

## ERM Household Assessment Report

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

### 1. General Information:

<b>Assessment Location:</b> (Province/District/Village)	PD (1,2,3,4,5), Bagh pol, Bagh e Now, Gurgabad and other areas of Farah city, Farah Province		
<b>Type of crises:</b> (Conflict/Nat. Disaster/Other)	Conflict		
<b>Assessment Team:</b> (Name of I/NGO in the assessment team)	DACAAR, DRC, ARAA and DORR.		
<b>Crises date:</b> (date of displacement - Estimated)	20 Jan 2020 to 17 Mar 2020.		
<b>Date of Notification:</b>	29 Mar 2020 when DoRR shared this caseload with DACAAR		
<b>Date of Assessment:</b>	JNA: 31 Mar- 09 Apr 2020.		
<b>Affected Population:</b> (Total Caseload: IDP/CATA/CATB/Other)	<b>HHs:</b>	<b>Families:</b>	<b>Inds.</b>
	49	49	298
<b>Data collection method</b>	<b>Electronic</b>	<b>Hardcopy</b>	
	X		

### 2. Assessment Finding and Recommendation in brief:

Related to ongoing clashes between Taliban fighters and government forces in center of Farah (insecure areas) Khakesafed, Balabuluk, Anardara and Pushtrod districts of Farah Province 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 families were displaced to the outskirts of Farah City. Soon after the notification, a joint assessment was conducted during (31 Mar-09 Apr) 2020, involving DORR, DACAAR, DRC, and ARAA. The Joint Needs Assessment (JNA) team found 49 families out of 137 as the eligible beneficiaries and responses were planned through different interventions. According to HEAT database, the average family size of the 89 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.



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### 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. DACAAR To provide WASH support and distribute Hygiene Kits to 49 HHs.
2. DRC to provide NFI and Food to 49 families.

## WASH

### Water

**Water** is essential for life, health and human dignity. All people should have safe and equitable access to sufficient water for drinking, cooking and personal hygiene. According to HEAT database and field observation, the surveyed families have already had access to water from the existing water points, such as: hand pumps (16% of the surveyed population), tube well (84% of the surveyed population). The water points are within 1.65 minutes (average) walking distance from the settlement area. In addition to this, to ensure water to be safe for daily 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	Baghe Now, Baghepol, Gurgabad	(962-1740)µs/cm	0	7.52-8.11	<5	Abdul Malik

### Recommendation:

All the families in this caseload have access to safe drinking water, DACAAR will train all the 49 IDP families how to use water fetching tools and how to collect safe drinking, bathing, cooking water to avoid from diseases.

**Sanitation** will have future challenges if left unaddressed because 2 families (4%) 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 (96% of the surveyed population). 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	# of Families	Proposed E.B.L
# of separate families	2	2
<b>Total</b>	<b>2</b>	<b>2</b>

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



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hygiene issues among IDPs.

In addition to this, JNA teams find 5 pregnant women and 2 old aged persons who have difficulty using squat latrine facilities in HEAT database. As an effort to address protection issues and to enable disabled individuals to use latrines easily, DACAAR proposes to provide 7 plastic defecation chairs to 7 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 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 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 49 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 NFI and food to all up the caseload.

#### **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 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.

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commitments to support the 49 IDP families, such as: (1) DACAAR with construction of 2 complete emergency bath and latrine, 49 hygiene kits, hygiene education and implementation of hygiene session (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. Construction of 2 sets of complete emergency bath and latrines to 2 families, who do not have access to sanitation facilities.
2. Implementation of hygiene session to all 49 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).
3. Distribution of 49 sets of hygiene kits to all 49 IDP families in order to enable the people to self-practice good hygiene and sanitation in their daily life.
4. Distribution of 8 plastic garbage bags per family to all 49 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.
5. Distribution of 7 plastic chairs to 5 pregnant women and 2 old age person who cannot squat and use latrines properly.

#### Challenges:

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

Report written by: Abdul Malik

Date of writing: 11 Apr 2020.

#### 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	Distribution of HE kits for each Family	Package	49		1,931	94,619
3	Emergency latrine and bath	No	Bath	2	4,641	9,282
			Latrine	2	5,867	11,734
4	Plastic Chairs	No	7		800	5,600
5	Distribution of 8 plastic garbage bags per family	No	392		12	4,704
<b>Total</b>						<b>125,939 AFN</b>
Human Resources						
1.	Staff	Hygiene Couple (Male and Female), Engineer will support the process.				Mobilize existing staff funded by ECHO