

ERM Household Assessment Report

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

1. General Information:

Assessment Location: (Province/District/Village)	Yazdeh, PD (1,3,5), Qala e Muzic, Sangezore, Mahajer Abad and other areas of Farah city, Farah Province		
Type of crises: (Conflict/Nat. Disaster/Other)	Conflict		
Assessment Team: (Name of I/NGO in the assessment team)	DACAAR, DRC, ARAA, NPO/RRAA, and DORR.		
Crises date: (date of displacement - Estimated)	04 January 2020 and 25 Feb 2020		
Date of Notification:	14 Mar 2020 when DoRR shared this caseload with DACAAR		
Date of Assessment:	JNA: (15 Mar-28 Mar) 2020 including WASH re-assessment period		
Affected Population: (Total Caseload: IDP/CATA/CATB/Other)	HHs:	Families:	Inds.
	57	57	375
Data collection method	Electronic	Hardcopy	
	X		

2. Assessment Finding and Recommendation in brief:

Related to ongoing clashes between Taliban fighters and government forces in center of Farah (insecure areas), Anardarah, Balabuluk, Gulestan, Lash e Juwayn, Poshtrod and Qala e kah, districts of Farah Provinces causes massive displacement to Farah city and brings a bad impact on both the affected people and Farah city residents.

The situation got worsened when ISAF troops launched air campaign against Taliban fighters and due to heavy bombardment, people decided to flee to Farah City to ensure their safety. As per initial reports that was shared, hundreds of families were displaced to the outskirts of Farah City. Soon after the notification, a joint assessment was conducted during (15-25 Mar) 2020, involving DORR, DACAAR, DRC, NPO/RRAA, and ARAA. The Joint Needs Assessment (JNA) team found 57 families out of 193 as the eligible beneficiaries and responses were planned. According to HEAT database, the average family size of the 57 families is slightly above 6 persons per family.

Currently they are living in secure place and no threat exists against them. Fortunately, they have access to existed justice agencies which are active in Farah (Human Right Commission, General attorney and Police stations). They have access to the public clinics 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, NFIs and other supplementary items. Therefore, the assessment team recommended them for emergency humanitarian assistance food and non-food items.

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



Recommendations:

Based on the JNA team observations, the displaced families live in bad condition. Therefore, the team recommended them for emergency assistance. The joint assessment teams recommended the below assistances for the affected families:

1. DRC to distribute food and NFI to 57 displaced families.
2. DACAAR to provide WASH support and distribute Hygiene Kits to 57 HHs.

WASH

Lack of access to water is one of the biggest challenges in this caseload because 3 families (5%) of the surveyed IDP families) do not have access to nearest water points; as a result, they have to independently buy water and isn't stable. Considering their poor financial status, it is very difficult for them to afford water purchasing. The remaining IDP families are able to collect water from nearest Tube Wells (60%) and Hand Pumps (35%), which are 2 minutes (average) walking distance from IDPs' settlement area. To ensure that the existing water sources have clean and safe water for daily human consumption, DACAAR ERM Field Team conducts Water Quality Test (WQT). Results are found to be in line with ANSA standard on clean and safe water for human consumption; below table explains in detail WQT results:

Province	Village	EC	Fecal col	PH	NTU	Sample taken by
Farah	PD5, Qala e mizic, Yazdeh, Sangezore	(1016 mjs/cm - 2.67m s/cm)	0	7.183-7.56	<5	Abdul Jalil

Recommendation:

For 3 IDP families (18 individuals) who have been buying water by themselves and it is not stable, DACAAR recommends distribution of water through trucking. Proposed water to be distributed is 16200 liters for the duration of 60 days (max) for 18 individuals. Water trucking may be concluded early if the targeted beneficiaries leave the area or when it reaches the maximum agreed upon period. For durable solution, regrettably, no further assistance can be proposed in this caseload because following WASH Assessment DACAAR ERM Field Team finds that the underground water level is very low (60m>).

Sanitation will have future challenges if left unaddressed because 11 families (21%) in this caseload are still practicing open defecation due to unavailability of latrine facilities in their settlement areas. The remaining IDP families have been using existing latrine facility in their household such as, family latrine (used by 79% of the surveyed IDP families in this caseload). To address open defecation and to prevent any airborne or waterborne diseases, DACAAR considers the construction of emergency bath and latrine (EBL). EBL will be constructed based on: (1) Geographical location of IDP families, (2) ethnicity background, and (3) their willingness to share EBLs. Following table describes the rationale of EBL distribution and construction:

Description of families living	# of families	Proposed E.B.L	# of families	Proposed Bath	# of families	Proposed Latrine
# of separate families	3	3	1	1	1	1
#of two families living in same compound	4	2	0	0	0	0
#of three families living in same compound	3	1	0	0	0	0
Total	10	6	1	1	1	1

In general DACAAR will construct 7 Latrine for 11 families and 7 Bath for 11 families.

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, JNA teams find 3 old age men and 1 pregnant woman, who have difficulty using squat latrine facilities in HEAT database. As an effort to address protection issues and to enable elderly men individuals to use latrines easily, DACAAR proposes to provide 4 plastic defecation chairs to 4 families. Provision of plastic defecation chairs is a means 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 in 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 tackle this issue, DACAAR will provide HE kits and HE sessions to all families in this caseload.

NFI:

It is also considered one of the most important and urgent need of the IDPs population. According to the collected information it is shown that NFI is the second priority needs. As physically observed by the assessment teams during the assessment; most of the IDPs population using host community household commodities such as, kitchen sets, blankets, and accommodations. The rest of IDPs either using their own or purchased by loan, however, none of the household had enough household commodities with themselves.

In additions these families neither have enough money to purchase nor does the host community have capacity to provide them all facilities .

3. Recommendations for response

According to the above mentioned condition, 2 humanitarian organizations have expressed their commitments to support the 57 IDP families, such as: (1) DACAAR with construction of emergency bath and latrine as well as hygiene kits and hygiene education,(2) DRC with distribution of food and NFI for all up the caseload to the 57 affected families.

Food Security, Nutrition and Livelihood:

Conducted assessment shows that majority of the IDPs are in dire condition of foods aid. Because out of the total caseload, no family has food ration for more than two months; Majority IDPs reported food as their first priority. Due to current displacement all the IDPs population



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affected from various angles such financial power, food stock and losing of income generating activities.

Health:

All IDPs can receive free treatment at the provincial main hospital but due to lack of facilities and medical supplies, they would likely need to buy medicine themselves. Especially, families with small children and elderly people which there is high possibility of different diseases to suffer and affect them.

3. Recommendations for response

According to the above mentioned condition, 2 humanitarian organizations have expressed their commitments to support the 57 IDP families, such as: (1) DACAAR with construction of 7 emergency bath and 7 latrine, 57 hygiene kits, hygiene education and distribution of water (2) DRC with distribution of food and NFI to the entire caseload.

On the WASH assistance, following is the DACAAR's commitment to be delivered to this caseload:

1. Distribution of **16200 liters of safe and clean water** (15 liters/capita/day) to all 3 IDP families (18 individuals) through water trucking for 60 days (max).
2. Construction of **7 Emergency bath to 11 families and 7 latrine to 11 families**, who are still practicing open defecation.
3. Implementation of **hygiene session to all 57 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).
4. Distribution of **57 sets of hygiene kits to all 57 IDP families** in order to enable the people to self-practice good hygiene and sanitation in their daily life.
5. Distribution of **8 plastic garbage bags per family to all 57 IDP families** in order to help them avoid littering as well as to increase their knowledge on the importance of solid waste management in their life.
6. Distribution of **4 plastic chairs to 3 old age men and 1 pregnant**, who cannot squat and use latrines properly.

Challenges:

Due to insecurity issue, some areas are challenging for visit by humanitarian actors.

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Response
Mechanism

DACAAR M.O Recommendations:

Estimated Budget for WASH Response in Farah, Province

Sn	Description of Activities	Unit	Quantity	Unit Price in AFS	Total Amount AFS	
1	Water trucking for 3 families (18 individual for 60 days)	Liter	16200	0.6	9,720	
2	Distribution of HE kits for each family's	Package	57	1,931	110,067	
3	Construction of Emergency latrine and bath for 11 families	Number	Bath	7	4,641	32,487
			Latrine	7	5,867	41,069
4	Plastic Chairs 4 who could not squatting.	Number	4	800	3,200	
5	Distribution of 8 plastic garbage bags per family	Number	456	12	5,472	
Total					202,015 AFN	
Human Resources						
1	Staff	Hygiene Couple (Male and Female), Field Officer, Foreman will mobilize in the field.		Mobilize existing staff funded by ECHO.		