

## ERM Household Assessment Report

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

### General Information:

Assessment Location: (Province/District/Village)	Herat Province: Guzara district Urdu Bagh camp please see HEAT database.		
Type of crises: (Conflict/Nat. Disaster/Other)	Conflict.		
Crisis Location: (Province/District/Village)	Herat Province/ Farsi and Shendand districts please see HEAT database.		
Assessment Team: (Name of I/NGO in the assessment team)	DACAAR, DRC, IRC and ARAA.		
Crises date: (date of displacement-Estimated)	05-10 May 2020.		
Date of Notification:	14-06-2020		
Date of Assessment: (starting date/ending date)	16-21 June 2020 Including WASH assessment period (OCT held on 21 June 2020 by OCHA).		
Date of WASH Assessment	Completed on 21 June 2020.		
Affected Population: (Total Caseload: IDP/CAT A/CAT B/Other)	HHs:	Families	Individuals
	22	22	104
Data collection method	Electronic	Hardcopy	
	Tablet		

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

Related to ongoing clashes between Taliban fighters and government forces in Farsi and Shendand districts of Herat province causes displacement to Herat City and brings a bad impact on both the affected people and Herat city residents.

A joint assessment was conducted on 16 June 2020 involving DACAAR, DRC, IRC and ARAA. The Joint Needs Assessment (JNA) team found 22 families as eligible beneficiaries out of 108 families and recommended them for humanitarian assistance. According to HEAT Database, the average family size of 22 families is 4.72 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 Herat (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.

According to the report analysis, Food was listed as the first priority, NFI second priority while WASH was listed as the third priority.

### Recommendations:

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

1. ARAA will cover NFI needs of 22 families.
2. DRC will distribute SMEB for food, shelter support and healthcare to 22 families.
3. DACAAR will cover WASH needs of 22 families.

### WASH

Issues are found in this caseload concerning access to **water** because all IDP families collect water from host community houses and Urdu Bagh old IDP camp settlement, the distance to the water sources is more than 500 meters, there is social restriction for collecting water from host community houses and old camp also, IDPs do not have access to sufficient water for drinking, cooking and bathing, in the area some host community people also don't have access to sufficient and stable safe drinking water.

IDPs collect water from hand pump sources (100%) located far from settlement area which have clean and safe water for daily human consumption, DACAAR ERM Field Team conducts water quality test by using relevant parameters, i.e.: pH, EC, bacteria, and turbidity. The results indicated that PH (7.75-7.9) and EC between (754-871) with No bacteria and turbidity of water is below 5 NTU, therefore, water is safe enough for drinking and other family consumption.

### Recommendation:

DACAAR recommends construction of a new hand pump well which IDPs and some host community people will get access to sufficient and safe drinking water. Also, to ensure the water to be safely managed by IDPs for their daily consumption, DACAAR's hygiene promoters will launch a campaign to raise their awareness and knowledge on safe practices.

**Sanitation** may have future challenges because 22 IDP families (100%) are still doing open defecation due to unavailability latrine facility in their settlement area. To address 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) families' geography location, (2) ethnicity background, and (3) their willingness to share EBLs.

For this IDP settlement because IDPs are living scattered and there is social restriction because IDPs are from different tribes we considered construction of 10 EBLs for these IDPs, Following table describes the rationale of EBL distribution and construction:

Condition	# of Family	# of proposed latrine	# of proposed bath
One family living separately from each other	1	1	1
Two families living together in one HH	12	6	6
Three families living together in one HH	9	3	3
<b>Total</b>	<b>22</b>	<b>10</b>	<b>10</b>

**In general construction of 10 Latrines for 22 families which are doing OD and construction of 10 Baths for 20 families don't have baths.**

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 families.

In addition to this, DACAAR also proposes provision of 2 plastic chairs to 2 families having family member who cannot easily use squat latrine. The plastic chair is a means to ensure **protection mainstreaming approach in WASH response**.

**Recommendation:**

DACAAR targets the implementation of hygiene education in order to increase beneficiaries' awareness on good sanitation and will construct **10 baths and latrines** and provide **2 squatting chair** to 2 families member who can't use EBL in order to enable them to use latrines easily and with dignity.

**hygiene:** 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 hygiene sessions and hygiene kits in this caseload.

**Recommendation:**

To further tackle the above mentioned issue, DACAAR proposes (1) the distribution of hygiene kits, (2) hygiene education, and (3) 8 plastic garbage bags per family to all 22 families in order to enable them to perform self-practice of good sanitation and hygiene. Such combination of hygiene kits and hygiene education are considered to be an integrated intervention to increase health awareness in this population. The assistance of 8 Plastic garbage bags per family is aimed is to enable 22 families to collect their solid waste and then dispose it to a safe designated location.

**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. 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 in-term of household commodities as the season is going to be hot during the night. So that sleeping beds and other necessary tool kits are considered as the urgent needs to avoid flies and insects.

**Recommendations:**

To tackle NFI issue UNHCR will cover NFI needs of 22 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; 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.

**Recommendations:**

To tackle food issue DRC will cover food needs of 22 families.

**Shelter:**

Conducted assessment shows that Majority of the IDPs are living in rental houses. Due to current displacement all the IDPs population affected from various angles such financial power, food stock and losing of income generating activities.

**Recommendations:**

To tackle shelter issue DRC will distribute SMEB for eligible families.

**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.

**Recommendations:**

To tackle health issue DRC will distribute SMEB for eligible families.

**COVID-19:**

On 31 December 2019, a cluster of pneumonia of unknown etiology was reported in Wuhan City, Hubei Province of China. On 30 January 2020 WHO declared the outbreak of novel Corona virus a Public Health Emergency of International Concern. Particularly, WHO raised alert of low and middle income country and the preparedness of potential outbreaks. On 24 February Afghanistan's Ministry of Public Health (MoPH) reported one case had been confirmed in the Western province of Herat.

As per JNA findings majority of IDPs are aware of this virus and they know how to protect themselves against corona virus, they got this information from media and social media, all of them know about first symptoms of COVID-19 also, during JNA we don't face any reported case of COVID-19 by IDPs in the settlement areas.

**Recommendation:**

For further protection against COVID-19, DACAAR's hygiene promoters will launch a campaign to raise IDPs awareness and knowledge on COVID-19 also, DACAAR proposes distribution of hygiene kits in order to enable them to perform self-practice of good sanitation and hygiene. Such combination of hygiene kits and hygiene education are considered to be an integrated intervention to increase health awareness against corona virus in this population.

**Recommendation:**

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

1. Implementation of hygiene education to all 22 IDP families.
2. Construction of 10 baths and latrines to 22 IDP families.
3. Distribution of 8 plastic garbage bags to each family.
4. Distribution of 2 squatting chairs to 2 IDPs who can't squat.
5. Distribution of hygiene kits to all 22 IDP families.
6. Construction of 1 new bore well dressed by hand pump.

**Challenges:** No challenges.

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Date of writing: 21 June 2020.

Review By: Eng. Ayoub Hotak, WASH Field Coordinator, DACAAR

Approved by: Ms. Mariana SIDABUTAR, Emergency WASH Adviser, DACAAR

### DACAAR Recommendations:

#### Estimated Budget for WASH Response in Herat, Province

Sn	Description of Activities	Unit	Quantity	Unit Price in AFS	Total Amount AFS
1	Distribution of HE kits for each families	Package	22	1,947	42,834
2	Construction of 10 baths to 22 eligible IDP families.	Number	10	4,653	46,530
3	Construction of 10 latrines to 22 eligible IDP families.	Number	10	5,927	59,270
4	Distribution of 8 plastic garbage bags for each families	Number	8X22	12	2,112
5	Squatting chair to 2 IDPs who can't squat.	Number	2	1,000	2,000
6	Construction of one new well	Number	1	98,902	98,902
<b>Total</b>					<b>251,648 AF</b>
	Human Resources				
1.	Staff	Hygiene Couple (Male and Female), Engineer, Regional Manager will support the process.			Mobilize existing staff funded by ECHO