

Household Emergency Assessment Tool (HEAT) Afghanistan

Overview

The Household Emergency Assessment Tool (HEAT) is a standardised emergency assessment tool adopted by the Afghanistan Humanitarian Country Team, and includes indicators illustrating demographics and a household's vulnerability in the following sectors: food security, shelter, water, sanitation and hygiene (WASH), education and livelihoods.

The HEAT is used as part of the ECHO funded Emergency Response Mechanism (ERM), to assess the eligibility of conflict and shock affected communities to one-time multi-purpose cash and WASH assistance. The Danish Refugee Council (DRC) led consortium includes two other implementing partners, the Agency for Technical Cooperation and Development (ACTED) and International Rescue Committee (IRC). The response is also supported by the Danish Committee for Aid to Afghan Refugees (DAACAR) for WASH related assistance. This factsheet summarises key indicators from the HEAT assessments carried out by partners in July 2020.

Methodology

The primary data for this factsheet was collected by partner organisations within the ERM through household interviews with conflict and shock affected communities. REACH combined and analysed the collected partner HEAT data in order to present key findings in this factsheet for the purpose of informing future ERM programming and advocacy. The findings are representative of the assessed households and are not to be interpreted as statistically generalisable to the whole population.

Limitations

All data was collected by ERM partners through their own channels, as such there was not one standardised methodology used. While efforts were made to consolidate the data as much as possible, this should be kept in mind whilst reviewing these findings.

Assessment Coverage

Households: **1,888**
Individuals: **12,539**
Provinces: **25**

Total number of households found eligible to receive assistance in July: **1,623 households**

Provinces Covered

Badakhshan, Baghlan, Balkh, Bamyan, Farah, Faryab, Ghazni, Ghor, Helmand, Herat, Jawzjan, Kabul, Kandahar, Kapisa, Khost, Kunduz, Logar, Maidan Wardak, Nangarhar, Paktya, Parwan, Samangan, Sar-e-pul, Takhar, and Zabul.

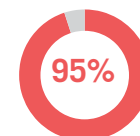
Household Demographics

Average household size: **6.6**

% of households by displacement profile:

% of households members by sex and age:

Female (52%)	Age	Male (48%)
1%	60+	2%
18%	18-59	14%
22%	6-17	21%
11%	0-5	11%



Displaced households

% of displaced households by reason⁷:

Active conflict	93%
Anticipated conflict	18%
Flood	7%

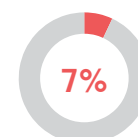
Vulnerability and Priority Needs

% of households by key vulnerability indicators:¹

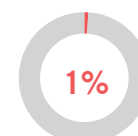
- 23% At least one member with a disability²
- 6% More than 10 household members
- 57% Exhibiting health seeking behaviour³
- 77% Debt greater than 8,000 AFN



Female headed households



Elderly headed households



Child headed households

Income, Debt and Livelihoods

Reported main source of income since shock:

None	0%
Agriculture and Livestock	12%
Daily unskilled labour	63%
Daily skilled labour	2%
Other	23%

Reported monthly household debt:

Average reported debt: **20,000 AFN**
Of which, average amount accrued in the 30 days prior to interview: **10,780 AFN**

The average debt contracted by the assessed households was **22 times higher** than the average income at the time of the assessment.

Average reported monthly income: **895 AFN**

The average household income divided by the household size results in **148 AFN per person, per month**

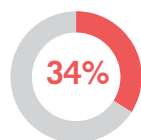
Most frequently reported reasons for contracted debt:⁴

Food	69%
Costs of displacement	11%
Rent	11%

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WASH

% of households using an unimproved water source⁵ as their main source for domestic use at the time of the interview:



Using unimproved water source for domestic use



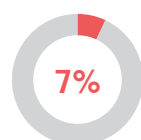
Households reporting not having enough water for drinking, cooking or bathing at the time of the interview

85% of households reported their main water source to be further than 500 metres away.

21% of households reported using an unimproved latrine type.⁶

Health

% of households without a functional health facility within 2 hours of their house:



No functional health facility within 2 hours

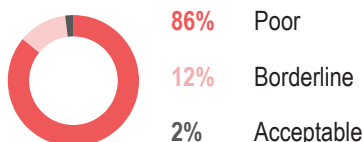
82% of households reported facing at least one barrier to accessing healthcare. The most frequently reported barriers were:⁷

- 1 65% Cost of medicines
- 2 53% Cost of healthcare
- 3 39% Cost of transports
- 4 6% Unknown/inaccessible location
- 5 5% Distance and travel time

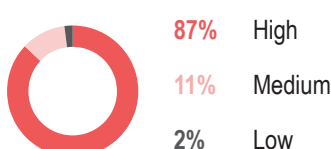
50% of households reported that they had delayed seeking medical care for critical health problems to save money in the 30 days prior to data collection.

Food Security

% of households by Food Consumption Score (FCS):⁸

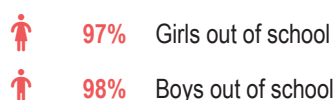


% of households by reduced Coping Strategy Index (rCSI) score:⁹



Education

% of school aged children (aged 6 to 17) reported to not be attending formal school:



Of the 98% of households reporting that they had school aged children not attending school, the most frequently reported reasons were:^{7,12}

- 1 53% Lack of documentation
- 2 33% Costs
- 3 17% Security concerns
- 4 11% Distance
- 5 10% Disability

24% of households reported that they had stopped sending children to school in order to engage them in working for economic gain or productive activities

Shelter

% of households by reported shelter type occupied at the time of interview:



66% of households reported to be renting the shelter they occupied at the time of interview.

% of households by most frequently reported concerns related to the shelter occupied:⁷

- 1 52% Eviction
- 2 20% Size
- 3 8% Landlord problems
- 4 7% Damaged building
- 5 2% Safety

On average, households reported 8 persons to be living in the shelter they occupied at the time of interview.

NFI Non Food Items (NFIs)

Of the 100% of households reported to be in need of at least one key NFI, the reported items needed were:⁷

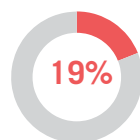
- 84% Sleeping mats or mattresses
- 90% Plastic tarpaulin
- 91% Cooking pots
- 81% Stainless steel cups
- 81% Water storage containers
- 87% Gas cylinders
- 86% Clothing
- 77% Female sanitary items
- 4% Mobile or assistive device

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ERM 10 - July 2020

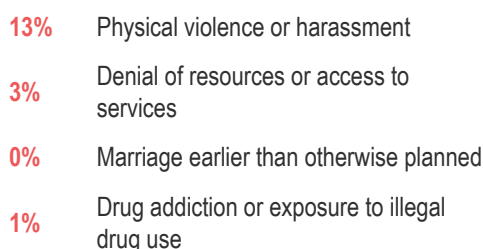
Protection

% of households who reported a member to have experienced a protection incident or at

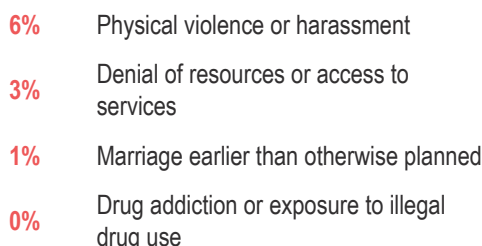


At least one member experienced a protection incident or at risk

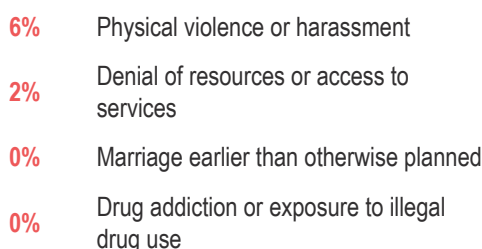
Reported protection incident or risk experienced by men and boys:⁷



Reported protection incident or risk experienced by women and girls:⁷



Reported protection incident or risk experienced by children:⁷



Accountability to Affected Population

4% of households reported having no access to mobile network communications and tools.

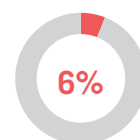
58% of households reported preferring to receive assistance in cash.

% of households reporting preferred way of communicating feedback or complaints:



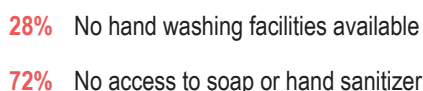
Awareness and Impact of COVID-19

% of households reporting being unaware of COVID-19:



Unaware of COVID-19

% of households by reported access to hand washing facilities and/or soap:

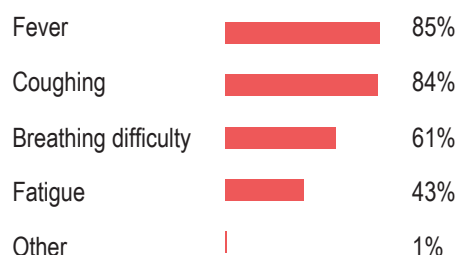


% of households who witnessed any members of their community being discriminated against as a result of COVID-19:



Witnessed any community member discriminated against

% of households by primary symptoms of COVID-19 reported to be aware of:⁷



% of households by preventative measure to COVID-19 reported to be aware of:⁷



% of households reported witnessing discrimination due to COVID-19, by group targeted:⁷



End Notes

- Vulnerability indicators listed correspond to household characteristics that make up part of the ERM MPCA eligibility criteria.
- Disability is counted as at least one member of the household reported to have a severe disability, based on Washington Group questions, where the individual either 'cannot do at all', or has 'a lot of difficulty doing' any of the following: seeing, hearing, walking, remembering, self care (such as washing or dressing), or communicating. For more information see [here](#).
- Health seeking behaviour is qualified as any household reporting that there has been a household member with a health issue for which they have wanted to seek medical care.
- Most frequently reported reasons for contracted debt from households who reported being in debt.
- Households were asked to report their main source of water for domestic use. Improved water sources include: hand pump/ bore well, piped water, protected spring, or purchased water. Unimproved sources include: dug well, stream/river, kandas, unprotected spring, pond/lake, or other. For more information see [here](#).
- Households were asked to report the type of latrine they had access to. Improved latrine types include family latrine, family VIP latrine. Unimproved latrine types include community latrine, no latrine, or other. For more information see [here](#).
- Respondents could report multiple options. Findings may therefore exceed 100%.
- The Food Consumption Score (FCS) is calculated using the frequency of a household's consumption of different food groups during the 7 days before the survey. For more information see [here](#).
- The Reduced Coping Strategies Index (rCSI) is based on the rate that households with food consumption problems relied on negative coping strategies during the 7 days before the survey. For more information see [here](#).
- The Livelihoods Coping Strategy Index (LCSI) score is a measure of reliance on livelihood-based coping mechanisms to cope with lack of food. For more information see [here](#).
- Awaaz, humanitarian helpline connecting Afghans (IDPs, returnees) and refugees affected by conflict and natural disaster with information on assistance.
- Data was collected during closure of schools due to Covid-19 which may have affected reporting