

J]ERM Household Assessment Report

(Should be written and submitted ASAP after the completion of Rapid Need Assessment)

General Information:

Assessment Location: (Province/District/Village)	Dah sorkhak, Faristan, Jar Buzkashi, Shamal Maidan, Jar Sakhi, Dah sorkhak, Tagab Ismail, Khalifa bahram, Jar Noor Abad, Shamal Darya, and Jar khalo akbar villages, Qala - E-Naw district, Badghis province		
Type of crises: (Conflict/Nat. Disaster/Other)	Conflict		
Crisis Location: (Province/District/Village)	Districts of Murghab, Qadis, Aab Kamari and Jawand of Badghis province		
Assessment Team: (Name of I/NGO in the assessment team)	IRC, DoRR, DACAAR, WFP and ARAA		
Crises date: (date of displacement- Estimated)	Jul 2020		
Date of Notification:	18 Jul 2020		
Date of Assessment: (starting date/ending date)	20-28 Jul 2020		
<u>Date of Physical WASH Survey:</u>	Completed on 5 Aug 2020		
Affected Population: (Total Caseload: IDP/CAT A/CAT B/Other)	HHs:	Families	Inds.:
	18	19	109
Data collection method	Electronic	Hardcopy	
	Yes		

Assessment Finding and Recommendation in brief:

International Rescue Committee “IRC” Badghis Field Office received information through an official letter from Department of Refugees and Repatriation, according to which these families are displaced individually from all conflict and violence areas of Badghis province and have been settled in Qala-E-Now center of Badghis province. The main purpose of displacement is military operation between the AOGs and ANSF, tribal conflict, harassment, therefore, the people flee their places of origin and settled down in safer places. Hence, IRC, DoRR, ARAA, DACAAR and WFP jointly conducted a needs assessment for the mentioned caseload during 20-28 Jul 2020 and found 18 HHs (19 families; in order to response is being sufficient for Households that has more than 10 individuals we divided them into two separated families, therefore 1HHs were split into 2 families which are highlighted with light blue color in HEAT database so total families are equal to 19). among 40 families we found 19 families as new and real IDP families. As per findings of the JAT, these 19 families are in need of urgent basic needs.

This is worth to mention that due to delay in receiving HEAT database from leading assessment partner and displacement of IDPs from one place to other we have delayed in WASH survey.

The selected IDPs are from following districts: Bala Murghab, Qadis and Jawand. The mentioned families are displaced individually from above mentioned districts, most of them are from Qadis district of Badghis province. IDP reason to get settled in Qala e Now is to be safe and avoid any harm that will happen as a result of several military operations and tribal conflicts that happened several times over their villages and they did not have any other choice to leave the area and rescue their lives and the life of their family members, particularly children. As a matter of fact, if the security situation gets better in their villages, they will return to their places of origin. However, only the tribal conflict IDPs may stay longer until the conflict is resolved through mediation, which normally take months. As usual, almost all the selected IDP families did not have access to Food, NFI and WASH as well as other livelihood needs and their current living situation seemed very needy and urgent.

M (0-5 yrs)	F (0-5 yrs)	M (6-12yrs)	F(6-12yrs)	M(13-18yrs)	F(13-18yrs)	M(19-59yrs)	F(19-59yrs)	M(60+)	F(60+)	Total M	Total F	G-Total
14	12	19	21	3	8	21	10	0	1	52	57	109

Recommendations:

- DACAAR to provide WASH assistance.
- ARAA will provide NFIs.
- WFP to provide Food.

Sectorial Needs

• **Food Security and Livelihoods:**

In this caseload, food remained the main concern and high priority amongst households. This need has acutely affected the entire households. Although there was not a physical barrier to the food security regarding access to the market but the extremely poor conditions food stock or no food stock currently exposed these populations to the greatest deprivations and harshest conditions. It has been observed that, having no food stock is a serious condition for almost all of the assessed families with almost all of the households reported that they have no food stock while only less HHs stated that they had limited food for less than a week. Based on team observation, it will lead more food insecurity for the upcoming days. In this caseload, all assessed households have access to functional markets.

The market is 1.1km away and approximately more than an hour by foot.

Recommendations:

WFP to provide food for all families.

• **NFIs:**

NFI distraction was high among the concerns held by IDPS surveyed and the need for the NFI was a key priority to IDP households most of the assessed households ranked it as their second priority need and less as their third need (after food). All of the households reported that they had left their homes with only the items they could carry with them. Providing NFI, particularly kitchen Aid is reported to be important for the IDP households due to the fact that most of them has sell their NFI for money to buy food. Currently the IDP households use some of NFI items such as blankets and plates, which are offered by their relatives or host families for a short time. However, this will not meet needs for a sustained period. Respondents strongly communicated their NFI needs as per the breakdown below to

assessment team, and per team findings, NFI assistance in current season is a key factor in changing the level of vulnerabilities of the households.

Recommendations:

One of the urgent need for this caseload is NFIs items hence, ARAA will provide NFIs for this caseload.

- **Protection:**

Protection has been mainstreamed in all assessment process. IRC implement protection-focused activities such as referring some specific cases with more vulnerabilities to other agents for support.

Recommendation: Further follow up on people with additional vulnerabilities or People with Specific needs, in addition to this, DACAAR also proposes 3 plastic chairs to those IDP families who have disabled and pregnant members who cannot use latrine facility normally.

- **Health:**

All IDP households have settled in the surrounding areas of QIN and which is near to governmental provincial hospital, all of them have full access to clinics and health facility centers and the health services are free of cost. In case of any chronically illness and it is under protection protocol, and it will be under consideration of protection support.

Recommendations:

Apparently, the IDPs have proper accessibility to local governmental health facilities in Qala-e-Naw town; they have been advised and informed by the assessment team about the location of the facilities around them.

- **WASH:**

Access to safe and clean water is a big challenge in Qala-e-Now, Badghis province because almost all water points have high salinity or not stable. Identified water sources in this caseload are: hand pumps (used by 64%), Pipe water (used by 31% of the surveyed population), which are unstable and one family use stream water. All of the surveyed IDP families state that they cannot use water from existing water points for drinking and cooking because it is too saline or it is not stable or cost effective, which is difficult for them afford due to their poor financial status. To ensure water quality of the existing water points, DACAAR performed water testing, the result of which is tabulated in the below matrix:

S/N	Province	District	Water Source Type	Fecal coli forms (E.Coli/100 ml)	EC(μS/cm)	pH	Turb (NTU)
1	Badghis	QIN	Hand Pump	3	3260	7.80	2.1
2	Badghis	QIN	Pipe Water	7	1240	7.60	2.9
3	Badghis	QIN	Stream	15	3950	7.50	3.2

It is very challenging to provide durable solution particularly considering that underground water in Badghis, province is so well known with its salinity. Hence, even if ERM DACAAR provides new wells, the water is still very saline and can't be used for daily human consumption esp. for drinking and cooking.

To address water issue, DACAAR proposes the provision of 98,100 liters of clean and safe water for max. 60 days to all 19 families (109 individuals). The water trucking activity will be concluded after two months or when targeted beneficiaries leave the area.

Sanitation: is also at risk because 5 IDP HHs (26%) are doing open defecation due to latrine unavailability in their settlement area; the remaining 1IDPs HHs have been using existing latrine facilities i.e., Family Pit Latrine (74%) in their houses. To address the open defecation and to prevent any airborne or waterborne disease, DACAAR considers the construction of emergency bath and latrine (EBL). EBL will be constructed based on: (1) geographical location of families, (2) ethnicity background, (3) and their willingness to share EBLs.

Following table describes the rationale of EBL distribution and construction:

Condition	# of HHs	Proposed Constructed E.B.L
1 family living separately from each other	5	5
TOTAL	5	5

EBL will be constructed in such a way that it can be used by all population groups, including children, elderly people, and pregnant women. To encourage them to use the EBL on regular basis, they will also be taught through hygiene session that targets to increase awareness of hygiene issues among IDPs. Majority of the population have low living standard due to low knowledge on health and **hygiene**; and the situation is worsened by the absence hygiene kits in the families. Many of them do not take care of themselves. Their face is often dirty as well as their clothes are filthy and smelly. According to HEAT database, majority of the surveyed IDP families are in need for water storage containers and hygiene kits. No good ***waste management*** system is in place; littering seems to become a common practice in this caseload. To address the aforementioned issues, DACAAR will provide H.E session and HE kits.

Recommendations: To address the above mentioned issue and also following criteria under ERM Project, DACAAR proposes following points to be considered as WASH assistance for this caseload:
1. Provision of 98,100 liters of safe water through water trucking for 2 months(max.) to 19 IDP families (or 109 individuals). Regular chlorination and weekly water testing of the water trucking, water reservoirs, as well as water fetching and water storage dishes of IDPs will also be conducted to ensure that water quality is suitable for human's daily consumption and meets WHO and Afghanistan National Drinking Water Quality standards.

2. **Construction of 5 sets of EBL to 5 IDP HHs** who have been conducting open defecation. It is expected that (a) EBL will be used on regular basis, (b) in the future no open defecation will be found, and (c) any fecal-oral-transmission disease will be prevented in the near future.
3. **Distribution of hygiene kits to 19 IDP families** in order to enable people to good self-practice of hygiene in their daily life.
4. **Distribution of 8 plastic garbage bags per family to all 19 IDP families** in order to support solid waste management issue as well as to prevent littering in the future.
5. **Implementation of hygiene session to 19 IDP families** in order to raise people's awareness and to ensure knowledge increase on self-practice on good sanitation and hygiene. The hygiene session will be an integrated WASH approach that supports the distribution of hygiene kits as well as the proper usage of existing WASH facilities (water sources and latrine facilities).
6. **Provision of 3 plastic chair to 3 IDP family** for those 3 individuals who have disability in using squat latrine.

Challenges: Our main challenge during every assessment is the segregation of fake IDPs among real IDPs and as well their relocation and no network coverage which wastes our time and logistics.

1. Annexes

Annex 1: HEAT Database

Annex 2: WASH Survey

WASH Assessment Report written by : Fazal Hadi Habibi, DACAAR, Badghis ERM Team Leader

Date of writing : 5 Aug 2020

Reviewed by :

Approved by: :

DACAAR Expenses Recommendation:

Sn	Description of Activities	Unit	Quantity	Unit Price in AFS	Total Estimated Amount AFN
1	Distribution of water to 18 families for 60 days	Liters	98,100	0.49	48,069
2	Construction of 5 EBLs sets for 5 HHs who practice open defecation	Set	5	10,508	52,540
3	Distributing H.E kits to 18 Families	No.	19	1,931	36,689
4	Distributing plastic garbage bags to dump solid waste. (One bag per week) and 8 bags. For one family.	No.	152	12	1,824
5	Provision of plastic chair	No	3	1,000	3,000
				Total	142,122
	Human Resources				



Humanitarian Aid
and Civil Protection



ERM
Emergency
Response
Mechanism

1	Staff	Hygiene Couple (Male and Female), Field Officer, Foreman will mobilize in the field.	Mobilize existing staff funded by ECHO.
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