

ERM Household Assessment Report

1. General Information:			
Assessment Location: <i>(Province/District/Village)</i>	Province: Nangrahar.	District : Behsoud, Dara e Nur, Kuz Kuner.	
	Village : Different villages, for details please, see HEAT database.		
Type of Crises: <i>(Conflict/Natural Disaster/Other)</i>	Conflict		
Crisis Location: <i>(Province/District/Village)</i>	Provinces: Kuner. Districts: Nurgul, Chapadara.		
Assessment Team: <i>(Name of I/NGO in the Assessment Team)</i>	DACAAR, PUAMI, WFP, DORR, WAW.		
Crises Date: <i>(Date of Displacement-Estimated)</i>	September, October 2019		
Date of Notification:	22 October 2019		
Date of Assessment <i>(starting date/ending date)</i>	23 - 27 October 2019, including completion of WASH re-assessment.		
Total households assessed	66		
Affected Population: <i>(Total Caseload: IDP/CAT A/CAT B/Other)</i>	HHs:	Families:	<i>Inds.</i>
	32	34	180
Data Collection Method	Electronic	Hardcopy	
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2. Assessment Finding and Recommendation in brief:

Related to ongoing clashes between Taliban fighters, Daesh and government forces in Nurgul and Chapadara districts of Kuner province causes displacement to Behsoud, Dara e Nur and Kuz Kuner districts of Nangarhar and brings a bad impact on both the affected people and local residents.

A joint needs assessment was conducted during 23-27 October 2019 - involving DACAAR, PUI, WFP, DORR, WAW and the WASH re-assessment was also performed during the aforesaid duration. The Joint Needs Assessment Team found 34 families as eligible beneficiaries out of 66 HHs and recommended them for humanitarian assistance. According to HEAT database, the average family size of 34 families is 5 persons per family.

Currently they are living in secure areas and no threat exists against them. Fortunately, they have access to existed justice agencies which are active in Nangarhar (Human Right Commission, General attorney and Police stations). They have access to the public hospitals, but due to poverty they are not able to afford medication cost in case of any sickness.

Lack of job opportunity and livelihood are the main protection concern against IDPs in the displacement location, during the assessment no proper household items were seen around them thus, they are suffering due to lack of Food, Cash, WASH and other supplementary items. Therefore, the assessment team recommended them for emergency Humanitarian assistance.

According to the report analysis, food was listed as the first priority, Cash second priority while WASH were listed as the third priority.

Recommendations:

Based on team's observations, the displaced families live in bad condition; hence JNA Team recommends following assistance to be provided in this caseload.

1. PUI will provide cash for NFIs to all IDP families.
2. WFP will provide food to all IDP families.
3. WAW will provide protection.
4. DACAAR will provide complete relevant WASH to all IDP families.

3. Sectorial Issues:

WASH:

No major issue is identified concerning availability and access to **water**. Identified water sources in this caseload are hand pump (52%), Dug well (15%), protected spring (18%) and pipe water (15%) that are located about 5 minutes (average) walking distance away from IDPs' settlement area. Water quality test (WQT) done by DACAAR ERM Field team indicates that existing water points have parameter results (i.e.: pH, EC, bacteria, and turbidity) as per ANSA standard. Detail result of WQT is described following:

Location	Type of Water Points	#	Focal coliform	pH	Turbidity	EC-u/cm	Date
Behsoud	Dug Well	1	0	7.7	1	928	23-Oct-19
Behsoud	Hand pump	1	0	7.6	0.5	907	23-Oct-19
Dara e Nur	Protected spring	1	0	7.5	1	787	27-Oct-19
Dara e Nur	Hand Pump	1	0	7.6	0.5	869	24-Oct-19
Kuz Kuner	Hand Pump	1	0	7.6	1	910	23-Oct-19
Kuz Kuner	Pipe water	1	0	7.5	0.5	988	23-Oct-19

Sanitation may become a challenge because 3 IDP families (9%) are still doing open defecation due to unavailability of latrine facility in their household; meanwhile, the remaining IDP families have been using existing latrine facility such as: family pit latrine (91%). To prevent any airborne or waterborne disease that may occur as the consequence of open defecation, DACAAR considers the construction of emergency bath and latrine (EBL). EBL will be constructed based on: (1) families' geography location, (2) ethnicity background, (3) their willingness to share EBLs. Following table describes EBL construction plan:

Condition	# of families	Proposed Constructed EBL
3IDP families living in the same compound.	3	1
Total	3	1

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. In addition to this, DACAAR also proposes **provision of 2 plastic chairs to 2 IDP families with disabled family member (1 Pregnant woman and 1 paralyzed)** who cannot easily use squat latrines. The plastic chair is a mean to ensure **protection mainstreaming in WASH response**.

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 HE session and HE kits in this caseload.

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. Implementation of **hygiene session to all 34 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).
2. Distribution of **34 sets of hygiene kits to all 34 IDP families** in order to enable the people to self-practice good hygiene and sanitation in their daily life.
3. Construction of **1 set of EBL to 3 IDP families** 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 case will be found, and (c) any fecal- oral-transmission disease can be prevented in the near future.
4. Provision of **2 plastic chairs to 2 IDP families** who has family member with physical limitation who cannot use squat latrine. Plastic chair will be considered as **protection mainstreaming approach** in WASH response.
5. Distribution of **8 plastic garbage bags per family to all 34 IDP families** in order to help them avoiding littering as well as to increase their knowledge on the importance of solid waste management in their life.

Challenges:

- Expectation of the host community.
- Changing IDPs location from one place to other place because of no enough rooms, place and social issues.
- Some IDPs families did not had ID card which are left in their place of origin and were default their recognition.
- Interference of some government authority and local elder and etc.

4. Annex:

2019 10 29 Nangarhar - HEAT Database
2019 10 29 Nangarhar - WASH Survey

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Date of report : 29 October 2019
Reviewed by : Eng. Ayoub Hotek, ERM FC, DACAAR

DACAAR Recommendation:

Sn	Description of Activities	Unit	Quantity	Unit Price in AFS	Total Amount AFS
1	EBL construction	Sets	1	10,508	10,508
2	HEK distribution	Sets	34	1,931	65,654
3	Provision of plastic chair	No	2	2,000	4,000
4	Plastic garbage bags distribution	Item	272	12	3,264
Total					83,426
Human Resources					
1.	Staff	Hygiene Couple (Male and Female), Engineer will support the process.		Mobilize existing staff funded by ECHO	