirteen of 17 respondents, including all three women, highlighted these benefits, indicating the project succeeded in freeing up time and energy for self-care and other priorities. Eleven respondents, including all of the women, also reported a positive impact on children's education, noting the children had more time to study. Still, a minority of respondents reported no improvement in women's or children's lives, indicating some families may have faced logistical or cultural barriers to leveraging these benefits. Respondents were split on whether the project had successfully and sustainably improved the area's general infrastructure, with a significant minority (six of 17) identifying gaps in service delivery and two respondents noting negative impacts such as infrastructure damage. These findings may suggest inconsistencies in implementation, highlighting the need for more robust and inclusive planning and monitoring processes.

[51] Project B's scores are based on 17 survey results, with responses from 14 men and three women.

[52] In-person interview conducted on December 12, 2024.

Empowerment: 5.7

Empowerment received the lowest score of the three main dimensions, reflecting gaps in community engagement, transparency, and perceived equity. While many respondents expressed pride in the project's outcomes (nine of 17), others perceived their community as comparatively underserved, which might have fostered feelings of exclusion or neglect. This sentiment may have arisen from disparities in the scope of services delivered across regions or inadequate communication about decision-making processes. Transparency issues were particularly pronounced, with all but one respondent unaware of financial details related to the project. This lack of information appeared to have undermined trust and hindered the community's sense of ownership over the water network. "Transparency and inclusivity are ongoing challenges, particularly in conflict-affected areas where perceptions of inequity can arise," acknowledged the project coordinator.^[53]

PLA Score: 4.1

Community engagement showed some strengths, with a solid majority of respondents (13 of 17) acknowledging periodic meetings and communication efforts. However, the remainders' perceptions of exclusion and the lack of financial transparency persisted as a major issue. This limited the project's ability to build trust and fully engage the community in its processes. The coordinator said the local community had been consulted on where to place the water tank and had access to progress reports. However, he said that given the nature of IDP camps, those consulted may have moved on and been replaced by others, adding: "Our quick turnaround time and the nature of emergency projects often limit deeper community involvement."^[54]

Final GSI Score: 6.8

The project achieved substantial benefits in financial relief and reducing burdens on women and children, as reflected in its material wealth and social well-being subscores. However, its impact on empowerment was less pronounced. Discrepancies in financial benefits, uneven social outcomes, and limited community involvement underscore the need for targeted strategies to enhance inclusivity, equity, and sustainability.^[55]

Project C: Health Centers

A project provided health centers aimed at improving access to primary, preventive, and therapeutic healthcare for the most vulnerable populations in targeted communities in Marib, evaluated from January 2023 to December 2024.^[56]

^[53] In-person interview conducted on December 12, 2024.

^[54] In-person interview conducted on December 12, 2024.

^[55] Project C's scores are based on 10 survey results, with responses from eight men and two women.

Material Wealth: 9.5

This score reflects a substantial alleviation of healthcare-related financial stress, with nearly all respondents reporting they had benefited economically. All respondents reported reduced healthcare expenses, allowing them to redirect funds to other necessities like food and clothing. Nine of 10 noted their financial situation had improved due to less time and money spent on healthcare needs, with only one respondent reporting no financial improvement. No respondents reported additional financial burdens. A male beneficiary from Marib noted that the centers provide basic care only. "For specialized care, we have to travel to health centers or hospitals, often incurring significant costs," he said.^[56]

Social Well-Being: 5.0

Perceptions of the project's health outcomes are reflected in this average 5.0 subscore, which is a concern considering that this is a health project. Respondents' concerns about access and service availability may account for the lower score. While eight of 10 respondents reported better health for children and greater activity levels, with the remainder perceiving no impact, in comments and interviews, respondents noted that benefits related to primary healthcare and first aid and not more serious health concerns. Moreover, individual circumstances, such as access to transportation, socioeconomic status, or specific health needs, may have influenced perceptions. For example, a family living closer to the health center may experience greater benefits than one living farther away. Only two of the 10 respondents, both men, reported feeling reassured by the availability of health services, with the rest expressing concerns about delays or limited care options. Such structural limitations can lead to mixed reviews and suggest the existence of an unmet need for more complex care.

Empowerment: 9.3

The empowerment score was very high. The project demonstrated inclusivity, with all respondents affirming that services were provided without discrimination based on gender, age, or background. This suggests the project succeeded in providing equitable services to a high degree. However, room for improvement was noted by a representative of a local CSO in Marib, who explained that it is important for implementing organizations to avoid siloing by integrating health projects with other developmental and humanitarian aid. «For example, the interventions we carry out in our organization, particularly development projects like roads, schools, and health centers, are designed to be complementary and significantly contribute to social peace by providing essential services and reducing conflicts.»^[57]

^[56] In-person interview conducted on November 5, 2024.

^[57] In-person interview conducted on November 23, 2024.

PLA Score: 4.0

This subscore reflects a low perception of open communication and transparency, as five of 10 respondents reported that attempts to communicate or meet were rebuffed, and another respondent agreed that health center project managers are isolated from the community. Only four in 10 perceived project managers as transparent and engaged with the community; the rest reported a lack of information on funding and project management. While the project's inclusivity was commendable, the lack of engagement and transparency may have weakened the overall process.

Final GSI Score: 7.6

The health project's overall GSI of 7.6 reflects its strong outcomes in two key ways: alleviating healthcare-related financial burdens, allowing families to allocate savings to other essential needs, and improving children's health and activity levels, contributing to community stability. However, concerns about the limited range of healthcare services, isolated service provision, engagement with the community, lack of transparency in project management, and inconsistent access to services highlight areas for improvement.

Lahj Governorate Projects

Three projects were selected in Lahj governorate, with two of them (Projects D and F) implemented by international organizations and one (Project E) implemented by a local CSO.

Project D: Health & Nutrition, Cash Assistance

A 2024 multi-sector emergency support project aiming to deliver lifesaving health and nutrition interventions through education/awareness training, malnutrition monitoring, mother-baby health services, food baskets, and cash vouchers.

Material Wealth: 9.3

Respondents reported benefiting from lower healthcare costs through the project's disease prevention and hygiene education, and these savings appeared to translate into broader economic resilience. Nearly all respondents (13 of 15) perceived their health expenses to have decreased because of the project, which also provides food baskets and unconditional cash assistance (in amounts intended for food purchases). While considering this a success, a coordinator for the project noted that food assistance alone is not enough for all beneficiaries to become self-reliant but said there had been "some success stories" of recipients turning the aid into additional income that resulted in financial independence. "Training must be linked to income-generating opportunities and integrated with livelihood projects," he explained.^[58]

^[58] In-person interview conducted on December 12, 2024.

Social Well-Being: 9.7

This subscore reflects exceptional outcomes in social well-being, with the overwhelming majority (14 of 15) of respondents crediting the project with reducing the spread of disease due to better hygiene knowledge. All respondents reported improved health and activity levels among children. These results emphasize the importance of targeted health education in transforming community well-being. However, the disconnect between health improvements and financial empowerment may point to a need for integrating health initiatives with economic programs to sustain these gains. For example, leveraging hygiene knowledge to create micro-business opportunities, such as producing or selling hygiene products, might enhance both indicators. Furthermore, the sustainability of this specific intervention was jeopardized by funding limitations, and some services – the community health volunteer and midwifery programs – were wound down. “We take solace that even though the services may be discontinued, the knowledge imparted on the local volunteers and health care providers remains, and they can use it to save lives beyond our project,” the project manager said.^[sq]

Empowerment: 5.0

The project succeeded in promoting respect and awareness of rights, with all respondents reporting they felt both respected and informed. However, it fell short in reducing dependency on aid. Food baskets were deemed insufficient for economic empowerment, and training programs did not yield income-generating opportunities. When asked whether they were able to generate income or save money because of these elements, all respondents reported being able to save “a little” money but not enough to cover basic needs such as food and clothing, which indicates little empowerment and agency over basic needs. This may reflect a gap in aligning the project’s goals with its outcomes in fostering sustainable community resilience. Addressing this would require expanding vocational training and linking it to practical income-generating opportunities, such as agricultural skills or support of entrepreneurship.

PLA Score: 10.0

The project excelled in transparency, equitable service delivery, and community engagement, with all survey respondents confirming these practices. These strengths build trust and set a high standard for participatory approaches. However, leveraging this foundation to address gaps in other dimensions—such as material wealth and empowerment—might significantly enhance the overall impact.

Final GSI Score: 8.2

The project demonstrated exceptional performance in community engagement, transparency, and inclusivity, an approach that fostered trust and strengthened community ownership of the project’s outcomes. Beneficiaries also perceived notable health outcome improvements and a reduction in health-related expenses through enhanced disease prevention and hygiene knowledge. For future improvement, the project could benefit by better fostering economic empowerment.

Project E: Food Assistance

A cash-based assistance project implemented in 2021 by a Yemeni organization aiming to enable families to meet their most urgent needs, such as food expenses and debt repayment for food purchases.^[60]

Material Wealth: 5.1

This score reflects a moderate improvement in financial conditions for families, with more than half of respondents (nine of 15, including three women) reporting improved access to sufficient and nutritious food and 10 of 15 (including four women) noting reduced reliance on loans. Four respondents, all men, reported using at least some of the cash assistance to generate income; twice as many, including three women, said the assistance barely covered their basic needs. Furthermore, three respondents, two of them women, reported a reluctance to use the money for fear that doing so would exclude them from aid lists. The cash assistance provided basic economic relief but did not address structural issues like aid dependency or income generation, limiting its long-term impact. This limited economic scope was by design, and the aid dependency it fostered was inherent. "The purpose of this cash assistance is not to create a source of income, but rather for beneficiaries to stay alive and not to lose their existing assets, such as livestock, in order to buy food," the project manager said. "Many families have become dependent on the aid... Some even went on protests when we started phasing it out."^[61]

Social Well-Being: 5.3

The project's 5.3 social well-being score reflects average health and education improvements as well as reduced stress levels for some. However, these benefits were inconsistent. Respondents were split on whether the program had improved health through better access to nutritious food and healthcare, with seven agreeing it had, seven saying it had not, and one reporting a negative impact because accepting the cash aid resulted in their losing other health assistance. A majority of respondents (nine of 15) said the assistance had helped with education expenses, but the rest reported it only stretched far enough for food. Ten respondents, including four women, perceived a program-related reduction in stress levels, but a minority (four of 15) indicated that aid dependency and uncertainty had only increased anxiety.

The flexibility of cash assistance made it more impactful for some than others, according to the project manager. "Some families have chronic diseases, and here they are better. They have the decision to choose what to spend the money on based on their needs," he said. A downside, he acknowledged, is the negative social impact of aid dependency, and for this reason, interventions are shifting toward combinations of unconditional cash assistance, food aid, and cash-for-work modalities to build economic resilience. "There is huge tension in families when the cash assistance stops... A man would say, 'I can't deal with my family responsibilities.'"

[60] Project E's scores are based on 15 survey results, with responses from 10 men and five women.

[61] In-person interview conducted on November 20, 2024.

Empowerment 4.3

The project's empowerment efforts were minimal, with significant gaps in community involvement and a reliance on top-down decision-making that may have weakened its long-term sustainability. Unsurprisingly, all respondents reported exclusion from project decision-making processes, and three respondents perceived the project as reinforcing dependency and introducing negative social dynamics. Few respondents perceived the project as encouraging independence and skill development (four of 15), and a similar number acknowledged their complete reliance on aid. "We can't think of empowerment when what we are aiming at is saving lives," the project manager said. However, he was supportive of moving from unconditional cash assistance to interventions that build assets benefiting the whole community for a more sustainable impact. "The community will nominate representatives and decide what assets they need as a collective – whether it is a road or a water facility, flood barrier, or sanitation infrastructure, etc. Then, they will be responsible for maintaining it for the public good. This is a form of empowerment."

PLA Score: 4.0

Respondents largely perceived the project as aligned with local culture and community needs, but concerns about corruption and lack of transparency were significant. All respondents reported no involvement in decision-making. These factors suggest limited participatory approaches and poor communication about project governance and beneficiary validation processes. The project established committees involving stakeholders, but its score suffered from perceived unfairness in implementation. The project manager said many beneficiaries had thought that the aid would last indefinitely and were shocked when it was reduced or discontinued. "With better communication, we can manage expectations and ensure that they have ownership in improving their situation instead of just being recipients of aid." This observation was common regarding emergency support projects, especially ones that are temporary and considered life-saving, where the local community's expectations were for long-term support.

Final GSI Score: 4.8

The cash assistance project's overall GSI score of 4.8 reflects moderate success in improving basic financial stability and well-being. While it helped some families reduce debt, access better food, and afford education, the project fell short in fostering long-term independence and sustainability. Empowerment was limited, as most respondents were excluded from decision-making processes. Concerns about aid dependency, as well as transparency and fairness in aid distribution, further weakened the project's overall impact.

Project F: Village Water Tanks

An infrastructure project completed in 2022 that involved the construction of a 25,000-liter water storage tank, an extension of the piped-water network, and a solar-powered pump system in Lahj.^[62]

Material Wealth: 10.0

All respondents reported saving money because of reduced water-related expenses and noted improvements in their financial situations. Families reported an ability to redirect savings to other needs, a sign of significant economic relief. The project was perceived to have delivered maximum economic benefits to the community. “Children now have time to go to school instead of collecting water, and families save money previously spent on buying water,” a program coordinator for the implementing organization said.^[63]

Social Well-Being: 10.0

Respondents unanimously stated that the project reduced burdens on women and children, improved access to education, and contributed to better infrastructure and community well-being. These results indicate that the project had a transformative impact on the quality of life. Exceptional success was noted in improving social conditions and reducing physical and emotional burdens for women and children, who had more time for education. All respondents also indicated a decrease in community tensions.

Empowerment: 10.0

The water tank and pump system project fostered strong community ownership and empowerment. All respondents expressed pride in having and managing their own water services and reported equitable access had reduced community tension. Respondents unanimously praised the establishment of local management committees, periodic consultations, and the community's active role in decision-making. “We worked with local committees to ensure they could manage and maintain the water tank independently,” the project WASH coordinator said. A local sheikh said the village was divided into three areas, each represented by a delegate who supervises complaints and ensures water distribution is consistent.^[64] This is a testament to the participation and empowerment of the local community in the project.

PLA Score: 9.5

While all respondents highlighted regular meetings and consultations with the project team, one noted a lack of transparency regarding financial management. Nonetheless, effective engagement and inclusivity were reported, with perhaps minor room for improvement in transparency.

^[62] Project F's scores are based on 10 survey results, with responses from six men and four women.

^[63] In-person interview conducted on December 12, 2024.

^[64] In-person interview conducted on November 3, 2024.

Final GSI Score: 9.95

The Lahj water project achieved near-perfect results, with maximum impact on economic relief, social well-being, and community empowerment. Strong community engagement and participatory management further contributed to its success, with only a minor gap in financial transparency. The project stands out as a benchmark for success, achieving near-universal satisfaction and positive impact.



Students studying in the open in the Al-Wazi'iyah area of Taiz, January 25 2020 // Sana'a Center photo by Albaraa Mansoor.

IV: Conclusions and Policy Recommendations

Conclusion

This study evaluates not only past interventions but also pilots a new metric, which could set the stage for more informed and effective aid monitoring and evaluation and strategic responses. It calls for a shift from conventional metrics of success - focused on outputs and short-term outcomes - to a broader perspective that prioritizes sustainability, localization, and community empowerment. By addressing these systemic issues, aid can move beyond immediate relief to become a catalyst for long-term resilience and development in Yemen's most vulnerable communities.

As a limited impact assessment and pilot study, the GSI framework was applied to two governorates, analyzing the aid interventions and the perceived impact on local communities. Through the GSI framework, researchers delved into the economic, social, and empowerment dimensions of impact, examining the processes and localization of aid implementation. Overarching conclusions and recommendations relating to these dimensions, as well as sector-specific ones, will be laid out here based on the GSI results.

It is hoped that this study will be used as a learning exercise to evaluate the GSI and its potential for use in annual assessments. Since this is not a conventional impact assessment but rather an attempt to investigate meaningful changes, it includes qualitative data that requires time to gather. Future assessments could rotate among target areas. Furthermore, the GSI metric might be improved with every assessment and used to measure impact through a holistic, integrated approach that addresses the humanitarian/development ecosystem.

Scores for each of the three dimensions of impact are calculated through self-reported data from the beneficiaries and other stakeholders. However, to mitigate bias and standardize the GSI scoring process, defining specific indicators for each of the three dimensions could make the scoring process more objective and comparable across different projects. The same logic goes for quantifying and measuring qualitative data. The design of the questionnaires and standardized response options are crucial for the accuracy and credibility of the GSI.

The next step on this front involves validation sessions with stakeholders and expert communities, which will allow for refining the scoring system, adjusting indicators as needed, and ensuring that final scores accurately reflect the impact of the interventions. While the projects selected for this test are some of the most important in the surveyed areas, they also present an opportunity for establishing benchmarks or comparison points (e.g., average GSI scores for similar projects), which would help in interpreting what a given GSI score means in practice. This, in turn, could help in setting realistic targets for future projects. Through the GSI framework, maximum impact policy recommendations are possible that more clearly identify the best value for money in the humanitarian/development interventions.

Dimensional Conclusions

The GSI framework embraces the complexity of measuring the impact of aid, providing nuanced insights into how aid influences material wealth, social well-being, and empowerment at the individual, household, community, and institutional levels. For instance, in Lahj, targeted interventions in health and sanitation improved community cohesion, and residents perceived notable health benefits. However, in Marib, aid primarily consisted of short-term relief, with limited progress in transitioning from emergency assistance to sustainable development.

Perceptions of aid varied significantly between governorates and between control and beneficiary groups. In Lahj, aid-targeted areas reported higher satisfaction and sustainable improvements compared to the control group, which expressed frustration with unmet needs and governance issues. In Marib, aid interventions were perceived as beneficial but predominantly temporary, reflecting a need for better alignment between short-term relief and long-term development goals, an unsurprising result given that 90 percent of Marib's population are IDPs.^[65]

Other notable conclusions drawn from the dimensional analysis include:

- Aid interventions alleviated financial burdens in some areas, as evidenced by reports of reduced healthcare costs and improved access to water. Nevertheless, many households in Lahj and Marib remain dependent on food baskets or other temporary aid measures, underscoring the importance of integrating income-generating programs into future aid strategies to enhance financial stability, economic resilience, and independence.

^[65] "Marib Field Office site profile February 2024," UNHCR, March 21, 2024, <https://reliefweb.int/report/yemen/marib-field-office-site-profile-february-2024-enar>

- Population displacement challenges, including strains on host communities, highlight the need for more robust social infrastructure that can adapt to shifting demographics and resource pressures. Improved access to essential services, as seen especially in Lahj, fostered social cohesion and could be replicated.
- Without participatory, inclusive, and transparent processes, dissatisfaction and a perception of exclusion can diminish the perceived impact of aid interventions. Findings from Lahj and Marib stress the local desire for stronger localization by involving local actors in all stages of aid planning and implementation, from needs assessments to monitoring and evaluation.

In terms of gender differences, women were more optimistic about the financial, social, and empowerment impacts of the projects, especially infrastructure projects (e.g., water points), than men. They were also more satisfied with how projects eased burdens for themselves and their children. Female respondents noted improvements in health and hygiene through targeted interventions, although they also highlighted barriers like inconsistent service delivery and logistical challenges. Women, however, were less likely to create sustainable income or revenue from cash assistance, indicating more financial dependency and less economic resilience. In terms of participation in local committees, women did not perceive being excluded any more than men. In fact, based on the deliberate design of community committees, women were always represented, although not necessarily empowered in decision-making. Their knowledge of the funding and management of projects, especially those implemented by international organizations, was as low as that of the men. Furthermore, female respondents strongly acknowledged the role of water and health projects in reducing community tensions and improving social harmony, especially in IDP settings.

The GSI framework proved invaluable in identifying these patterns, offering a holistic lens through which the true impact of aid can be assessed and clarifying the tailored strategies needed in each region. In Marib, respondents indicated they wanted strategies to shift from temporary aid toward longer-term, more sustainable solutions. Across both regions, greater community engagement, needs assessments, and governance reforms could enhance the effectiveness and perception of aid interventions.

Sector-Related Conclusions

Although differences in GSI scoring among projects may be due to a variety of factors (contextual differences, quality of implementation, funding levels, beneficiary expectations, etc.), distinct sectoral differences emerged in the overall GSI scores.

Food Assistance: Project E in Lahj (GSI: 4.8) was straight food assistance, a type of life-saving intervention that targets the most vulnerable but has only limited short-term impact and is likely to create dependencies. This sort of aid has fewer benefits to beneficiaries and targeted communities and tends to generate a lower GSI score.^[66]

^[66] Authors' note: The research team believes the nature of the assistance resulted in a comparatively low final GSI of 4.8, not the fact that it was implemented by a local organization.

WASH and Water Access: In general, these interventions scored the highest. Project F in Lahj (GSI: 9.95) provided water services to the whole community, a village of 3,400 people. This reflects the importance of infrastructure interventions to community perceptions of success and expectations of benefits. Additionally, clear communication about project activities and community engagement were also specific achievements related to the nature of the intervention and the quality of project implementation. Project A in Marib (GSI: 7.9) addressed real needs among vulnerable populations. Project B, also in Marib (GSI: 6.8), focused on improving water availability to IDPs. Despite indicating notable economic and, to a lesser extent, social well-being benefits, IDPs have a wide range of needs and expectations that they should be receiving better services.

Health, Sanitation, and Nutrition: Project C in Marib (GSI: 7.6), providing healthcare assistance focused on primary, preventative, and therapeutic services, was seen by beneficiaries as not addressing their full range of healthcare needs. Project D in Lahj (GSI: 8.2) had a significant cash-for-health component. Such programs tend to generate high expectations and high levels of beneficiary complaints about selection processes. Their short-term nature also can create dependencies, and they are often not understood by highly vulnerable populations.

Recommendations

By combining quantitative metrics with qualitative feedback from diverse stakeholders, the study captures both the successes and the limitations of aid interventions, providing actionable insights for future programming. To maximize the impact and sustainability of aid interventions, the following recommendations are proposed:

For Humanitarian Organizations and Donors:

- **Enhance Economic Empowerment:** Integrate livelihood initiatives such as vocational training, microfinance, and small business support into interventions to promote financial independence and sustainable livelihoods. Transition from direct aid to cash-based assistance where feasible, fostering economic resilience and reducing reliance on external support. Additionally, remove barriers that discourage individuals from pursuing economic opportunities out of fear of losing eligibility for assistance. For women in particular, it is important to complement cash-based assistance with vocational training and microfinance programs, focusing on income-generating opportunities like small business support and agricultural skills. Integrating livelihood-related activities like capacity building and microfinance opportunities targeting young men and women in beneficiary families can mitigate dependence on cash assistance and promote individual and household resilience.
- **Strengthen Health and Social Services:** Address systemic healthcare vulnerabilities, particularly in child and maternal health, by partnering with local healthcare providers and scaling up investments in health infrastructure and education. This will ensure long-term access to essential services. In education, support targeted interventions to minimize disruptions to children's education and create sustainable pathways for learning in displacement contexts.
- **Invest in Sustainable Infrastructure:** Focus on infrastructure projects that address root causes of instability, such as water scarcity and inadequate sanitation. Ensure infrastructure investments are maintained by empowering local entities for long-term functionality. In regions like Lahj, prioritize projects that enhance healthcare, housing, and education to address immediate gaps. Address vulnerability to flooding and drought through rainwater harvesting and flood mitigation infrastructure in cash-for-work activities.
- **Implement Robust Monitoring and Evaluation:** Conduct comprehensive post-project evaluations to assess impact, refine approaches, and guide future interventions. Regularly update and refine the GSI framework to better measure long-term outcomes and community-specific needs. Across all regions, raise awareness about the importance of needs assessments and post-project evaluations to improve aid effectiveness and sustainability.

For Local and Community-Based Organizations:

- **Foster Community Empowerment:** Actively involve local communities in the planning, implementation, and management of aid projects. Establish inclusive governance structures to ensure the representation of diverse voices, particularly those of marginalized groups, fostering ownership and trust. Tailor interventions to reflect community-specific needs, promoting self-sufficiency and reducing dependency on external aid.
- **Promote Process Transparency and Localization:** Enhance transparency in project management, especially in financial decision-making, by sharing reports and updates with beneficiaries to build trust. Strengthen partnerships with local organizations and stakeholders to ensure interventions are culturally and contextually relevant. Regularly consult communities regarding aid priorities and distribution criteria to foster trust and reduce dissatisfaction. Improve communications with beneficiaries about the duration of assistance and selection criteria, including written and visual messaging for the illiterate.

For the Government and Local Authorities:

- **Leverage Women's Optimism and Agency:** Build on women's optimism about project benefits by empowering them to take leadership roles in community initiatives. Also, provide tailored training to women in areas like maintenance of infrastructure projects and healthcare management to ensure long-term impact.
- **Regional Strategies:**
 - Marib: Prioritize economic empowerment, food security, and financial support to address governance concerns and meet immediate needs. Ensure inclusion of host communities in all interventions, as there are increasing tensions as IDPs now constitute an estimated 90 percent of the population.
 - Lahj: Emphasize sustainable infrastructure development alongside economic empowerment and food security. Foster partnerships with CSOs, CBOs, and local communities to strengthen implementation.

Annexes

Annex A: List of Interviewees

No.	Profile	Sex
1.	(Project E) Food Assistance Project Manager	M
2.	(Project A) CCCM, Marib Project Deputy Manager	M
3.	(Project A) Project Engineer	M
4.	(Project D) Food Assistance Project Manager	M
5.	(Project D) Health Project Manager	M
6.	(Project D) Community Engagement Manager	F
7.	Beneficiary, Marib high intervention area	F
8.	(Project B) WASH Programme Coordinator	M
9.	Local community leader from Lahj (Sheikh)	M
10.	Male beneficiary, Marib	M
11.	Leader in an IDP camp, Marib	M
12.	Economist and private sector expert	F
13.	Community leader, Lahj	F
14.	Female beneficiary, Lahj	F
15.	Local trader, Lahj	M
16.	CBO chairperson, Lahj	M
Percent female: 31		

Annex B: Advantages and Disadvantages When Selecting Units of Assessment for GSI Calculations^[67]

Unit of assessment	Advantages	Disadvantages
Individual	<p>Easily defined and identified.</p> <p>Enables assessment of new skills and capacities.</p> <p>Allows social relations and gender issues to be explored.</p> <p>Allows inter-household relations to be explored.</p> <p>Allows more personal/intimate issues to emerge.</p> <p>Enables analysis of gender dimensions.</p>	<p>Most interventions have an impact beyond the individual.</p> <p>It may be difficult to speak to the most marginalized people.</p> <p>Difficulties of attribution through long impact chains.</p> <p>Difficult to aggregate findings.</p>
Household	<p>Facilitates assessment of income, asset, consumption, and labor pooling.</p> <p>Permits appreciation of the link between individual, household, and group/community.</p> <p>Fosters understanding of links between life cycles and well-being.</p> <p>Contributes to the analysis of gender dimensions.</p>	<p>Exact membership is sometimes difficult to assess.</p> <p>Inner-household relations are often ignored.</p>

^[67] Adapted from: Chris Roche, *Impact Assessment for Development Agencies: Learning to Value Change*, (Oxford: Oxfam GB, 1999), p. 53

Social/ Community	<p>Fosters understanding of collective action and social capital.</p> <p>Facilitates understanding of potential sustainability of impacts.</p> <p>Fosters understanding of the potential for transformation of the community.</p> <p>Permits understanding of differences within the community.</p> <p>Can act as a sampling frame for household/individual assessments.</p> <p>Enables understanding of collective action and social capital.</p> <p>Permits understanding of faction and clan relations.</p> <p>Encourages understanding of potential transformation in the community and beyond.</p>	<p>Group and community dynamics are often difficult to understand.</p> <p>Difficult to compare using quantitative data.</p> <p>Membership/boundaries are sometimes difficult to assess.</p>
Subnational / CSO	<p>Fosters understanding of potential sustainability of impacts.</p> <p>Permits understanding of changes brought about by capacity-building.</p> <p>Allows assessment of performance (especially in terms of effectiveness and efficiency).</p> <p>Facilitates exploration of links between change at the community, group, and individual levels.</p>	<p>CSO dynamics are difficult to understand.</p> <p>Difficult to compare various local CSOs.</p>

Enabling Environment (Governing Institutions)	<p>Facilitates assessment of wider changes and influence.</p> <p>Permits assessment of how future contexts might affect the sustainability of change.</p>	<p>Greater problems of attribution.</p> <p>Internal processes and dynamics are difficult to explore or understand.</p>
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Annex C: Sample Survey Questions

Cash Assistance Project E

1. How long have you been receiving cash assistance?
 - For three years or more.
 - For more than a year but less than three years.
 - Less than a year.
2. How has cash assistance affected your family's ability to get enough food?
 - It has contributed significantly to providing sufficient and nutritious food for the family.
 - There is no big difference because, due to high costs, we still struggle to get enough food.
 - It has caused us problems because due to the way the need is assessed, we have stopped working so that our name is not removed from the lists of beneficiaries.
3. Has cash assistance helped you reduce your dependence on lenders?
 - Yes, it has helped us reduce our dependence on loans to meet daily needs.
 - No, the assistance barely covers basic expenses, and we still need to borrow.
 - No, now we rely more on loans to cover the remaining needs because we cannot commit to income-generating work, or they will remove our names [from the beneficiary list]. Therefore, we have no option but to borrow.
4. Have you been able to use cash assistance to create a source of income for the family?
 - Yes, the money helped me save a little and start a small project that generates income for me.
 - No, because we barely cover our needs with this aid.
 - On the contrary, we lost the desire to improve our livelihoods because they will deprive us of aid if we try to increase our income.
5. Has the cash support improved your family's ability to buy basic assets (such as household items, clothes, or school supplies)?
 - Yes, it enabled us to buy the basic things needed for the house.

- To a very small extent because the amounts are barely enough to buy food alone.
 - No, because if we buy furniture or supplies for the house, they will consider us to be in a better financial situation.
6. Has the cash support helped you improve your family's health and well-being?
- Yes, we can now afford health care and nutritious food, which improves our health.
 - There is no significant change in our health because the amounts are very small and healthy food is expensive, as is treatment.
 - Because we depend on this aid only as a primary source, our health has become worse because we have lost other aid.
7. How has the cash support affected your children's ability to access education?
- It made the costs of studying easier for us, such as books, supplies, and school fees.
 - No effect; the amounts are only spent on food, and yet it is not enough.
 - We had to take the children out of school in order to include their names in the lists of beneficiaries.
8. Has the cash assistance made you feel more secure or stable?
- Yes, it gives us stability and reduces stress about our daily needs.
 - There is no difference because there is a much greater need than the assistance does not cover.
 - On the contrary, we feel more stressed and worried that at any moment, the assistance could stop, and we would suffer more than before.
9. How has the cash assistance affected your ability to make decisions about family spending?
- It helped us prioritize spending according to our needs because it gave us peace of mind, and now we focus on education and crafts as sources of income.
 - The amounts are not enough to focus on other priorities, and we do not see a difference.
 - We have become completely dependent on assistance, and our fate is in the hands of donors and organizations.
10. Has the unconditional financial grants project helped reduce tension in the region and stabilize the community?

- Yes, we are less stressed, and conflicts between people have decreased because we are all guaranteed a livelihood
 - There is no difference; the tension continues due to great need.
 - The tension has increased because we live in anxiety that our name will be deleted from the list, and we fear that others will take our place even though we are more in need than them.
- 11.** Has cash support increased your ability to access resources (such as water, electricity, or public services)?
- Yes, it helped us access these resources more easily, and we can pay bills.
 - A little; we still lack access to services, especially since prices are high.
 - Our lives are very simple, and we cannot subscribe to any services, or our bills will accumulate.
- 12.** Were you involved in making decisions about how to implement the cash support program, especially the conversion from food baskets to cash?
- Yes, they held meetings with people and discussions, and I participated in them.
 - No, because they make decisions on their own, we are only beneficiaries.
 - We tried to explain to them that the criteria by which they make decisions about who deserves aid are wrong, but they did not listen to us.
- 13.** Is the project in line with the local culture and community needs?
- Yes, it is completely based on our needs and takes into account our values and customs.
 - The project has nothing to do with community needs or the local environment.
 - On the contrary, it introduced values that are not part of our community and increased hatred and dependency in the community.
- 14.** Do you feel that the cash support program has helped you become less dependent on foreign aid in the future?
- Yes, it increased my confidence and ability to be independent because it encouraged us to look for sources of income and strengthen our skills.
 - There is no difference.
 - No, I still depend completely on external aid, and we have become more dependent.
- 15.** How can this project be improved in the future (choose only one):

- To increase the amounts significantly and ensure their continuity for many years.
 - To provide food baskets instead of cash or vouchers to buy food.
 - To be linked to work and the provision of skills so that we can bring in the money ourselves.
 - To have more transparency in measuring the need because there is corruption and favoritism.
 - Not to exclude people who were able to improve their lives because this makes them dependent.
16. What is your advice to those in charge of the project?

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Field Research Team:

Maged Hashim

Hashim is a development professional and researcher with expertise in M&E, qualitative analysis, and project management.

Mohammed Al-Ghulisi

The study's field data collector in Marib governorate, Al-Ghulisi is a journalist and human rights activist currently pursuing a Master's degree in Public Law. He has worked with several human rights organizations, focusing on monitoring violations of international humanitarian and human rights law.

Fares Qomeh

The field data collector in Lahj governorate, Qomeh is a civil society activist and trainer in conflict resolution and peacebuilding. His previous research relates to civil society issues and humanitarian interventions.



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