Household Emergency Assessment Tool (HEAT) Afghanistan ERM 10 -



25%

ERM 10 - August 2020

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 August 2020.

Methodology

The primary data for this factsheet was collected by partner organisations within the ERM through household interviews within 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.

Exceptions

Due to the impact of the floods that occurred in August, a short version of the HEAT was deployed to rapidly assess shock-affected households. Data from the short tool are not reported in this factsheet.

Assessment Coverage

Households1: 2,613

Individuals: 17,737

Provinces: 26

Total number of households found eligible to receive assistance in July¹: **2,267 households**

Provinces Covered

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





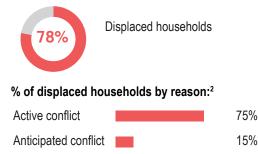
육 Household Demographics

Average household size:

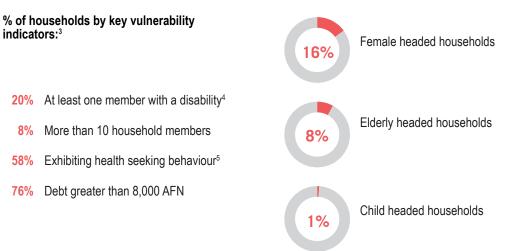
6.1

% of households by displacement profile:





🔆 Vulnerability and Priority Needs



Flood

Income, Debt and Livelihoods

Reported main source of income since shock:

None		28%
Agriculture and livestock	•	8%
Daily unskilled labour		57%
Daily skilled labour	1	2%
Other	1	5%

Average reported monthly 1,127 AFN income:

RESCUE

The average household income divided by the average household size results in 184 AFN per person, per month

Reported monthly household debt:

Average reported debt:	25,998 AFI
Of which, average amount accrued in the 30 days prior to interview	9,950 AFN

The average debt contracted by the assessed households was 23 times higher than the average income at the time of the assessment.

Most frequently reported reasons for contracted debt:^{2,6}

Food	68%
Healthcare	11%
Rent	7%





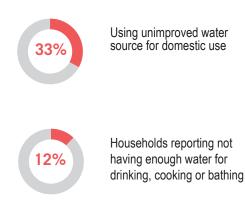
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WASH

% of households using an unimproved water source⁷ as their main source for domestic use at the time of the interview:



87% of households reported their main water source to be further than 500 metres away.

21% of households reported using an unimproved latrine type.⁸

ਝੈ Health

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



No functional health facility within 2 hours

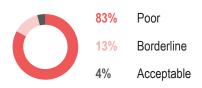
89% of households **reported facing at least one barrier to accessing healthcare**. The most frequently reported barriers were:²

0	7 2 %	Cost of medicines
2	66%	Cost of healthcare
B	48%	Cost of transport
4	11%	Distance and travel time
6	5%	Unknown/inaccessible location

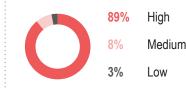
59% of households reported that they had **delayed seeking medical care for critical health problems to save money** in the 30 days prior to data collection.

🛎 Food Security

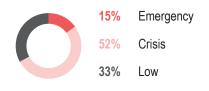
% of households by Food Consumption Score (FCS):⁹



% of households by reduced Coping Strategy Index (rCSI) score:¹⁰



% of households by Livelihood Coping Strategies (LCS) score:¹¹



Education

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



Of the **100%** of households **reporting that they had school aged children not attending school,** the most frequently reported reasons were:^{2,12}

0	58%	Lack of documentation
2	28%	Costs
B	23%	Security concerns
4	13%	Distance
6	8%	Disability

14% of households reported that they had **stopped sending children to school so that they could work** for economic gain or productive activities

(f) Shelter

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

House		32%
Tent or makeshift shelter		62%
Open space	1	1%
Non-residential shelter		4%
Unfinished building	I	1%

48% 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

0	37%	Eviction
2	23%	Damaged building
3	20%	Size
4	5%	Landlord problems
6	2%	Safety

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

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:²

	88%	Sleeping mats or matresses
	82%	Plastic tarpaulin
0 <u></u> •	82%	Cooking pots
	72%	Stainless steel cups
	71%	Water storage containers
٥	80%	Gas cylinders
Ť	82%	Clothing
Ť	67%	Female sanitary items
Ĝ	3%	Mobile or assistive device











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Protection

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



At least one member experienced a protection incident or is at risk

Reported protection incident or risk experienced by men and boys:²

16%	Physical violence or harassment
1%	Denial of resources or access to services
1%	Marriage earlier than otherwise planned
1%	Drug addiction or exposure to illegal drug use

Reported protection incident or risk experienced by women and girls:²

11% Physical violence or harassment Denial of resources or access to 2% services 1% Marriage earlier than otherwise planned Drug addiction or exposure to illegal 0% drug use

Reported protection incident or risk experienced by children:²

10%	Physical violence or harassment
2%	Denial of resources or access to services
1%	Marriage earlier than otherwise planned
1%	Drug addiction or exposure to illegal drug use

iii Accountability to Affected Populations

3% of households reported having no access to mobile network communications and tools.

61% of households reported preferring to receive assistance in cash.

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

	31%
	26%
	22%
•	10%
1	3%
•	8%

Awareness and Impact of COVID-19

% of households reporting being unaware of COVID-19:



Unaware of COVID-19

% of households by primary symptoms of COVID-19 that they reported to be aware of:^{2,14}

Fever	90%
Coughing	90%
Breathing difficulty	76%
Fatigue	48%
Other	1%

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

- No hand washing facilities available 32%
- 66% No access to soap or hand sanitizer

% of households by preventative measure to COVID-19 reported to be aware of:^{2,14}



% 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 reported witnessing discrimination due to COVID-19, by group targeted:2

Ş	2%	People with chronic illness
Re	1%	Returnees
T 1	4%	Elders
ભં	1%	People with disabilities
Ť	2%	Adults (men and/or women)

End Notes

1 The number of households reported here corresponds exclusively to those assessed with the entire HEAT tool. Additional households were assessed with the short-tool in August. The findings from the short tool will be analyzed separately (August and September). 2 Respondents could report multiple options. Findings may therefore exceed 100%. 3 Vulnerability indicators listed correspond to household characteristics that make up part of the ERM MPCA eligibility criteria

4 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.

5 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. 6 Most frequently reported reasons for contracted debt from households who reported being in debt.

7 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

Spring: polaritate, or other for more information and mass 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.
9 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.
10 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.

11 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 12 Data were collected during closure of schools due to COVID-19 which may have affected reporting

13 Awaaz, humanitarian helpline connecting Afghans (IDPs, returnees) and refugees affected by conflict and natural disaster with information on assista 14 Question asked exclusively to those respondents who reported being aware of COVID-19.









