

COMMUNITY-BASED NEEDS ASSESSMENT

SUMMARY RESULTS
 PILOT • KUNAR
 MAY – JUN 2018



In accommodation provided by a host family, an IDP family in Kunar shares their living quarters with their livestock, which poses some public health implications. © IOM 2018

ABOUT DTM

The Displacement Tracking Matrix (DTM) is a system that tracks and monitors displacement and population mobility. It is designed to regularly and systematically capture, process and disseminate information to provide a better understanding of the movements and evolving needs of displaced populations, whether on site or en route.















In coordination with the Ministry of Refugees and Repatriation (MoRR), in May through June 2018, DTM in Afghanistan piloted a Community-Based Needs Assessment (CBNA), intended as an integral component of DTM's Baseline Mobility Assessment to provide a more comprehensive view of multi-sectoral needs in settlements hosting IDPs and returnees. DTM conducted the CBNA pilot at the settlement level, prioritizing settlements hosting the largest numbers of returnees and IDPs, in seven target provinces of highest displacement and return, as determined by the round 5 Baseline Mobility Assessments results completed in mid-May 2018. DTM's field enumerators administered the inter-sectoral needs survey primarily through community focus group discussions with key informants, knowledgeable about the living conditions, economic situation, access to multi-sectoral services, security and safety, and food and nutrition, among other subjects.

DTM enables IOM and its partners to maximize resources, set priorities, and deliver better-targeted, evidence-based, mobility-sensitive and sustainable humanitarian assistance and development programming. For more information about DTM in Afghanistan, please visit www.displacement.iom.int/afghanistan.

COVERAGE

Province	Districts	Settlements		% BMA Settlements Assessed	
		Districts Assessed	Settlements Assessed under BMA		Settlements Assessed under CBNA
Baghlan	15	11	561	201	36%
Kabul	15	9	537	201	37%
Kunar	15	15	359	199	55%
Kunduz	7	7	318	199	63%
Laghman	5	5	205	152	74%
Nangarhar	22	20	908	384	42%
Takhar	17	16	485	199	41%
Total	96	83	3,373	1,535	46%

HIGHLIGHTS

-  **15** districts assessed
-  **199** settlements with largest IDP and return populations assessed
-  **1,033** key informants interviewed
-  **603,338** individuals reside in the assessed settlements
-  **87,964** residents (13%) are returnees from abroad
-  **66,302** IDPs currently in host communities
-  **37,380** residents fled as IDPs
-  **24,236** residents (14%) are former IDPs who returned home
-  **7,611** residents fled abroad as out-migrants
-  **1,356** returnees and IDPs live in tents or the open air
-  **7%** (199 settlements) of assessed settlements have received assistance in the 3 months prior to assessment
-  **82%** assessed settlements have no healthcare and are more than an hour's walk from the nearest health facility
-  **42%** households have no access to WASH facilities and practice open defecation
-  **45%** of surveyed households were unable to meet their basic nutritional needs



METHODOLOGY

DTM in Afghanistan aims to include the Community-Based Needs Assessment (CBNA) as a component of the existing Baseline Mobility Assessment (BMA), which tracks mobility and displacement. As a result, this pilot of the CBNA operates using the same methodology as the BMA.

Exactly as is done in the BMA, for the CBNA, DTM predominantly employs local enumerators from the areas of assessment, who collect quantitative data at the settlement level through community focus group discussions with key informants (KIs). Enumerators also collect qualitative data through direct observations to complement the quantitative research on living conditions, quality and access to basic services, the security situation and socio-economic indicators in each settlement.

The current version of the CBNA takes between two to three hours to complete, per settlement. Through IOM's partnership with the World Bank, DTM and the Bank will conduct a joint-analysis of the CBNA pilot data to produce a shorter, more streamlined CBNA tool that is aligned with the national Afghan Living Conditions Survey and can be implemented nationwide to produce actionable information at the district and settlement level to inform national development programming priorities.

Once this CBNA tool is refined and finalized by partners, this component will operate on the following basis. Enumerators will collect data, daily, using a paper-based form, which will be pre-filled with data from the previous round for verification of existing data and to expedite the assessment process. Completed forms will be submitted weekly to the provincial DTM office and verified for accuracy by the team leader and data entry clerk. Once verified, the data will be entered electronically via mobile devices, using KoBo forms, and submitted directly into DTM's central SQL server in Kabul, where it will be systematically cleaned and verified daily, through automated and manual systems. This stringent review process ensures that DTM data is of the highest quality, accuracy, and integrity.

5 TARGET POPULATIONS

Through the Baseline Mobility Assessments and Community-Based Needs Assessments, DTM tracks the locations, population sizes, and cross-sectoral needs of five core target population categories:

1. **Returnees from Abroad**
Afghans who had fled abroad for at least 6 months and have now returned to Afghanistan
 2. **Out-Migrants**
Afghans who moved or fled abroad
- Internally Displaced Persons (IDPs), subdivided into the following three categories:
3. **Fled IDPs**
Afghans from an assessed village who fled as IDPs to reside elsewhere in Afghanistan
 4. **Arrival IDPs**
IDPs from other locations currently residing in an assessed village
 5. **Returned IDPs**
Afghans from an assessed village who had fled as IDPs in the past and have now returned home

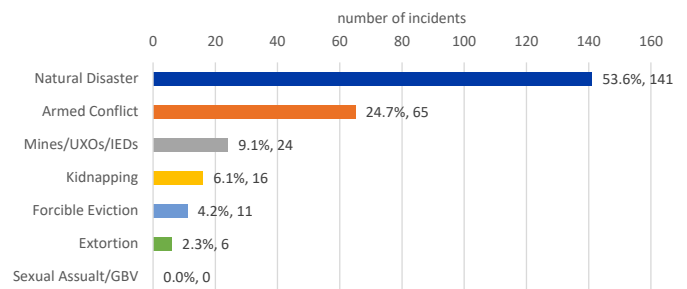
Data on population sizes for the 5 target population categories is collected by time of displacement, using each of the following time frames: 2012-2015 • 2016 • 2017 • 2018.



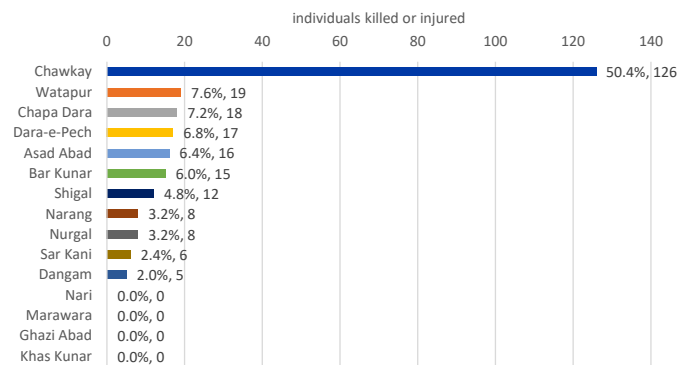
SAFETY & SECURITY

In the three months prior to assessment, 250 people in Kunar were killed or injured as result of conflict, affecting 11% of the total population surveyed. Kunar is more vulnerable to natural disasters (141 incidents), than armed conflict (65 incidents). Natural disasters affected 8% of the population, while armed conflict affected only 1% of the population.

Safety & security incidents in the last 3 months | Kunar



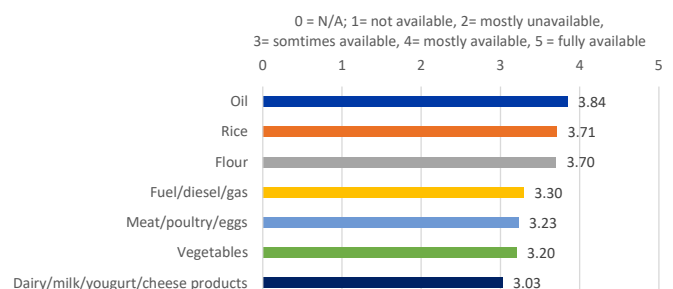
Fatalities & injuries due to conflict in last 3 months | Kunar



MARKETS

Food items such as vegetables, rice, flour, meat/poultry/eggs and dairy/milk/cheese were 'sometimes available'. Key commodities like oil and fuel/diesel/gas were also 'sometimes available'. Overall, basic food items and commodities were less available in Kunar.

Availability of commodities | Kunar

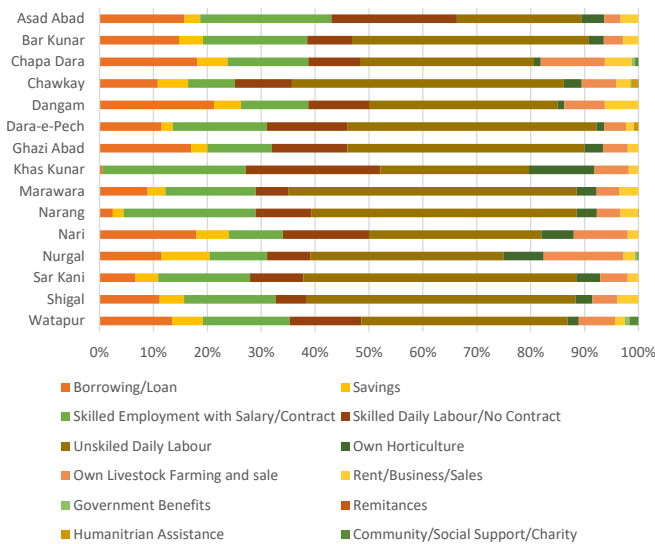




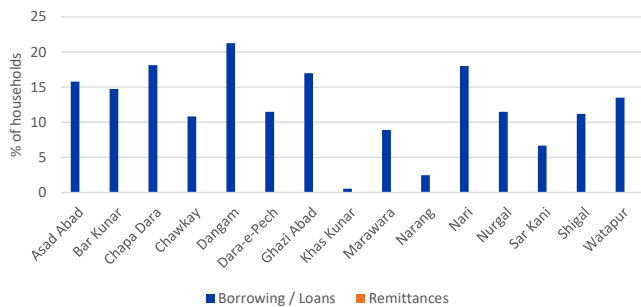
FINANCES & ASSETS

Of the surveyed population, 41% engaged in unskilled daily labour, while 18% were in skilled formal employment. Khas Kunar district reported the highest proportion of skilled employment, while Chawkay had the lowest. The reliance on agriculture and livestock was 4% and 6%, respectively. While agriculture was prevalent in Khas Kunar and Nurgal, livestock was reported in Nari, Chapa Dara and also Nurgal. However, 38% of households surveyed have access to farmland and 10% have adequate access to pastoral land. Across the 199 villages assessed, the average monthly income reported was AFN 4,096, expenses were AFN 6,974, and debt was AFN 3,129. Overall, monthly expenses were 70% greater than income. In terms of other sources of household income, 11% of the surveyed population in the province relied on loans and there was no reliance on remittances. Dangam district reported the highest reliance on loans, while reliance on loans was lowest in Narang district.

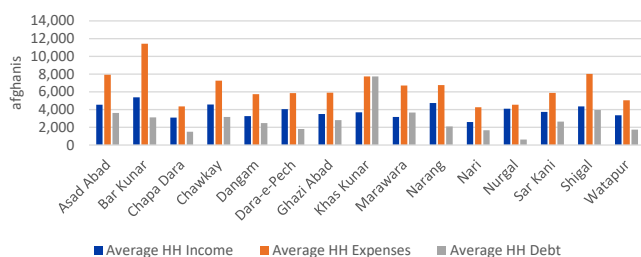
Main Income Sources | ranked by % of households | Kunar



Households reliant on loans & remittances by district | Kunar



Average monthly household income, expenses & debt by district | Kunar



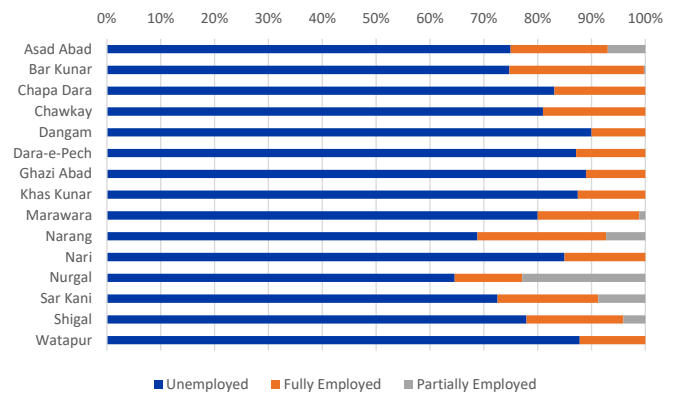
LIVELIHOODS

The unemployment rate for men in Kunar is 79%, the highest reported across the seven assessed pilot provinces. Female participation in employment was also low, 97% of women were reportedly unemployed. The high rates of unemployment correlate with the barriers to employment in Kunar, as respondents ranked lack of economic opportunities, including for women, as the most significant barrier, followed by lack of vocational training or further education, and insecurity.

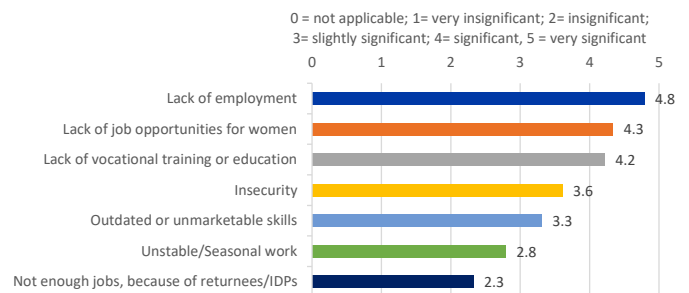
The available vocational trainings include tailoring, computer and mobile repairs, machinery/vehicle repairs, agriculture and livestock.

The average percentage of children (3%) and the elderly (4%) contributing to household incomes was also low.

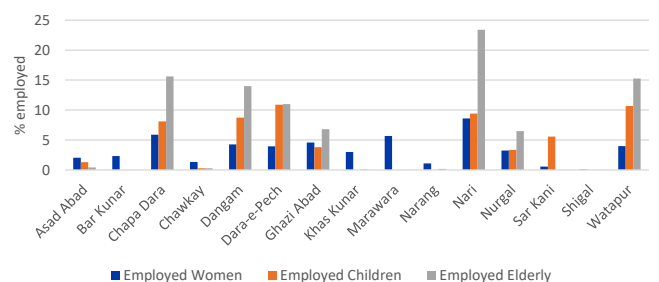
Employment Status | Men (males over 18) | Kunar



Barriers to Employment | ranked by significance | Kunar



Employment participation of women, children & the elderly | Kunar

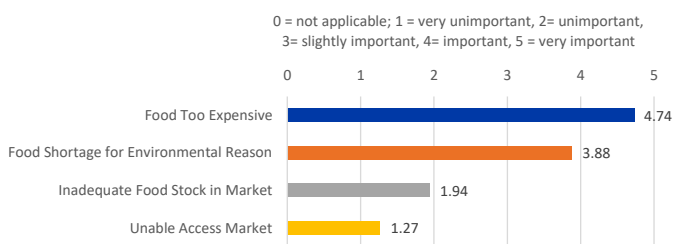




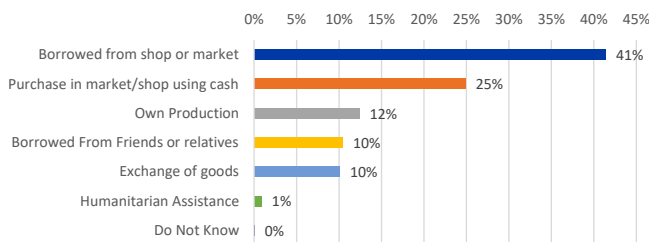
FOOD & NUTRITION

Nearly half (45%) of the surveyed population was unable to meet their basic nutritional needs, due to high unemployment and poverty and consequent unaffordable cost of food. The effect of environmental factors, such as drought, on food production, and the subsequent food shortages resulted in the cost of food to increase. In terms of coping strategies, 41% of the households had to borrow food from the shop or market, 25% used cash to buy food, 12% relied on their own production and 11% borrowed from their friends or relatives. The lack of employment opportunities, the high cost of food and food insecurity adversely affect development and increases poverty.

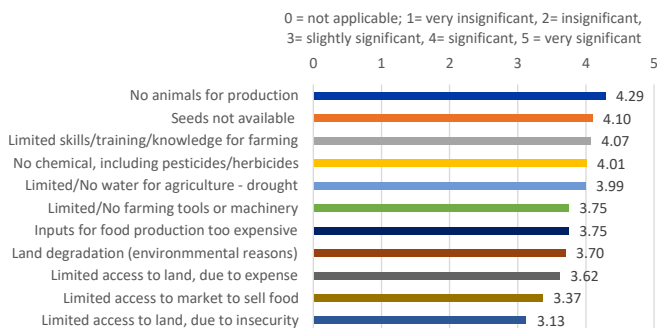
Drivers of Food Insecurity | ranked by importance | Kunar



Food Sources | Kunar



Constraints on local food production | ranked by significance | Kunar

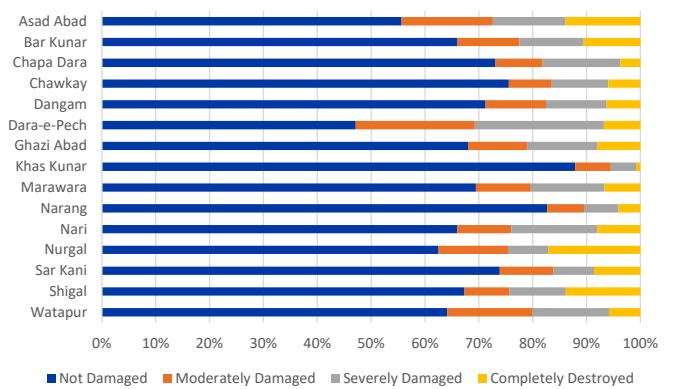


SHELTER

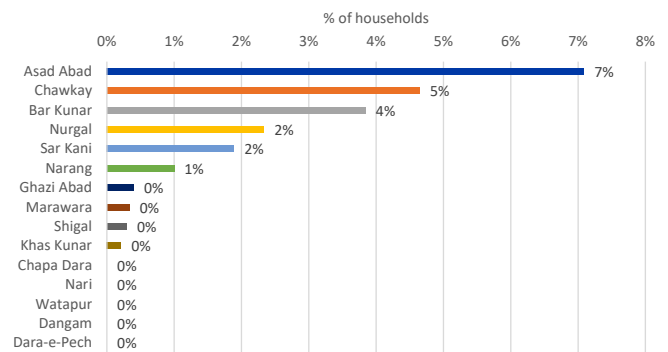
Since Kunar reported to be affected by conflict less severely as it was by natural disasters, the shelter conditions were comparatively better in Kunar than in the other seven pilot provinces assessed. Only 8% of the shelters in Kunar were completely damaged, while 68% were not damaged.

In terms of access to housing, the main problems reported included the unavailability of housing options and the inability to build accommodation. Of the households surveyed, only 2% could not independently afford rental prices.

Shelter conditions by % of damage and district | Kunar



% households unable to afford rent in the last 6 months | Kunar



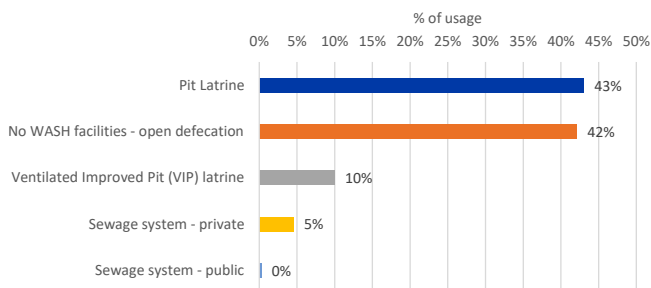
WASH

Nearly half of the surveyed population (42%) in Kunar do not have WASH facilities and, as a result, practice open defecation. Additionally, there is no public sewage system in Kunar. The lack of appropriate and hygienic latrines is a public health challenge. Open defecation also poses an increased risk of sexual exploitation, threat to women’s privacy and dignity, and psychosocial stressors.¹

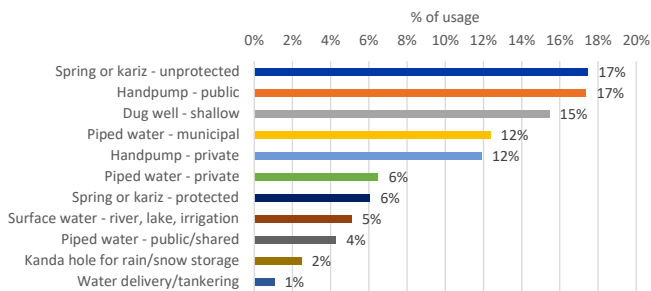
Primary sources of water included unprotected springs or karizes (17%), public hand-pumps (17%), shallow wells (15%), piped water (12%), and private hand-pump wells (12%).

¹ Saleem, M., T. Burdett, V. Heaslip, 2019, Health and social impacts of open defecation on women: a systematic review, BMC Public Health, 19(158): 1-12.

Latrine Usage | by Percentage | Kunar



Drinking Water Sources | by percentage | Kunar

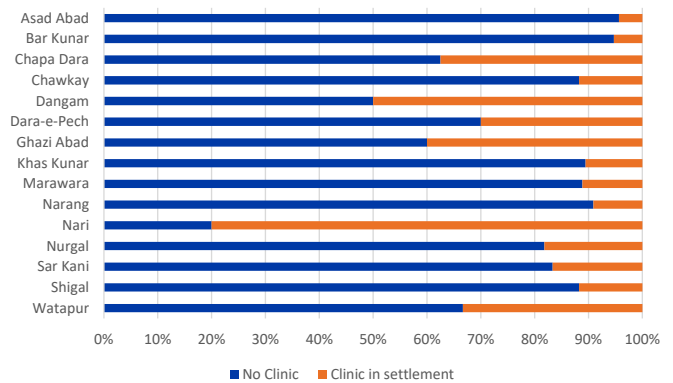


HEALTH

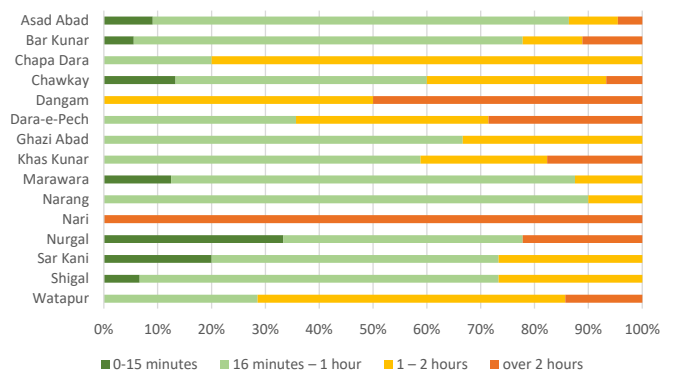
There were no clinics located in 82% of the assessed settlements in Kunar. For 34% of the settlements, the nearest health facility is over an hour away on foot. Despite limited access to health facilities, 50% of the surveyed settlements perceived their medical staff to be adequate. It was reported that 11.4% of the population were affected by illnesses and medical conditions.

Across the 199 settlements surveyed, the main health conditions and diseases included influenza (31,486 cases), dehydration (8,960 cases), respiratory infections (5,853 cases), drug addiction (4,558 cases) and tuberculosis (2,463). The high prevalence of drug addiction could be linked with high levels of unemployment and poppy production in Kunar. Of the 3,743 people affected by tuberculosis, 68% do not receive any treatment.

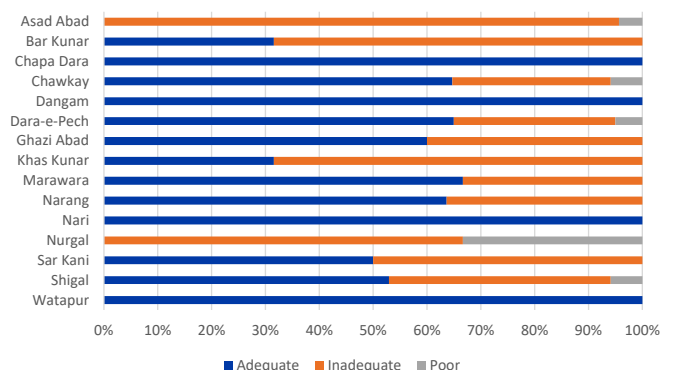
Access to Health Services | % of settlements with clinics | Kunar



Access to Health Services | % of settlements without clinics by walking distance to nearest clinic | Kunar



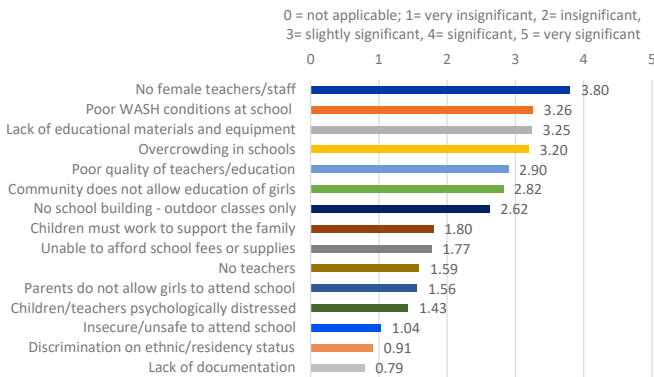
Quality of Medical Services | by adequacy of medical staff (% of settlements) | Kunar



EDUCATION

The lack of female staff was ranked as a top barrier to education, followed by lack of school infrastructure, poor quality of schools and teachers, overcrowding and lack of sanitation in schools. Cultural norms and familial restrictions on female education were also cited as important barriers to accessing education.

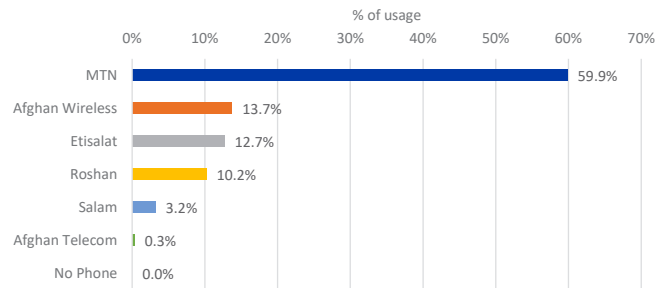
Barriers to Education | ranked by significance | Kunar



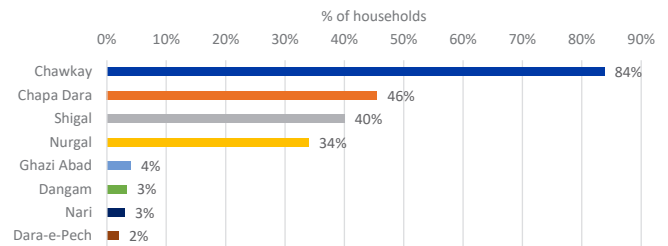
UTILITIES

Of the seven assessed provinces, Kunar has the worst mobile phone connectivity, with 37% of households receiving no signal. On average, for 17 days per month there is no mobile service or signal. Salam is the predominant carrier. Cell phone coverage has further implications upon communication campaigns, feedback mechanisms, phone surveys and mobile money solutions for cash-based assistance.

Telecom Providers by % of household usage | Kunar



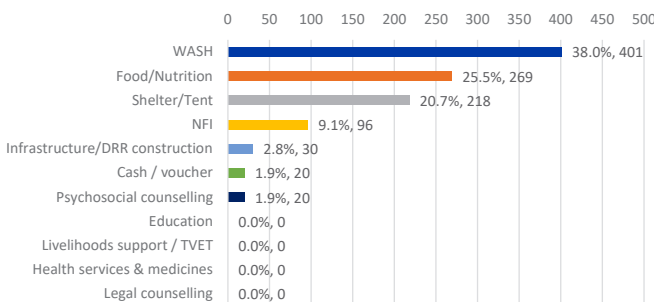
Telecom Services | % of households with no signal/service by province | Kunar



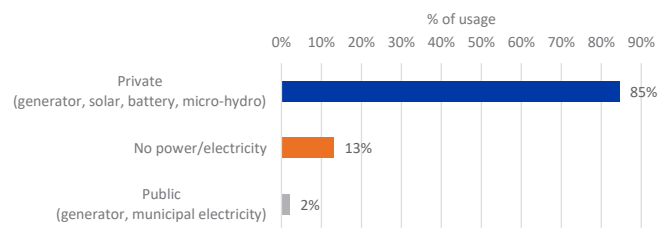
ASSISTANCE

Of the total assistance delivered, only 7% of households in Kunar received assistance in the three months prior to the assessment. Of all the assistance delivered, 38% was received for WASH, 25% was received in food and nutrition, and 20% was received for shelter. Despite high unemployment rates and high prevalence of diseases, no livelihoods or health assistance was delivered.

Assistance received by number of beneficiary families | Kunar



Electricity sources by percentage of household usage | Kunar



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Please visit www.displacement.iom.int/afghanistan for more information, including maps, datasets and dashboards.

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