



Third-party Assessment Report


Assessment of Vulnerabilities & Resilience
in JPF-Funded Project Locations in Kabul,
Nangarhar and Hirat

Japan Platform (JPF)

JPF-24-001

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ACRONYMS

Abbreviations	Description
AAR	Association for Aid and Relief, Japan
ACBAR	Agency Coordinating Body for Afghan Relief
ADRA	Adventist Development and Relief Agency
ANDMA	Afghanistan Natural Disaster Management Authority
DfA	De-facto Authorities
DMAC	Afghan Mine Action Agency
DoEc	Department (Provincial) of Economy
DoRR	Department (Provincial) of Refugees and Repatriation
FAO	United Nation's Food and Agriculture Organisation
FGDs	Focus Group Discussions
FSAC	Food Security and Agriculture Cluster
HNRP	Humanitarian Needs and Response Plan
IDPs	Internally Displaced Persons
INSO	International NGOs Security Organisation
IOM	International Organisation for Migration
IPC	Integrated Food Security Phase Classification
JPF	Japan Platform
KIIs	Key Informant Interviews
MoEc	Ministry of Economy
MoRR	Ministry of Refugees and Repatriations
NFI	Non-Food Item
NSIA	National Statistics and Information Authority
ODK	Open Data Kit
OECD	Organisation for Economic Co-operation and Development
PDM	Post Distribution Monitoring
PWJ	Peace Winds Japan
REALs	Reach Alternatives
SPSS	Statistical Package for Social Studies
SVA	Shanti Volunteer Association
TKH	The Knowledge House
TOR	Terms of Reference
UNHCR	United Nations High Commissioner for Refugees
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WASH	Water Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organisation
YVO	Your Voice Organisation

1 INTRODUCTION

Japan Platform (JPF) has been a key contributor to humanitarian efforts in Afghanistan, intermittently supporting interventions since 2001. In July 2024, JPF initiated an evaluation of its 2023 programme portfolio in Afghanistan to assess the appropriateness of targeting (both the target groups and focus), the relevance and timeliness of its interventions (speed and duration), and the extent to which protection and Do No Harm principles have been effectively integrated into project implementation.

The third-party assessment was guided by a comprehensive Terms of Reference ([Annex – III](#)) with the primary objectives of documenting key successes, extracting lessons learned, and providing practical recommendations for informed institutional decision-making; achieved through an inclusive third-party assessment design that ensures the active involvement of various actors and stakeholders and optimal representation.

The Knowledge House (TKH) conducted this third-party assessment from July 2024 to March 2025. Due to differences in opinions and approaches, however, JPF ended the Service Agreement with TKH before finalization of the report. TKH's draft report was edited by JPF in the current form.

This report presents detailed findings, conclusions and recommendations derived from this third-party assessment.

1.1 Background and Context

Afghanistan has been facing a prolonged and complex crisis, marked by decades of conflict and repeated displacements, political instability, recurrent natural disasters, and economic challenges. The situation has worsened significantly since the transition of August 2021, which has led to a sharp deterioration in the humanitarian situation, with millions of Afghans experiencing hunger, and deprivation of basic needs. According to ACAPS (2023), these challenges and the current level of humanitarian need in Afghanistan are inextricably linked to the state of the economy, which has been shrinking since August 2021¹.

As presented in Table – 1 below, based on data from Humanitarian Needs and Response Plans (HNRP 2020 to 2024), the number of people in need of humanitarian assistance has significantly increased from 9.4 million in 2020 to 29.2 million in 2023, reflecting the worsening humanitarian situation in Afghanistan; despite the moderate decrease in number of people in need of humanitarian aid in 2024 (decreased from 29.2 to 23.7 million) it remains significantly higher than that of 2020. At the same time, the number of people targeted for humanitarian aids also grew significantly i.e., from 7.1 million in 2020 to 22.1 million in 2022. However, the number of targeted people dropped in 2023 to 21.3 million and further to 17.3 million in 2024, likely due to funding constraints, De-facto Authorities (DfA) stringent policies, and humanitarian aid focusing more on emergency response interventions.

¹ ACAPS (2023). *ACAPS Thematic Report: Afghanistan - Coping with the crisis: conversations with Afghan households in Kabul province (16 June 2023) - Afghanistan*. [online] Available at: <https://reliefweb.int/report/afghanistan/acaps-thematic-report-afghanistan-coping-crisis-conversations-afghan-households-kabul-province-16-june-2023> [Accessed 07 Sep. 2024].

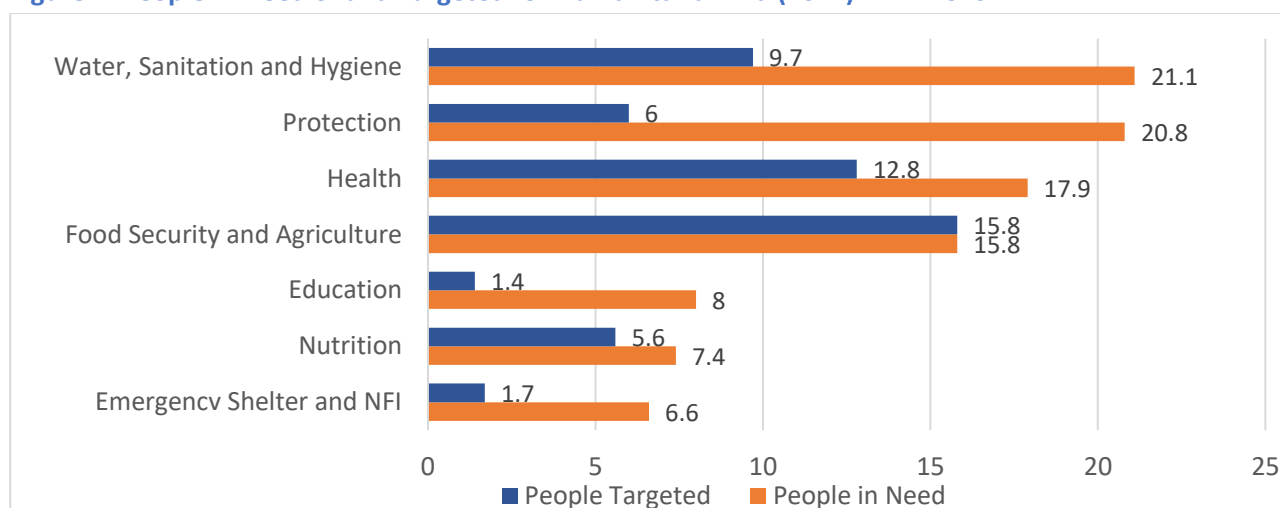
Table 1: Humanitarian Aid Needs, Target, and Funding Trend in Afghanistan (2020 to 2024)

Humanitarian Needs	2020 ^{2*}	2021 ³	2022 ⁴	2023 ⁵	2024 ^{6 **}
People in need (Million)	9.4	18.4	24.4	29.2	23.7
People targeted to reach (Million)	7.1	15.7	22.1	21.3	17.3
Requirements (Billion US\$)	0.733	1.3	4.44	2.26	3.06

* In 2019, the HNRP defined people in humanitarian need as those affected by ongoing conflict, natural disasters, and displacement².

** According to the 2024 HNRP, people in humanitarian need are those affected by the cumulative impacts of conflict, displacement, and climatic shocks such as droughts, earthquakes, and floods⁷.

The 2024 HNRP for Afghanistan identifies 23.7 million people in need of humanitarian aid, of which HNRP targets 17.3 million (73%) to be served with humanitarian aids and called for US\$ 3.06 billion for 2024⁷. As presented in Figure – 1 below, the humanitarian needs vary across different sectors/clusters and so is the targeted number of people – Emergency Shelter and NFI, Nutrition, Education, and Food Security and Agriculture sectors/clusters have the highest humanitarian needs.

Figure 1: People in Need of and Targeted for Humanitarian Aid (2024) in millions

Data source: [Afghanistan Humanitarian Needs and Response Plan 2024](#)

Afghanistan also hosts a large number of returnees, particularly from neighbouring countries like Pakistan and Iran. According to the United Nations High Commissioner for Refugees (UNHCR), 733,300 Afghans have been forced to return from Pakistan between September 2023 and September 2024⁸. In addition, over 625,000 undocumented Afghans were also deported

² ReliefWeb. (2019). *Afghanistan Humanitarian Response Plan (2018 - 2021) 2020 Revision (December 2019) - Afghanistan*. [online] Available at: <https://reliefweb.int/report/afghanistan/afghanistan-humanitarian-response-plan-2018-2021-2020-revision-december-2019#:The%202020%20update%20to%20the%20Afghanistan%20multi-year%20Humanitarian> [Accessed 07 Sep. 2024].

³ UNOCHA (2021). *Afghanistan: Humanitarian Response Plan Summary 2021*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-response-plan-summary-2021> [Accessed 10 Sep. 2024].

⁴ UNOCHA (2022). *Afghanistan Humanitarian Response Plan 2022 (January 2022)*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-response-plan-2022-january-2022> [Accessed 10 Sep. 2024].

⁵ UNOCHA (2023). *Afghanistan: Revised Humanitarian Response Plan (Jun - Dec 2023)*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-revised-humanitarian-response-plan-jun-dec-2023> [Accessed 07 Sep. 2024].

⁶ UNOCHA (2023). *Afghanistan Humanitarian Needs and Response Plan 2024 (December 2023) | OCHA*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2024-december-2023> [Accessed 07 Sep. 2024].

⁷ UNOCHA (2023). *Afghanistan Humanitarian Needs and Response Plan 2024 (December 2023) |*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2024-december-2023> [Accessed 6 Sep. 2024].

⁸ UNHCR (2024). *Afghan Returns | Weekly Update 1 September – 7 September 2024*. [online] UNHCR Operational Data Portal (ODP). Available at: <https://data.unhcr.org/en/documents/details/111063> [Accessed 07 Sep. 2024].

from the Islamic Republic of Iran from January to December 2023⁹. On the other hand, UNHCR reported 3.22 million people cumulatively internally displaced until December 2023⁴. The situation for returnees and IDPs in Afghanistan is critical, as the country continues to grapple with decades of conflict, instability, and humanitarian crises. Both IDPs and returnees face numerous challenges including lack of livelihoods, food insecurity, healthcare and education, shelter, and reintegration, therefore, majority of them considered to be in urgent need for humanitarian aid.

Natural disasters in Afghanistan, particularly earthquakes, floods, and droughts, have compounded the already dire humanitarian crisis in the country. In recent years, severe droughts have devastated agricultural production, leading to widespread food insecurity and pushing millions into hunger. Flash floods and landslides in 2024 alone have affected more than 11 provinces in the north, west, and east of Afghanistan; over 310 were reported to have died in Ghor, Faryab, Badakhshan, Baghlan, and Takhar provinces, thousands of houses were destroyed, and thousands were displaced¹⁰.

Earthquakes in Afghanistan frequently cause significant loss of life and property damage – leaving affected populations more vulnerable, deepening the cycle of poverty, causing displacement and dependence on humanitarian aid. The intersection of natural disasters with ongoing economic instability creates multi-layered crisis that demands urgent and coordinated international intervention. In October 2023, Afghanistan experienced a significant series of earthquakes with the magnitude of 6.3 and aftershocks that struck the western province of Hirat¹¹ – causing significant damage to infrastructure, homes, and leading to a high number of casualties and displacements¹².

Afghanistan has been also facing severe drought conditions, which are significantly worsening the humanitarian crisis in the country; severely impacting the country's food security and livelihoods as being highly dependent on agriculture (more than 70% of population rely on farming and livestock for survival). Prolonged and recurring droughts have drastically reduced crop yields and depleted water sources, leaving millions without adequate access to food and water¹³.

1.2 Japan Platform (JPF) Interventions in Afghanistan

Since 2001, JPF has been providing intermittent support to Afghanistan, with renewed funding commitments each year starting in 2017. In 2023, JPF allocated JPY 289,931,280 to a humanitarian response programme in Afghanistan, spread across eight projects. This commitment was later supplemented by JPY 190,604,709 for five returnee assistance projects and JPY 200,000,000 for earthquake response efforts through four projects. These initiatives were carried out by nine Japanese NGOs, operating remotely through local partners or through their local offices in Afghanistan.

Of all the 17 projects commissioned by JPF in 2023, this third-party assessment focused on five specific projects. These included two emergency food assistance projects (out of eight) in

⁹ UNHCR (2024). *Pakistan-Afghanistan - Returns Emergency Response #23*. [online] UNHCR Operational Data Portal (ODP). Available at: <https://data.unhcr.org/en/documents/details/111500> [Accessed 1 Oct. 2024].

¹⁰ UN News (2024). *Climate crisis fuels deadly floods, worsening hunger in Afghanistan* | UN News. [online] Available at: <https://news.un.org/en/story/2024/05/1150066>.

¹¹ Most affected districts include Injil, Kushk, Zindajan, Gulran, Kohsan, Guzara, Ghoryan, Karukh districts and Hirat city

¹² UNHCR (2024). *Afghanistan Earthquake Emergency Six-Month Impact Report* / UNHCR. [online] Available at: <https://reporting.unhcr.org/sites/default/files/2024-04/Afghanistan%20earthquake%20emergency%206-month%20impact%20report%20-%20V4.pdf> [Accessed 09 Sep. 2024].

¹³ UNOCHA (2024). *Afghanistan: Slow-Onset Early Action Plan for Drought - Drought Preparedness, May 2024*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-slow-onset-early-action-plan-drought-drought-preparedness-may-2024> [Accessed 09 Sep. 2024].

Kabul and Nangarhar, two returnee assistance projects (out of five) in Nangarhar, and one earthquake response project (out of four) in Hirat.

1.2.1 Emergency Food Assistance in Kabul Province

Kabul province, as the capital, has a diverse and dynamic socio-demographic profile. The Afghanistan National Statistics and Information Authority (NSIA) in 2023 estimated a total of 5,766,181 population for Kabul province – 4,981,364 (86%) urban, in 17 municipality districts, and 784,817 (14%) rural in 14 rural districts¹⁴.

Kabul faces a complex and challenging humanitarian situation. It constitutes 16.8% of total country population (34.2 million¹⁴), the majority (86%) reside in urban areas and primarily rely on informal and service-based economic activities for their livelihood. Informal livelihood for people in Kabul largely revolves around informal labour and small-scale trade such as selling goods in bazaars, tailoring, and food vending¹⁵. A sizable number of people living in Kabul also rely on formal employment, majority as government employees along with those employed by humanitarian organisations and the private sector¹⁵. According to Human Rights Watch, both formal and informal livelihood opportunities, especially for women, have significantly diminished after 2021 due to DfA's restriction on women, economic contraction, and reduced job opportunities¹⁶.

Kabul experienced significant population movement before and after August 2021. As Afghanistan's capital, Kabul was a major destination for internally displaced persons (IDPs) fleeing violence and insecurity in 2020 and 2021. According to International Organisation for Migration (IOM) a total of 2.6 million people were internally displaced in 2021 and 2022 in Afghanistan of which 23% moved to Kabul¹⁷. According to UNHCR, a total of 3.22 million people had been internally displaced cumulatively until December 2023, of which 1.58 million (49.2%) returned back to their homes in 2023 and 2024¹⁸. Despite that, in 2024 Kabul was still hosting around 890,000 IDPs, and having the highest concentration of IDPs in the country¹⁹.

Kabul remains a major destination for returnees from neighbouring countries, particularly Pakistan and Iran. In 2023, Iran repatriated 625,000 Afghan migrants, with an additional 978,000 projected for repatriation by the end of 2024; the majority of those repatriated in 2023 returned to Kabul, Hirat, Kunduz, and Balkh provinces¹⁹. Similarly, between October 2023 and October 2024, Kabul (after Nangarhar) was the second top province of intended destination for 733,300 Afghans forcibly returned to Afghanistan following the 3 October 2023 repatriation announcement of the Pakistani government; with a total of 139,327 returnees (19% of the total returnees from Pakistan since October 2023) identifying Kabul as their intended destination for resettlement²⁰.

This influx of people placed additional pressure on Kabul's housing, services, and infrastructure, further challenging the capacity of humanitarian organisations to adequately address the needs of the most affected populations, including both host communities and

¹⁴ NSIA (2024). *Afghanistan Population Estimates for the Year 1401 (2022 – 2023)*. [online] Kabul: National Statistics and Information Authority. Available at: <http://nsia.gov.af/library> [Accessed 09 Sep. 2024].

¹⁵ NSIA (2023). *Statistical Year Book (2022 – 2023)*. [online] Kabul: National Statistics and Information Authority. Available at: <http://nsia.gov.af/library> [Accessed 08 Oct. 2024].

¹⁶ Human Rights Watch (2024). *Afghanistan: Events of 2023*. [online] Human Rights Watch. Available at: <https://www.hrw.org/world-report/2023/country-chapters/afghanistan-0> [Accessed 8 Oct. 2024].

¹⁷ IOM (2024). *Afghanistan — Baseline Mobility Assessment Report, Round 16 (September-December 2022) | Displacement Tracking Matrix*. [online] Available at: <https://dtm.iom.int/reports/afghanistan-baseline-mobility-assessment-report-round-16-september-december-2022> [Accessed 8 Oct. 2024].

¹⁸ UNHCR (n.d.). *Afghanistan*. [online] Operational Data Portal. Available at: <https://data.unhcr.org/en/country/afg> [Accessed 8 Oct. 2024].

¹⁹ UNOCHA (2023). *Afghanistan Humanitarian Needs and Response Plan 2024 (December 2023) | OCHA*. [online] Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2024-december-2023> [Accessed 07 Sep. 2024].

²⁰ UNHCR (2024). *Pakistan-Afghanistan - Returns Emergency Response #23*. [online] UNHCR Operational Data Portal (ODP). Available at: <https://data.unhcr.org/en/documents/details/111500> [Accessed 1 Oct. 2024].

returnees/IDPs. Many IDPs and returnees reside in informal settlements or overcrowded conditions with limited access to essential resources such as food, shelter, and livelihood.

According to ACAPS in 2023, women-headed households and families with members who have disabilities or chronic illnesses were among the most vulnerable groups in Kabul but were underrepresented in receiving humanitarian assistance²¹. The restrictions on women's employment and mobility, along with limited access to public spaces and government offices under the Taliban's interim government, have exacerbated the challenges faced by female-headed households in urban Kabul. As a result, many of these women-headed households were forced to adopt negative coping strategies, such as reducing the number of meals, sending children to work, selling household assets, borrowing money, and avoiding or delaying medical care²². The 2024 Humanitarian Needs and Response Plan, based on Integrated Food Security Phase Classification (IPC) October 2023 analysis, reported that 29% of Afghanistan's population was in Phase-3 and above IPC categories²³, meaning they faced crisis or emergency levels of food insecurity²⁴. Based on Kabul's total population of 5.76 million in 2023, this suggests that over 1.67 million people in Kabul (29% of the total population) have been experiencing crisis or emergency levels of food insecurity (IPC Phase-3 and above).

The JPF-funded 'Cash for Food for Vulnerable Households in Central provinces' project (November 2023 to May 2024) aimed to address critical food insecurity of vulnerable households in Kabul, Kapisa, Parwan, and Wardak provinces. In 2023, more than 2.24 million people (29% of total population in these provinces) were estimated to be facing crisis or emergency levels of food insecurity²⁵. The project's intervention included distributing cash assistance of Afghani 2,700 (USD 37.2²⁶) per household for three months to enable the most vulnerable households to meet their basic food needs.

The project was implemented by Reach Alternatives (REALs) in collaboration with its local partner, Zamir Foundation. With the onset of winter at the project's launch in November 2023, timely cash distribution was prioritised and considered critical to help vulnerable households withstand the harsh conditions in winter. Between March and May 2024 in Kabul, the 'Cash for Food for Vulnerable Households' project provided three monthly cash transfer of Afghani 2,800 (USD 37.2) to 1,630 vulnerable households selected in 14 urban municipal districts and one rural district (Farza).

Table 2: Project Summary of Cash for Food for Vulnerable Households in Kabul

Organisation	Intervention	Activities	Time frame	Amount (¥)
REALs/Zamir Foundation 14 Kabul municipal districts and Farza ²⁷	Cash distribution project for food purchases to vulnerable groups	Distribution of Afghani 2,800 ²⁸ for three months (Mar to May 2024)	Nov 2023 - May 2024	44,510,054

²¹ ACAPS (2023). *ACAPS Thematic Report: Afghanistan - Coping with the crisis: conversations with Afghan households in Kabul province (16 June 2023) - Afghanistan*. [online] Available at: <https://reliefweb.int/report/afghanistan/acaps-thematic-report-afghanistan-coping-crisis-conversations-afghan-households-kabul-province-16-june-2023> [Accessed 07 Sep. 2024].

²² Ibid

²³ UNOCHA (2023). *Afghanistan Humanitarian Needs and Response Plan 2024*. [online], OCHA, pp.49. Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2024-december-2023> [Accessed 7 Sep. 2024].

²⁴ IPC (n.d.). *IPC Acute Food Insecurity Classification | IPC Global Platform*. [online] Available at: <https://www.ipcinfo.org/ipcinfo-website/ipc-overview-and-classification-system/ipc-acute-food-insecurity-classification/en/> [Accessed 6 Sep. 2024].

²⁵ Population in Phase-3 and above IPC categories (face crisis or emergency levels of food insecurity): Kabul (1,672,192), Kapisa (149,144), Parwan (225,713), and Wardak (201,674)

²⁶ A weighted average exchange rate of 72.6 Afghani per USD between January and May 2024. Xe.comInc. (n.d.). *US Dollar to Afghani Exchange Rate Chart | Xe*. [online] Available at: <https://www.xe.com/currencycharts/?from=USD&to=AFN>.

²⁷ Farza is a peri-urban district, and 12 households (out of 1630 total) were supported.

²⁸ The amount was reduced to Afghani 2,700 in the third month due to an exchange loss.

1.2.2 Earthquake Response in Hirat Province

Hirat province is situated in the western part of Afghanistan, sharing borders with Iran to the west, Turkmenistan and Badghis province to the north, Ghor province to the east, and Farah province to the south. Hirat province is comprised of 20 districts²⁹ with the population of 1,108,506 (31.4% urban and 68.6% rural) as estimated by National Statistics and Information Authority³⁰ (NSIA) in 2023 (used as an official figure),

On 7 October 2023, an earthquake of 6.3 magnitude struck Hirat province (40 kilometres west of Hirat city, the provincial capital), and was followed by several powerful aftershocks. On 11 October 2023, another earthquake (of the same magnitude) struck Hirat again which was also followed by two consecutive aftershocks. These two earthquakes and the subsequent aftershocks directly affected more than 275,000 people in nine districts of Hirat province, including Injil, Kushk, Zindajan, Gulran, Kohsan, Guzara, Ghoryan, Karukh districts and Hirat city – causing at least 1,000 deaths and 1,500 injuries³¹, destroying 10,002 households, and damaging 38,000 households³². The earthquakes' timing in early October has further compounded the challenge as the winter season was approaching. Without adequate shelter and food, the affected population was exposed to life-threatening conditions when temperature started dropping below freezing.

Even before the earthquake, people in Hirat, like those in other provinces of the country, were already in a precarious situation due to rising food prices, lack of sustainable livelihoods, and other challenges. Based on the October 2023 IPC analysis, which indicated that 29% of the population was in IPC Phase 3 or above, an estimated 321,466 people in Hirat (29% of 1.1 million population) were already facing crisis or emergency levels of food insecurity (IPC Phase 3 and above) prior to the earthquake³³. The earthquake worsened these conditions, as thousands of households lost their livelihoods, making it nearly impossible for people to procure food.

In response to the October 2023 earthquake in Hirat province, Adventist Development and Relief Agency (ADRA) Japan launched a targeted intervention to address the critical needs of the most earthquake affected communities. The project targeted rural districts of Zindajan and Injil, which were heavily affected by the earthquake and had already been identified by the National Inter-Cluster Coordination Team as in great need of food and winterization support, even before the earthquake³⁴. The earthquake has exacerbated existing challenges by destroying houses and local infrastructure, disrupting access to food, intensifying the need for winterisation assistance (heating materials, winter clothing, blanket, and shelter repair).

Between March and May 2024, ADRA Japan provided food and non-food items (NFIs) to 1,154 vulnerable households across these two districts. This assistance included one or two rounds of monthly food baskets per household (consisting of 100 kg of wheat flour, 10 litres of cooking oil, 8 kg of beans, and 1kg of salt) and a one-time provision of a 6x4 meter tarpaulin, one double-size blanket, four single-size blankets, four solar lamps, and a kitchenware set. NFIs

²⁹ Adraskan, Chishti Sharif, Farsi, Ghoryan, Gulran, Guzara, Hirat, Injil, Karukh, Kohsan, Kushk, Kushki Kuhna, Obe, Pashtun Zarghun, Shindand, Zinda Jan, Keshk Rabat Sangi, Rabat-e-Sangi, Zawal, and Kohsan

³⁰ NSIA (2024). *Afghanistan Population Estimates for the Year 1401 (2022 – 2023)*. [online] Kabul: National Statistics and Information Authority. Available at: <http://nsia.gov.af/library> [Accessed 09 Sep. 2024].

³¹ Afghan earthquake: At least 1,000 people killed and 1,500 injured. (2023). *BBC News*. [online] 22 Jun. Available at: <https://www.bbc.co.uk/news/world-asia-61890804>.

³² UNHCR (2024). *Afghanistan Earthquake Emergency Six-Month Impact Report* / UNHCR. [online] Available at: <https://reporting.unhcr.org/sites/default/files/2024-04/Afghanistan%20earthquake%20emergency%206-month%20impact%20report%20-%20V4.pdf> [Accessed 09 Sep. 2024].

³³ FAO (2023). *Workbook: FSAC Afghanistan Response Dashboards*. [online] Available at: https://tableau.apps.fao.org/views/FSAC_Afghanistan_Response_Dashboards/ResponseDashboards?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y [Accessed 09 Sep. 2024].

³⁴ UNHCR (2024). *Afghanistan Earthquake Emergency Six-Month Impact Report* / UNHCR. [online] Available at: <https://reporting.unhcr.org/sites/default/files/2024-04/Afghanistan%20earthquake%20emergency%206-month%20impact%20report%20-%20V4.pdf> [Accessed 09 Sep. 2024].

included kitchenware, blankets, emergency lights, floor mats, hygiene supplies and other HH items. In addition, plastic linings were provided for those residing in tents as protection from winter temperature and rains. The intervention was timed to address urgent needs before the onset of severe winter conditions, which often compounds the challenges faced by displaced and impoverished families.

Table 3: Summary of the JPF Funded Earthquake Response Project in Hirat Province

Organisation	Intervention	Activities	Beneficiaries	Time frame	Amount (¥)
ADRA Japan Zindajan and Injil District of Hirat	Emergency food and wintering support for earthquake victims	Distribution of three months' worth of food and NFI (winter goods and daily necessities) (March-April 2024)	1,154 vulnerable families affected by 2023 earthquake in Zindajan and Injil districts	Nov 2023 - May 2024	59,991,179 + 7,099,781 (other funds)

1.2.3 Returnees Assistance and Emergency Food Assistance in Nangarhar Province

Nangarhar (an eastern province of Afghanistan) is one of the most populous provinces of the country³⁵, with an estimated population of 1,701,698 people (83.7% rural and 16.3% urban) in 23 districts^{36&37}. As with Kabul and Hirat provinces, the number of individuals facing crisis and emergency levels of food insecurity in Nangarhar is estimated by applying the October 2023 IPC analysis for Afghanistan, which indicates that 29% of the total population is experiencing IPC Phase 3 or above. In Nangarhar, this translates to nearly half a million people (493,492, or 29% of the province's 1.7 million population) were living in crisis or emergency levels of food insecurity in October 2023³⁸. Responding to this, a total of 591,870 individuals, including the returnees from Pakistan, were reached in Nangarhar for necessary cash-for-food and food assistances between January to July 2024 by various humanitarian agencies operating in Nangarhar.

On the other hand, the 2024 HNRP identifies 6.6 million people across Afghanistan in urgent need of shelter and NFIs³⁹. While specific data for shelter and NFI needs for Nangarhar is unavailable, the Emergency Shelter and NFI Cluster reports that only 42,962 people in Nangarhar were reached between September 2023 to August 2024 for NFI, winterisation assistance (heating materials, winter clothing, blanket, and shelter repair), and shelter upgrade assistance (cash and in-kind)⁴⁰. As such, the arrival of 190,658 estimated returnees in Nangarhar since September 2023 has further stressed the existing humanitarian condition and stretched the humanitarian responders in addressing the urgent needs of returnees²⁸.

Following the Pakistan government's announcement of 3rd October 2023 regarding the repatriation of undocumented Afghan residents, a total of 733,300 Afghans were forcibly returned to Afghanistan between October 2023 and October 2024. Of which, more than half of the returns (65%) were through Torkham boarder in Nangarhar, followed by Spin Boldak (32%) in

³⁵ NSIA (2024). *Afghanistan Population Estimates for the Year 1401 (2022 – 2023)*. [online] Kabul: National Statistics and Information Authority. Available at: <http://nsia.gov.af/library> [Accessed 09 Sep. 2024].

³⁶ Achin, Bati Kot, Behsud, Chaparhar, Dara-e-Nur, Dih Bala (Haska Mina), Dur Baba, Ghani Khel, Goshta, Jalalabad city, Kama, Khogyani, Kot, Kuz Kunar (Khewa), Lal Pur, Momand Dara, Nazyan, Pachir Wa Agam, Rodat, Sherzad, Shinwar, Surkh Rod (Sorkh Rod), and Spinghar

³⁷ NSIA (2024). *Afghanistan Population Estimates for the Year 1401 (2022 – 2023)*. [online] Kabul: National Statistics and Information Authority. Available at: <http://nsia.gov.af/library> [Accessed 09 Sep. 2024].

³⁸ FAO (2023). *Workbook: FSAC Afghanistan Response Dashboards*. [online] Available at: https://tableau.apps.fao.org/views/FSAC_Afghanistan_Response_Dashboards/ResponseDashboards?%3Aembed=y&%3Aid=1&%3AisGuestRedirectFromVizportal=y [Accessed 09 Sep. 2024].

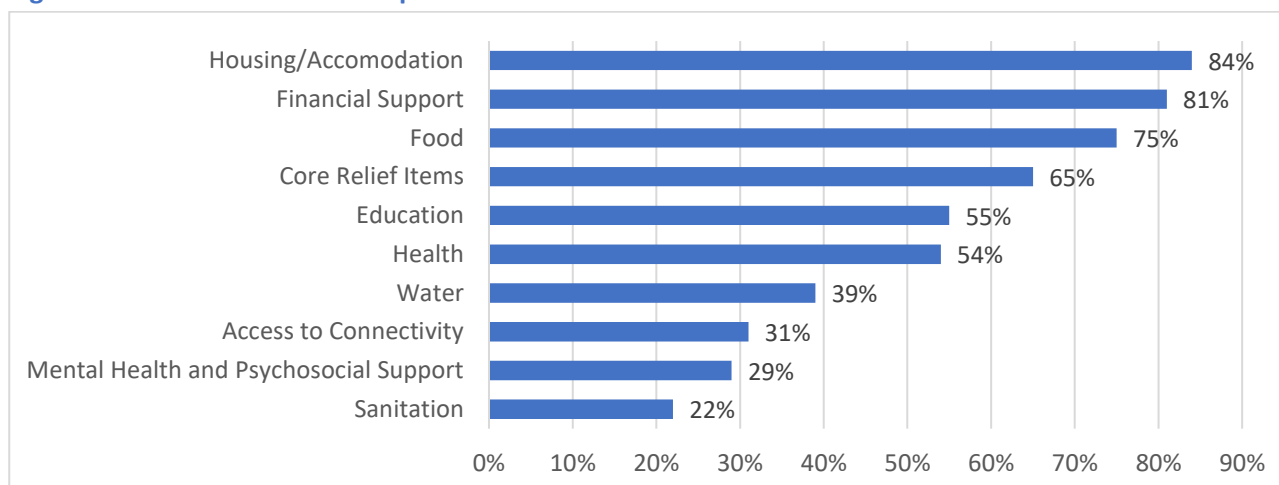
³⁹ ibid

⁴⁰ Global Shelter Cluster (2024). *Afghanistan | Emergency Shelter and NFI Cluster*. [online] Available at: <https://sheltercluster.org/response/afghanistan> [Accessed 1 Oct. 2024].

Kandahar, and only 3% through Ghulam Khan in Paktia province⁴¹. According to the United Nations High Commissioner for Refugees (UNHCR), Nangarhar was identified as the top province of intended destination for returnees (26%), followed by Kabul (19%), Kandahar (15%), Kunduz (8%), and Laghman (5%)²⁶. As such, a total of 190,658 returnees chose Nangarhar as their intended destination for resettlement between October 2023 and October 2024.

The self-identified needs (by returning families from Pakistan) upon arrival in the final destination, according to UNHCR, varied from housing/accommodation (84%), financial support (81%), food (75%), and NFIs (65%). Female headed families, which made up 30% of the returnee population, were identified as being in greater need of support²⁶. The detail of needs upon arrival for all returnees (including those returned to Nangarhar) is presented in Figure – 2 below.

Figure 2: Self-Identified Needs upon Arrival for Returnees from Pakistan



Data Source: UNHCR Operational Data Portal (2024)

Data specific to the self-identified priority needs of the 190,658 estimated returnees from Pakistan (26% of the total returnees) who chose Nangarhar as their intended resettlement destination is not available. However, it is anticipated that returnees to Nangarhar shared the overall needs of returnees from Pakistan, including shelter, financial support, food, non-food items (NFIs), education, healthcare, drinking water, access to communication, mental health and psychosocial support, and sanitation, as outlined in Figure – 2 above. The need for housing and accommodation was particularly urgent, as the repatriation occurred during winter months (October to March), with a significant surge in November and December 2023 – according to UN-OCHA in November 2023 the number of forced repatriations from Pakistan exceeded 25,000 people per day⁴².

In 2023 and 2024 JPF, through its member organisations, including Association for Aid and Relief (AAR) Japan, Peace Winds Japan (PWJ), and the Shanti Volunteer Association (SVA), implemented a series of targeted interventions to address the critical humanitarian needs of returnees and host-community vulnerable populations in Nangarhar.

⁴¹ UNHCR (2024). *Pakistan-Afghanistan - Returns Emergency Response #23*. [online] UNHCR Operational Data Portal (ODP). Available at: <https://data.unhcr.org/en/documents/details/111500> [Accessed 1 Oct. 2024].

⁴² UNOCHA (2023). *Afghanistan Humanitarian Needs and Response Plan 2024*. [online], OCHA, pp.17–18. Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2024-december-2023> [Accessed 7 Sep. 2024].

Table 4: Project Summary of JPF Funded Projects in Nangarhar Province

Organisation	Intervention	Activities	Beneficiaries	Time frame	Amount (¥)
Association for Aid and Relief, Japan (AAR Japan) Jalalabad City	Food voucher distribution to the returnees	Three months of US\$100 voucher per month (July-September 2024)	600 returnee households	Jan - Oct 2024	55,001,775
Peace Winds Japan Pachir Wa Agam District	Emergency food assistance for vulnerable people in remote areas	One and Two months of US\$96 cash voucher per month (June and/or August 2023)	452 vulnerable households (407 two months and 45 one month)	Mar - Oct 2023	31,163,638
Shanti Volunteer Association Surkhroad District	Distribution of food and sanitary supplies to returnees	Three months' worth of food and sanitary supplies (June 2024)	680 returnee households in Surkhroad district	Feb - July 2024	44,395,370

Responding to the rapid influx of returnees from Pakistan and their critical humanitarian needs upon arrival, as presented in Figure – 2 above, AAR Japan and SVA implemented food and cash voucher distribution initiative.

The beneficiary selection, both for AAR and SVA, was predominantly based on the list of returnees shared by Nangarhar Department of Refugees and Repatriation (DoRR) followed by household visits by AAR and SVA, and consulting concerned district authorities and refugees' representatives. Table – 5 below, provides the overview of AAR and SVA support to returnees in Nangarhar.

Table 5: Overview of Returnees Assistance Initiative in Nangarhar (by AAR and SVA)

Organisations	Selection Criteria	Aid Package
AAR July to September 2024	List of beneficiaries obtained from DoRR and other related authorities in Nangarhar ⁴³ Household visits of listed families were conducted by AAR to apply UN-OCHA (Shelter and NFI Cluster) Vulnerability-based Selection Criteria ⁴⁴	Cash Voucher: <ul style="list-style-type: none"> Three vouchers worth of US\$ 100 per HH (total US\$ 300 per HH) In compliance with FSAC Package Guideline: a minimum of \$75 per HH per month to meet the monthly caloric intake (2,100cal) requirements of an Afghan household (averaging seven persons).
SVA JUNE 2024	<ul style="list-style-type: none"> Female-headed HHs HHs with malnourished children HHs with many vulnerable groups (children, orphans, the 	Food Voucher: <ul style="list-style-type: none"> 150 kg of wheat flour 21 liters of cooking oil 14 kg sugar salt 8kg 21 kg of beans

⁴³ AAR Monthly Report (June 2024)

⁴⁴ Women or child Head of Household, HHs with dependency ration of 8 or more, HHs with no adult male of working age or adult working women, person with disability or chronic illness or elder as head of households, HH with poor asset holdings, HHs residing with or hosting other HH, HHs living in open emergency or makeshift shelter, HH relying only on borrowing or begging, HH relying on casual labour by one member, HHs without any source of livelihood or income generating activities,

	elderly, persons with disabilities, etc.) – Multiple-child household – Other household's that have been judged to be high priority for support by the community and SVA local staff	Hygiene kit: – Soap – Soap case – Towel – Water bucket
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Preceding the returnee influx, PWJ targeted vulnerable people in Pachir Wa Agam district of Nangarhar in partnership with Your Voice Organisation (the local partner of PWJ). In Pachir Wa Agam district, humanitarian assistance has been extremely limited, especially in remote mountainous areas where food prices are reported to be 15-20% higher than in Jalalabad (provincial capital). The project provided cash vouchers worth of US\$ 96 per month for two months to enable vulnerable households in this district to purchase essential food items needed for the family. Those people have been under severe socio-economic conditions for a long time due to a combination of factors such as conflict, political instability, economic turmoil, drought, limited access to humanitarian aid, and the Covid-19 outbreak. The beneficiaries were selected in close collaboration with Your Voice Organisation (YVO) volunteers, and community leaders applying the WFP Targeting and Vulnerability Criteria. Moreover, the Pachir Wa Agam district governor was consulted on the selection of the target area.

1.3 Purpose of the Third-party Assessment

This third-party assessment of vulnerability and resilience is a key component of JPF's 2023 programme portfolio evaluation in Afghanistan. The overall JPF's 2023 programme portfolio evaluation aims to assess the appropriateness of targeting, the relevance and timeliness of interventions, and the integration of protection and 'Do No Harm' principles in JPF-funded interventions. Additionally, it seeks to differentiate between acute humanitarian needs and basic human needs, determine what can realistically be achieved through time-bound humanitarian actions, and identify the role of humanitarian actions in relation to longer-term interventions that address various layers of basic needs. The JPF 2023 programme portfolio evaluation is structured into three distinct phases:

1. Phase-1: This third-party assessment of vulnerability and resilience in project target areas (with a particular focus on the most vulnerable segments of the population),
2. Phase-2: A participatory after-action review with Japanese NGOs and their local partners for each of the JPF-funded project
3. Phase-3: A sense-making workshop involving JPF and its implementing agencies within the Afghanistan Working Group to collectively reflect on the key learnings from the third-party assessment and after-action review of JPF-funded projects.

While all three stages of the 2023 programme portfolio evaluation are interlinked, this report focuses exclusively on Phase 1: the Third-party Assessment of Vulnerability and Resilience in project target areas. This third-party assessment not only assessed the current state of vulnerability and resilience but also paved the way for meaningful and productive subsequent phases i.e., participatory after-action review and sense-making workshop which are to be undertaken separately at a later stage.

This context-specific third-party assessment of vulnerability and resilience aimed to document the voices of the most-vulnerable segments of the JPF-funded projects' target population in Kabul, Nangarhar, and Hirat provinces.

While the Afghanistan 2024 HNRP identifies vulnerable groups as women and girls (particularly female-headed households), recent returnees, households with a member with a disability, and

rural households⁴⁵, this third-party assessment first sought to develop context-specific local vulnerability definitions tailored to each humanitarian situation covered by this assessment - returnee assistance in Nangarhar, emergency food insecurity response in Kabul and Nangarhar, and earthquake response in Hirat..

Building on these context-specific locally defined indicators for vulnerability, the second objective of this assessment was to develop deeper understanding of the most vulnerable segments of the population in the project target areas, with specific focus on the following questions:

Current Livelihood Cycle:

- How do the most vulnerable people currently make their living?
- What are the seasonal patterns of income and expenditure in their households?
- When and to what extent are these households able to satisfy their needs?
- Which types of needs, and for whom within a given household, are currently met or unmet?
- How do they make ends meet?

Shocks to the Livelihood Cycle:

- What types of shocks have the most vulnerable people experienced in the past year?
- When and under what circumstances did these incidents occur?
- How significantly have these incidents disrupted their livelihood cycle, and in what ways?
- What has been the compounding impact of multiple shocks on their lives?

Resilience Against Shocks:

- What capacity have affected households and communities demonstrated to cope with and recover from shocks?
- How did they manage this, and what were the outcomes?
- What types of needs and issues have they been able to address on their own, and which have they not? Why?
- What differences exist between those who are able to cope with or recover from shocks and those who are not?

Role of Aid:

- To what extent have the most vulnerable people/households been informed of and able to access humanitarian aid during these shocks?
- What barriers to information and access, if any, have they faced?
- Did they feel involved in the planning, implementation, and monitoring of humanitarian aid?
- How have they utilised the humanitarian aid, and what has been the effect?
- What difference has the humanitarian aid made in their survival, recovery, and sense of dignity and hope?
- How do they perceive the limitations of the humanitarian aid, if any?


Future Prospects:

- What hopes and fears do the most vulnerable people have for their future?
- What capacity and resources do they believe they have to act on their hopes and fears, individually or collectively?
- What types of external support do they desire, and why?

Visibility of Japanese aid

- The extent to which the beneficiary households are aware of where the funding for the projects they benefit is coming from.

⁴⁵ UNOCHA (2023). *Afghanistan Humanitarian Needs and Response Plan 2024 (December 2023)* / . [online] p.15. Available at: <https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2024-december-2023>. [Accessed 6 Sep. 2024].

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- How did they learn about the sources of funding for the services they have benefited or engaged with?
 - Have they seen any information or materials that mention the funding source? If so, where, by who, and what kind of information or materials?

2 METHODOLOGY

TKH employed a mixed-method (qualitative and quantitative) design to achieve the objectives of this third-party assessment. This included an extensive review of relevant literature and project documents, as well as the collection of primary qualitative and quantitative data.

2.1 Review of relevant literature and project documents

The literature review involved an in-depth analysis of project documents, technical and strategic literature, and external publications, ensuring the assessment was comprehensive and aligned with broader humanitarian standards and the context in Afghanistan.

A detailed list of project documents and external publications reviewed as part of this assessment is provided in [Annex – II](#).

2.2 Phase-I: Developing Humanitarian Context-Specific Vulnerability Definitions

The Phase-I assessment focused on developing context-specific vulnerability definitions tailored to each of the humanitarian situation addressed by the JPF-funded projects: returnees assistance in Nangarhar, emergency food insecurity response in Kabul and Nangarhar, and earthquake response in Hirat.

Qualitative techniques such as Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs) were employed to identify the characteristics of most vulnerable households across the three JPF-responded humanitarian situations. This assessment used the household as the unit of analysis, defining it as a group of two or more individuals living together who share resources for food and essential living needs—a definition adapted from the United Nations Department of Economic and Social Affairs (Statistics Division)⁴⁶.

Key Informant Interviews (KIIs) aimed to identify the specific categories of households that were most vulnerable to given humanitarian situations, and the factors that make them more vulnerable than others. For the Emergency Food Assistance projects in Kabul and Pachir Wa Agam district of Nangarhar, KIIs also focused on uncovering the main causes of critical food insecurity at the household level.

Building on the findings from KIIs, the Focus Group Discussions (FGDs) were undertaken with locally defined vulnerable group to develop deeper understanding of the lives of the most vulnerable households during and after JPF-responded humanitarian situations. As such, the FGDs identified the characteristics of the most affected households in Kabul, Nangarhar, and Hirat, examining why they were particularly vulnerable.

2.2.1 Phase – I Sampling and Respondents Selection

Key informants at the provincial, district, and community levels were identified through a bilateral consultative process involving all concerned JPF partner organisations and their local partners. The selection process was guided by the following specific criteria, with individuals meeting these criteria being identified as key informants:

- Direct Involvement in Beneficiary Identification: Individuals who were formally (such as community leaders) or officially engaged in identifying the most vulnerable households and communities and responding to the needs of earthquake-affected populations, food-insecure households, or returnees under JPF-supported interventions.

⁴⁶ United Nations. (2025). *UNSD — Demographic and Social Statistics*. [online] Un.org. Available at: <https://unstats.un.org/unsd/demographic-social/sconcerns/family/index.cshhtml#docs> [Accessed 7 Jan. 2025].

- Minimum One Year Experience: Meeting the above criteria, key informants were required to have served in their current capacity for at least one year, ensuring they possessed adequate experience and contextual understanding. This criterion was particularly relevant for those involved since October 2023, when the earthquake in Hirat and the mass repatriation from Pakistan occurred. The same standard applied to individuals engaged in emergency food assistance efforts in Kabul and Pachir Wa Agam District of Nangarhar.

Following the KIIs, participants for FGDs were identified using a purposeful sampling approach, ensuring that both beneficiaries and non-beneficiaries, and male and female, have meaningful representations. In the selection of FGD participants, the specific requirements, as outlined in Table – 6 below, were applied.

Table 6: FGD Participation Requirements

Type of FGD respondents	Requirements
Project beneficiaries	<ul style="list-style-type: none"> – Meets the vulnerability definition identified locally (specific to JPF-responded humanitarian situation*) – Have benefited from the project (depending on the province) – Lives within the project target area – Is the head of the household (Who represented the family to benefit from the project) – Is wife of the head of the household (in case of female) – Available to participate in FGD – Is not from the same family whose member have already attended FGD
Non-beneficiaries	<ul style="list-style-type: none"> – Meets the vulnerability definition identified locally (specific to JPF-responded humanitarian situation) – Have not benefited from the project – Lives within the project target area – Is the head of the household – Is wife of the head of the household (in case of female) – Available to participate in FGD – Is not from the same family whose member have already attended FGD

* Earthquake Response in Hirat province, Emergency Food Assistance Response in Kabul and Nangarhar Provinces, and Returnees Assistance Programme in Nangarhar provinces

The Phase 1 assessment involved 28 Key Informant Interviews (KIIs) and 16 Focus Group Discussions (FGDs). As presented in Table – 7 below, the sample for the KIIs and FGDs included a diverse range of participants to ensure comprehensive insights.

Table 7: KIIs and FGD Samples

Projects and Partners	FGD Samples (Number and Respondents)	KII Samples
Earthquake Response in Hirat province ADRA Japan	<ul style="list-style-type: none"> – Male beneficiaries: 1 (11 respondents) – Male non-beneficiaries: 1 (9 respondents) – Female beneficiaries: 1 (7 respondents) – Female non-beneficiaries: 1 (8 respondents) – Total: 4 (35 respondents, composed of 15 female and 20 male) 	<ul style="list-style-type: none"> – Hirat Provincial ANDMA: 1 – District Development Officers (Zindajan and Injil): 2 – Community Leaders (Zindajan and Injil): 2 – ADRA Hirat Provincial Staff: 1 – Hirat Provincial Shelter Cluster: 1 – Total: 7 (all male)
Returnees Response (Jalalabad) Nangarhar AAR Japan	<ul style="list-style-type: none"> – Male beneficiaries: 1 (6 respondents) – Male Host Community: 1 (7 respondents) – Female beneficiaries: 1 (7 respondents) – Female Host Community: 1 (6 respondents) – Total: 4 (26 respondents, composed of 13 female and male each) 	<ul style="list-style-type: none"> – Provincial DoRR: 1 – Surkhroad District Development Officer: 1 – SVA Provincial Staff: 1 – AAR Provincial Staff: 1 – FSAC Member: 1 – Returnees Leaders (Surkhroad and Jalalabad): 2 – Host Community leaders (Surkhroad and Jalalabad): 2 – Total: 9 (all male) (AAR and SVA share the same respondents at the Provincial Level)
Returnees Response (Surkhroad) Nangarhar SVA		
Emergency Food Assistance (Pachir Wa Agam) Nangarhar PWJ/YVO	<ul style="list-style-type: none"> – Male beneficiaries: 1 (8 respondents) – Male non-beneficiaries: 1 (7 respondents) – Female beneficiaries: 1 (7 respondents) – Female non-beneficiaries: 1 (6 respondents) – Total: 4 (28 respondents, composed of 13 female and 15 male) 	<ul style="list-style-type: none"> – Provincial DRRD: 1 – District Development Officer: 1 – Community Leaders: 2 – YVO Provincial Staff: 1 – YVO Volunteer: 1 – Total: 6 (all male)
Emergency Food Assistance Kabul REALs/Zamir Foundation	<ul style="list-style-type: none"> – Male beneficiaries: 1 (6 respondents) – Male non-beneficiaries: 1 (6 respondents) – Female beneficiaries: 1 (8 respondents) – Female non-beneficiaries: 1 (7 respondents) – Total: 4 (27 respondents, composed of 15 female and 12 male) 	<ul style="list-style-type: none"> – Kabul Provincial DoRR: 1 – District Development Officer: 1 – Community Leaders: 2 – Zamir Foundation Kabul Provincial Staff: 1 – FSAC Member: 1 – Total: 6 (all male)
Total	16 FGDs (8 male and 8 female): 116 participants	28 KIIs

2.3 Phase-II: Household Survey to Measure Vulnerability, Shocks, and Resilience

Based on the locally defined vulnerability criteria established in Phase-I, a household survey was conducted to assess current livelihood cycle, shocks to livelihood cycle, resilience against the shocks, role of aid, future prospects, and visibility of Japanese aid. The assessment also used DG ECHO's protection mainstreaming indicators⁴⁷ to assess protection and accountability practice in each project. The sample covered a total of 546 most vulnerable households, composed of 261 beneficiary households, 181 non-beneficiary households, and 104 host community (also non-beneficiary) households within JPF-funded project areas.

⁴⁷ European Commission Directorate General for European Civil Protection and Humanitarian Aid Operation (ECHO). Protection Mainstreaming Key Outcome Indicator Monitoring Tool: Technical Guidance. (n.d.). Available at: https://ec.europa.eu/echo/files/policies/sectoral/dg_echo_protection_mainstreaming_indicator_-_technical_guidance.pdf [Accessed 1 Jan. 2025].

2.3.1 Household Surveys Sample Size Calculation

The sample sizes were calculated through a two-stage process:

First stage: Beneficiary Households Sampling

In the first stage, sample sizes for beneficiary households were calculated using a descriptive simple random sampling technique. Each of the five JPF-funded projects was treated as a separate study population, with the total number of beneficiary households serving as the basis for sample size calculation. Using the following formula population/beneficiary-proportionate samples were drawn for each project's beneficiary households. A detailed breakdown of the project-specific sample size calculations, conducted using StatCal version 7.2.1, is provided in [Annex – I](#).

$$n = [DEFF * Np(1 - p)] / \left[\left(\frac{d^2}{Z_{1-\alpha/2}^2} \right) * (N - 1) + p * (1 - p) \right]$$

Where:

- n : is the sample size required by the surveys for each of the projects.
- $DEFF$: is estimated design effect
- N : is population size (number of beneficiary households for each of the project which will be matched by the same number of non-beneficiary households from the projects' catchment area respectively).
- d : is margin of error
- $z_{1-\alpha}$: is the value from the Normal Probability Distribution corresponding to a confidence level $1 - \alpha$. For $1 - \alpha = 0.90$ the corresponding value is $z_{0.90} = 1.28$
- $z_{1-\beta}$: the value from the Normal Probability Distribution corresponding to a per level of $1 - \beta$. For $1 - \beta = 0.80$, the corresponding value is $z_{0.80} = 0.84$.

The following parameters were taken into account while calculating the samples for each of the projects.

Parameters	Values
Confidence level ($1 - \alpha$)	90%
Power of the test ($1 - \beta$)	80%
Design Effect	1
Population size	Number of total beneficiary households per project
Acceptable margin of error	7.7%

As presented in Table – 8 below, representative samples of beneficiary households were calculated for each of the five JPF-funded projects in Kabul, Nangarhar, and Hirat.

Second stage: Non-Beneficiary Households Sampling

In the second stage, sample sizes for non-beneficiary households for each project matched those of beneficiary households. Using a snowball sampling technique, this process began by identifying non-beneficiary participants from FGDs conducted in the Phase-I.

Planned vs. Achieved Samples

Table – 8 below provides a comparison between the planned and achieved sample sizes across the five JPF-funded project areas, using the above-mentioned sample size calculation methods for beneficiary and non-beneficiary households.

Table 8:Planned vs. Achieved Samples for the Five Household Surveys

Projects and Partners	Target Sample Size	Achieved Sample Size
Hirat Earthquake Response ADRA Japan	Beneficiaries: 52 Non-beneficiaries: 52 Total: 104	Beneficiaries: 55 Non-beneficiaries: 80 Total: 135
Returnees Response Nangarhar (Jalalabad) AAR Japan	Beneficiaries: 48 Host Community: 48 Total: 96	Beneficiaries: 54 Host Community: 52 Total: 107
Emergency Food Assistance in Nangarhar (Pachir Wa Agam District) PWJ/YVO	Beneficiaries: 46 Non-beneficiaries: 46 Total: 92	Beneficiaries: 45 Non-beneficiaries: 48 Total: 93
Emergency Food Assistance in Kabul REALs/Zamir Foundation	Beneficiaries: 54 Non-beneficiaries: 54 Total: 108	Beneficiaries: 55 Non-beneficiaries: 53 Total: 108
Returnees Response Nangarhar (Surkhroad) SVA	Beneficiaries: 49 Host Community: 49 Total: 98	Beneficiaries: 52 Host Community: 52 Total: 104
Total	Beneficiaries: 249 Non-beneficiaries: 152 Host Community: 97 Total: 498	Beneficiaries: 261 Non-beneficiaries: 181 Host Community: 104 Total: 546

2.3.2 Sample and Respondent Selection:

For beneficiary households, the lists of project beneficiary households by project and location served as the sampling frames. The selection process was conducted using Excel's random selection function, ensuring each of the project beneficiary household having an equal chance of being chosen for the survey. To account for potential non-participation or misalignment with the Phase-I defined vulnerability criteria, an additional 25% of households were randomly selected as a replacement sample for each project. These households were intended to be interviewed if the initially selected respondents did not meet the vulnerability criteria or declined to participate in the survey. However, the assessment did not encounter any instances where households refused to participate or failed to meet the locally defined vulnerability characteristics.

On the other hand, a snowball sampling technique was used to identify non-beneficiary and host-community households, in the absence of reliable household listings with complete vulnerability characteristics. This process began with non-beneficiary FGD participants from Phase-I for each project, who then helped identify additional eligible households.

Annex I provides a detailed overview of the respondent selection process for each location.

2.4 Data Collection

The field data was collected independently by TKH, with three dedicated teams of field researchers assigned—one team (one male and one female researchers) per target province. The three teams were supervised by a study coordinator who facilitated province level coordination and approvals and ensured consistency and data quality. The field researchers were residents of their respective provinces, fluent in local languages, and well-versed in cultural norms and customs, ensuring culturally sensitive and contextually appropriate engagement with communities.

To comply with local requirements, the three female field researchers were accompanied by paid Mahrams throughout the training and data collection process. Additionally, separate transportation was arranged for female researchers and their Mahrams working in Zindajan and

Injil districts of Hirat and Pachir Wa Agam district of Nangarhar, in accordance with local Directorate of Economy (DfA) regulations.

Field researchers were trained in two subsequent rounds, first a three-day training on Phase-I tools (project specific KIIs and FGDs) and then a three-day training on Phase-II tools (project-specific household survey questionnaires).

2.4.1 Phase – I Data Collection

Phase I of the data collection process was qualitative in nature, focusing on gathering in-depth insights into vulnerability, as detailed in [Section 2.2](#). Between 10 and 21 November 2024, a total of 28 KIIs and 16 FGDs were conducted across the three target provinces. Data collection was carried out using humanitarian situation/project-specific semi-structured questionnaires for KIIs and guides for FGDs, as detailed in [Annex – IV](#) (Assessment Tools).

The Phase-I tools (KII questionnaires and FGD guides) were initially developed in English, then translated into local languages (Pashto and Dari) for field implementation. During data collection, KIIs and FGDs were recorded and transcribed manually by field researchers in Pashto and Dari, after which they were translated back into English for analysis. Phase-I tools and data collection covered the following key thematic areas:


Table 9: Phase-I (KIIs and FGDs) Data Collection Thematic Areas

Key Informant Interviews Thematic Areas	FGDs Thematic Areas
<ul style="list-style-type: none"> – The extent to which districts/communities/areas were differently affected by the JPF-responded humanitarian situations in targeted provinces/districts/communities. Have there been any changes in affected geographies over time? If so, what triggered such changes? – Which categories of the households were most affected by the JPF-responded humanitarian situations in the targeted three provinces? Why were they most affected and how did they vary from other households? – For Emergency Food Assistance projects in Kabul and Nangarhar: What were the main causes of critical food insecurity at the most affected districts/communities/villages? – Were girls, boys, and female and male affected differently by the JPF-responded humanitarian situations in the targeted three provinces? In case affected differently, why they were differently affected and why not? – What were the most critical humanitarian needs for the most affected households over time? 	<ul style="list-style-type: none"> – For the Earthquake Response Program in Hirat and the Returnee Assistance Program in Nangarhar: What happened to the lives of the families overtime during and after the earthquake or repatriation? – For emergency food insecurity in Kabul and Nangarhar: What were the main causes of critical food insecurity for the households during the JPF-funded project periods? What were households' critical priority issues over time? How such priorities changed over time? And, what triggered such changes? – Characteristics of the most affected households in the context of the JPF-responded humanitarian situations in Kabul, Nangarhar, and Hirat? Why were they most affected? – Which category of the household members (children, female, male, persons with disabilities and chronic medical conditions, elderly, pregnant and lactating women, and others) were most affected by the JPF-responded humanitarian situations? How and why were they differently affected?

2.4.2 Phase – II Data Collection

Phase – II of the data collection was undertaken between 11 December 2024 and 3 January 2025.

TKH developed four sets of structured household survey questionnaires, each tailored to the specific humanitarian situations covered by the JPF-funded projects ([Annex – IV: Assessment](#)



[Tools](#)). These survey tools were designed based on the findings from Phase-I and in consideration of previously used survey tools by TKH and others.

The questionnaires were initially developed in English and later translated into Pashto and Dari for field implementation. The following four household survey questionnaires were utilised:

- Earthquake response household survey questionnaire in Hirat
- Returnees' response household survey questionnaire in Nangarhar
- Emergency food assistance response household survey questionnaire in Kabul and Nangarhar
- Host-community household survey questionnaire in Nangarhar

Electronic questionnaires were used for household surveys data collection using Kobo Toolbox.

3 LIMITATIONS AND CHALLENGES

The following challenges and limitations were encountered during this assessment. The complexities of the on-the-ground realities are detailed below to inform planning of future assessments under similar constraints.

Delays and Challenges in Obtaining Field Work Approvals:

Securing the necessary approvals for fieldwork posed significant challenges, leading to delays in both Phase I and Phase II of data collection. It also required additional resources to comply with local regulations while ensuring data collection could proceed effectively.

Restriction on Female NGO Staff Fieldwork:

On December 23, 2024, the DfA issued a directive prohibiting all NGO female staff from coming to offices and engaging in fieldwork, warning that non-compliance would result in registration revocation. This restriction caused delays in completing the household surveys in Kabul and Nangahar, and resulted in additional operation costs.

Balancing Scope of the Assignment with Ground Realities:

One of the key challenges was aligning the scope of the assessment with on-the-ground realities. On average, each household survey questionnaire took approximately 1 hour and 23 minutes to complete, placing a significant burden on field researchers, respondents, and the analysis team. The complexity and scale of the assessment highlighted the need for a more contextually tailored approach in future JPF evaluations, ensuring that data collection efforts remain both thorough and feasible within Afghanistan's operational landscape.

Inadequate verification of the phase 2 sample meeting the vulnerability criteria

The phase II data collection sampled beneficiaries and non-beneficiaries who met the criteria of vulnerability. Whether sampled respondents met the vulnerability criteria or not was self-reported by respondents themselves and was not independently verified by the assessment team. For example, the team did not check medical records for reported chronically ill persons, nor did they verify the lack of livelihood, number of family members, or other claimed vulnerabilities. Moreover, the list of project beneficiaries provided by the respective implementing agencies did not necessarily indicate which beneficiary selection criteria given households had met. This made it difficult to verify if the selected beneficiaries had actually met the vulnerability criteria. On the other hand, non-beneficiaries were selected through snowball sampling, and the referred most vulnerable households for interviews were confirmed for specific criteria of vulnerabilities by community leaders.

Underreporting of primary data by the third-party evaluation consultant

Although the assessment was expected to address the same set of the ToR questions across the 5 projects, not all the primary data were reported by the consultant, despite two rounds of exchange of feedback. Although a sample was drawn from both beneficiaries and non-beneficiaries, moreover, relevant data were not necessarily disaggregated by beneficiaries and non-beneficiaries, limiting usage of data to analyze specific outcomes of the projects on beneficiaries. Consequently, quality of data analysis varies by province, leaving some ToR questions not fully addressed.

4 FINDINGS

The findings of this third-party assessment are presented based on assessment questions and are organised separately for each of the programme provinces: Kabul, Nangarhar, and Hirat. As detailed in [Section 1.3](#), this assessment covered several critical aspects to understand the vulnerability and resilience of the most vulnerable households in these provinces. Key areas examined include locally defined vulnerable households, current livelihood cycles, shocks to livelihood cycles, resilience against shocks, the role of aid, future prospects, protection and accountability to affected individuals, and the visibility of Japanese funding.

4.1 Kabul Province

This section outlines the findings specific to the JPF-funded emergency food assistance project implemented by REALs in Kabul.

4.1.1 Locally defined vulnerable households

In Kabul, households with severely compromised food security (most vulnerable households) were those that had to sell household assets to buy food or experienced starvation due to a lack of food between fall 2023 and summer 2024. This definition is aligned with the Integrated Food Security Phase Classification (IPC)⁴⁸ for households categorised at either the "Emergency" or "Crisis" level of acute food insecurity and in need of assistance.

According to the KIs and FGDs, a loss or lack of purchasing power emerged as an overarching cause of severe food insecurity among the most vulnerable households in Kabul, attributed to by the following key factors:

- Lack or loss of livelihood/income
- Unavailability of assistance and support systems
- Influx of returnees affecting house rent prices
- Increased prices of essential items (both food and non-food)

These factors (individually or collectively) were perceived to have affected the ability of households to meet their basic food needs. This assessment did not weigh the impact of individual factors with respect to their contribution or their inter-relation in resulting food insecurity.

The following categories of households were identified as most vulnerable to food insecurity:

Table 10: Categories of the Most Vulnerable Households to Food Insecurity in Kabul

Characteristics of the Most Vulnerable Households to Food Insecurity in Kabul	Description
1. Female headed households	FGD participants with this attribute reported frequent occasions of starvation due to a lack of food, reporting less livelihood opportunities for women in the current situation.
2. Households whose head has disability without another breadwinner	FGD participants with this attribute reported frequent occasions of starvation due to a lack of food and selling household assets, reporting less livelihood

⁴⁸ IPC (n.d.). *IPC Acute Food Insecurity Classification* | IPC Global Platform. [online] Available at: <https://www.ipcinfo.org/ipcinfo-website/ipc-overview-and-classification-system/ipc-acute-food-insecurity-classification/en/> [Accessed 6 Sep. 2024].

	opportunities for PwDs without another breadwinner in the household.
3. Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	FGD participants with this specification reported frequent occasions of starvation due to a lack of food and selling household assets, reporting the need for both food and/or essential household items along with the treatment/medication cost with no livelihood opportunity for elderly or chronically ill person and without any other breadwinner in the household.
4. Households living in temporary houses in informal settlements or in a single room	These households were reported to be living in a desperate situation and in continuous shortage of essential food items
5. Households with child labour	Families with child labour to supplement their income faced significant challenges in meeting their basic food needs.
6. Households with more than 8 member and only one breadwinner (dependency ratio of 1:7 or higher)	According to FGD participants, large families with a high dependency ratio and only one source of income struggled to meet their basic food needs. The financial burden on the sole breadwinner is immense, making it difficult to ensure adequate food for all members.
7. Households having chronically ill person(s) or person(s) with disability (people with special needs)	These households faced additional economic pressures due to medical expenses. The presence of chronic illness or disability reduced the household's overall earning potential, exacerbating food insecurity.
8. Households lacking any livelihood sources or income-generating assets (e.g., land, livestock).	Referred to household without any livelihood or source of income or income generating assets. With most of the residents in Kabul moved to Kabul from rural areas, this included those without any farming land or livestock in their place of origin from where they could have some constant income.
9. Households relying on neighbour's support, Zakat ⁴⁹ , or begging	Relying on neighbour's support, Zakat, or begging was adopted by household in desperate shortage of essential food items.
10. IDPs and returnees (Iran and Pakistan) who were not able to settle	Referred to those IDPs and returnees who could not settle, lacked social support and livelihood.

The JPF-funded Cash for Food for Vulnerable Households in Central provinces project, implemented by REALs/Zamir Foundation, used the following criteria for beneficiary selection:

1. Female-headed households
2. Internally displaced households
3. Households headed by persons with disabilities, the elderly, or children
4. Households without livelihoods.

⁴⁹ Zakat: 2.5% (or 1/40) of a Muslim's total savings and wealth above a minimum amount known as Nisab each lunar year paid to the poor and the needy, orphans, widows, the aged who cannot work to feed themselves, and those in debt.

5. Low-income household's (less than 4000 afghanis per month) depending on food and living conditions
6. Households with children under 5 years of age or pregnant or nursing women
7. Household's with chronically ill or disabled persons
8. Households that have not received relief goods (cash, food, etc.) in the past four months

According to the REALs/Zamir Foundation's project proposal, any household meeting at least one of the above criteria was considered vulnerable and eligible for cash for food support. When compared against the categories of the most vulnerable households to food insecurity identified in Phase I of this assessment (shown in Table 10), it appears that the criteria 1-4 and 7 are validated to some extent, while the criteria 6 and 8 lack specificity, as many non-vulnerable households would also fall in these categories. As for the criteria 5, the rational is unclear for setting a threshold of Afghanis 4,000 to define "low-income households". Moreover, the above findings from FGD and KII shed a new light on aspects of vulnerability that might have been overlooked by REALs and Zamir Foundation.

4.1.2 Socio-demographic profile of surveyed households

Overall, 98.1% of the respondents in Kabul were head of the households. As presented in Table – 11 below, out of the total sample of 108 respondents, 30% were female (27% of beneficiaries, 32% of non-beneficiaries) and 70% were male (73% of beneficiaries, 68% of non-beneficiaries).

With the median age of 45 years (both for beneficiary and non-beneficiary respondents), majority (36%) of the respondents were aged 50 to 65 years (35% of beneficiaries, 38% of non-beneficiaries), followed by 34% aged 36 to 49 years (38% of beneficiaries, 30% of non-beneficiaries), and 17% aged 26 to 35 years (13% of beneficiaries, 21% of non-beneficiaries). Close to two-third (65%) of the respondents never attended school.

In terms of marital status, 65% of the respondents were married (75% of beneficiaries, 55% of non-beneficiaries), 9% never married (5% of beneficiaries, 13% of non-beneficiaries), and 26% were widowed (20% of beneficiaries and 32% of non-beneficiaries).

Overall, the average household size was 6.7 member per household (beneficiaries 7.3 and non-beneficiaries 6.1). More than half (55%) of the household had 6 to 8 members (58% of beneficiaries, 51% of non-beneficiaries), followed by 27% with 5 or fewer members (16% of beneficiaries, 38% of non-beneficiaries), and 19% had more than 8 members (25% of beneficiaries, 11% of non-beneficiaries).

The household survey assessed disabilities and chronic illnesses at the household level. In terms of disabilities, 28% of households had one or more members with disabilities (35% of beneficiary households, 21% of non-beneficiary), and 6% of households had heads of the household with disabilities (11% of beneficiary households, 2% of non-beneficiary households). Similarly, 51% of households had one or more household members with chronic illness (47% of beneficiary households, 55% of non-beneficiary households), and in 26% of households the head of the household had a chronic illness (22% of beneficiary households, 30% of non-beneficiary households).

Finally, concerning income, 26% of households had no family member with income at the time of household survey (24% of beneficiaries, 28% of non-beneficiaries), 71% had only one family member with income (75% of beneficiaries, 68% of non-beneficiaries), and 3% had more than one family member with income (2% of beneficiaries, 4% of non-beneficiaries).

Table 11: Socio-demographic Profile of Households Surveyed in Kabul

Respondents' Demographics			Beneficiary	Not Beneficiary	TOTAL
Respondents' gender	Female	N	15	17	32
		%	27%	32%	30%
	Male	N	40	36	76
		%	73%	68%	70%
Respondents' age categories	18 to 25 Years	N	4	5	9
		%	7%	9%	8%
	26 to 35 Years	N	7	11	18
		%	13%	21%	17%
	36 to 49 Years	N	21	16	37
		%	38%	30%	34%
	50 to 65 Years	N	19	20	39
		%	35%	38%	36%
	More than 65 Years	N	4	1	5
		%	7%	2%	5%
Respondents' marital status	Married	N	41	29	70
		%	75%	55%	65%
	Never married (single)	N	3	7	10
		%	5%	13%	9%
	Widowed	N	11	17	28
		%	20%	32%	26%
Respondents' level of education	Never Attended School	N	32	38	70
		%	58%	72%	65%
	Primary School	N	3	1	4
		%	5%	2%	4%
	Religious Education	N	1	0	1
		%	2%	0%	1%
	Secondary School	N	10	8	18
		%	18%	15%	17%
	High School	N	9	6	15
		%	16%	11%	14%
Respondents' Household Size	5 or Less Members	N	9	20	29
		%	16%	38%	27%
	6 to 8 Members	N	32	27	59
		%	58%	51%	55%
	More than 8 Members	N	14	6	20
		%	25%	11%	19%
Persons with Disability at the Household	Households having member(s) with disability	N	19	11	30
		%	35%	21%	28%
	Households head with disability	N	6	1	7
		%	11%	2%	6%
Persons with Chronic Illness at the Household	Households with the head of the household with disability	N	26	29	55
		%	47%	55%	51%
	Households head with chronic illness	N	12	16	28
		%	22%	30%	26%
Number of Household Members with Income	No family member with income	N	13	15	28
		%	24%	28%	26%
	One family member with income	N	41	36	77
		%	75%	68%	71%
	More than one family member with income	N	1	2	3
		%	2%	4%	3%

Respondents' Demographics		Beneficiary	Not Beneficiary	TOTAL
Total Sample	N	55	53	108

4.1.3 Categories of most vulnerable households to food insecurity

Overall, as presented in Table – 12 below, 77% of the surveyed households were identified with single vulnerability (78% beneficiaries and 75% non-beneficiaries), ranging from 23% female-headed households to 4% for households without any source of livelihood and income generating assets.

Table 12: Most Vulnerable Households with Single Vulnerability in Kabul

Vulnerability Characteristics		Beneficiaries	Non-beneficiaries	Total
Female headed households	N	9	16	25
	%	16%	30%	23%
Households whose head has disability	N	6	8	14
	%	11%	15%	13%
Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	N	9	5	14
	%	16.4%	9.4%	13%
Households living in temporary houses in informal settlements or in a single room	N	5	7	12
	%	9%	13%	11%
Households with more than 8 family member and one bread earner (dependency ratio of 1:7 or more)	N	7	3	10
	%	13%	6%	9%
Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	3	1	4
	%	5%	2%	4%
Households without any source of livelihood and income generating assets (land, livestock and others)	N	4	0	4
	%	7%	0%	4%
Total Number of Households with Single Vulnerability	N	43	40	83
	%	78%	75%	77%

As presented in Tables 13 and 14 below, 19% of the surveyed households (beneficiary 20% and non-beneficiary 19%) were identified with two vulnerability factors and only 4% (beneficiary 2% and non-beneficiary 6%) with three vulnerability factors.

Table 13: Most Vulnerable Households with Two Vulnerabilities in Kabul

Vulnerability Characteristics		Beneficiaries	Non-beneficiaries	Total
- Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	N	2	5	7
	%	3.6%	9.4%	6.5%
- Households living in temporary houses in informal settlements or in a single room	N	3	2	5
	%	5.5%	3.8%	4.6%
- Female headed households	N	2	0	2
	%	3.6%	0.0%	1.9%

- Households whose head has disability	N	1	1	2
- Households living in temporary houses in informal settlements or in a single room	%	1.8%	1.9%	1.9%
- Households living in temporary houses in informal settlements or in a single room	N	0	1	1
- Households with child labour	%	0.0%	1.9%	0.9%
- Female headed households	N	0	1	1
- Households living in temporary houses in informal settlements or in a single room	%	0%	1.9%	0.9%
- Households living in temporary houses in informal settlements or in a single room	N	1	0	1
- Households having chronically ill person(s) or person(s) with disability (people with special needs)	%	1.8%	0.0%	0.9%
- Households living in temporary houses in informal settlements or in a single room	N	1	0	1
- IDPs and returnees (Iran and Pakistan)	%	1.8%	0.0%	0.9%
- Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	1	0	1
- IDPs and returnees (Iran and Pakistan)	%	1.8%	0.0%	0.9%
Total Number of Households with Two Vulnerabilities	N	11	10	21
	%	20%	19%	19%

Table 14: Most Vulnerable Households with Three Vulnerabilities in Kabul

Vulnerability Characteristics		Beneficiaries	Non-beneficiaries	Total
- Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	N	0	1	1
- Households living in temporary houses in informal settlements or in a single room				
- Households with more than 8 family member and one bread earner (dependency ratio of 1:7 or more)	%	0%	1.9%	0.9%
- Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	N	0	1	1
- Households living in temporary houses in informal settlements or in a single room				
- Households having chronically ill person(s) or person(s) with disability (people with special needs)	%	0%	1.9%	0.9%
- Households whose head has disability	N	1	0	1
- Households living in temporary houses in informal settlements or in a single room				
- Households with more than 8 family member and one bread earner (dependency ratio of 1:7 or more)	%	1.8%	0.0%	0.9%
- Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	0	1	1
- IDPs and returnees (Iran and Pakistan)				
- Households relying on neighbour's support, Zakat, or begging	%	0%	1.9%	0.9%
Total Number of Households with Three Vulnerabilities	N	1	3	4

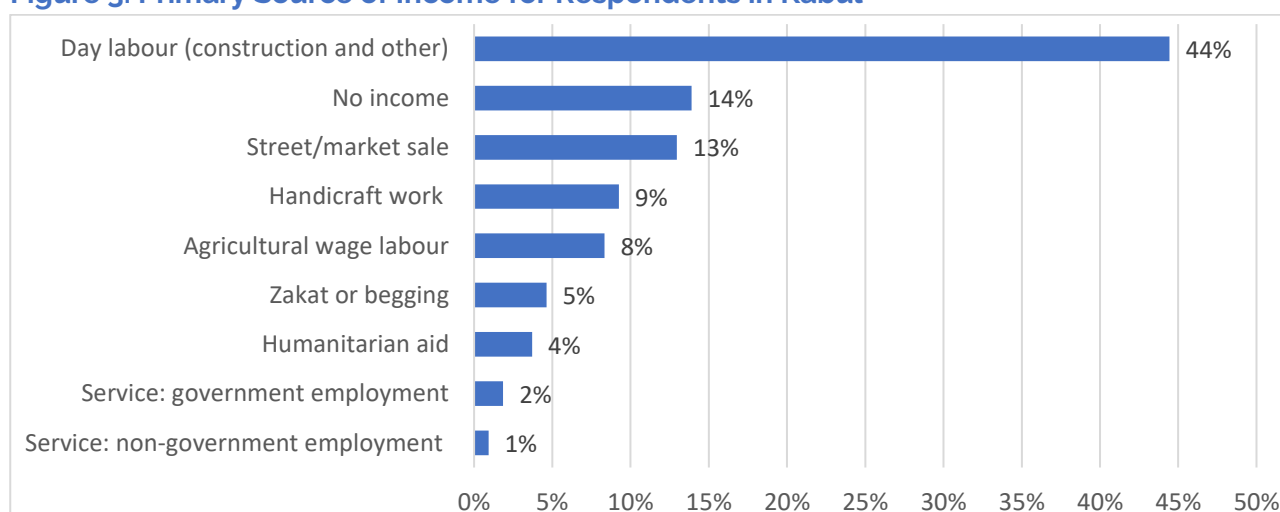
	%	2%	6%	4%
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4.1.4 Current livelihood cycle

Current household sources of income

In Kabul, 44% of the surveyed households (45% beneficiaries and 43% non-beneficiaries) primarily relied on day labour (construction and other forms of casual work) for their main source of income. Additionally, 14% (13% beneficiaries and 15% non-beneficiaries) reported having no income, with 73% of these households relying on borrowing to meet essential needs. Street and market sales served as the primary income sources for 13% of households (15% beneficiaries and 11% non-beneficiaries), while 9% (2% of beneficiaries and 17% of non-beneficiaries) depended on handicraft work such as carpet weaving and embroidery as the main/primary source of their income. Agricultural wage labour was the primary income source for 8% of households (11% beneficiaries and 6% non-beneficiaries), and 5% (4% beneficiaries and 6% non-beneficiaries) primarily depended on Zakat or begging, followed by 4% on humanitarian aid (5% beneficiaries and 2% non-beneficiaries). At the time of the survey, reliance on humanitarian aid for household livelihoods were relatively low, even among the beneficiaries.

Figure 3: Primary Source of Income for Respondents in Kabul



About one-fourth (26%) of surveyed households (33% of beneficiaries and 19% of non-beneficiaries) reported having a secondary source of income. Among them, 11% (7% of beneficiaries and 15% of non-beneficiaries) cited Zakat or begging as their second source of income, followed by 10% for humanitarian aid (exclusively among beneficiary households) and 5% for street and market sales (6% of beneficiaries and 4% of non-beneficiaries).

Only 7% of surveyed households (13% of beneficiaries and 15% of non-beneficiaries) reported having a third source of income. This included 5% who reported Zakat or begging (5% of beneficiaries and 4% of non-beneficiaries) as the third source of household income, followed by 2% for daily labour (both beneficiaries and non-beneficiaries), and 1% for humanitarian aid (exclusively among beneficiary households).

The primary sources of income differ significantly by the categories of the most vulnerable households. Female-headed households primarily relied on handicraft work (32%) and humanitarian aid (12%), while a significant proportion (40%) reported having no income. Among the other most vulnerable household groups, day labour constitutes the primary source of

income for most groups, ranging from 71% among households headed by individuals with chronic illnesses or elderly (65+) with no other breadwinner to 43% among households without any source of livelihood and income-generating assets.

Households exhibiting two categories of vulnerability primarily relied on day labour (43%) and agricultural wage labour (29%), while those with three categories of vulnerability overwhelmingly depended on day labour (75%) for the main source of income.

Table 15: Primary Source of Household Income by Categories of Vulnerability in Kabul

Most vulnerable households		Agri - wage labour	Day labour	Handicraft work	Humanitarian aid	No income	Service: Non-Govt employment	Street/ market sale	Zakat or begging	Total
Female-headed households	N	0	1	8	3	10	0	0	3	25
	%	0%	4%	32%	12%	40%	0%	0%	12%	100%
Households whose head has disability	N	0	4	0	0	0	0	0	0	4
	%	0%	100%	0%	0%	0%	0%	0%	0%	100%
Household head with chronic illness or elderly (more than 65) and no other breadwinner	N	1	10	0	0	1	0	2	0	14
	%	7%	71%	0%	0%	7%	0%	14%	0%	100%
Households living in temporary houses in informal settlements or in a single room	N	0	8	0	0	0	0	3	1	12
	%	0%	67%	0%	0%	0%	0%	25%	8%	100%
Households with more than 8 family member and one bread earner	N	2	4	1	1	1	0	0	0	10
	%	20%	40%	10%	10%	10%	0%	0%	0%	100%
Households having chronically ill person(s) or person(s) with disability	N	0	3	0	0	1	0	0	0	4
	%	0%	75%	0%	0%	25%	0%	0%	0%	100%
Households without any source of livelihood and income generating assets	N	0	6	0	0	1	0	7	0	14
	%	0%	43%	0%	0%	7%	0%	50%	0%	100%
Two Vulnerabilities	N	6	9	1	0	0	1	2	1	21
	%	29%	43%	5%	0%	0%	5%	10%	5%	100%
Three Vulnerabilities	N	0	3	0	0	1	0	0	0	4
	%	0%	75%	0%	0%	25%	0%	0%	0%	100%
Total	N	9	48	10	4	15	1	14	5	108
	%	8%	44%	9%	4%	14%	1%	13%	5%	100%

Respondents reported varying levels of household income across different seasons of the year. A significant 74% of the respondents (76% of beneficiaries and 72% of non-beneficiaries) experienced low-income levels during winter. In autumn, 39% of the respondents (35% of beneficiaries and 43% of non-beneficiaries) reported low-income levels.

Current household expenditure

As presented in Table – 16 below, food items were identified as the most critical first expense, with 99% of households prioritising it. On the other hand, the finding indicates a greater variation in the second and the third priorities. Housing was reported as the second priority expense by 56% (beneficiaries 44% and non-beneficiaries 70%), followed by: warm clothes for winter by 24% (34% of beneficiaries and 13% of non-beneficiaries), and home heating materials

by 10% (11% beneficiaries and 9% non-beneficiaries). Healthcare and medicine were also reported as second-priority expenses by 11% of beneficiaries and 7% of non-beneficiaries.

For third expenses, 36% of both beneficiaries and non-beneficiaries prioritized home heating materials and 25% reported healthcare and medicine ranked as the third main item the household currently spends money on, with no notable difference between groups. Similarly, warm clothes remained the third expenditure for 18% of households (beneficiaries 11% and non-beneficiaries 24%).

Table 16: Priorities in the Current Household Expenditure in Kabul

Current Expend	First Expenses		Second Expenses		Third Expenses	
	N	%	N	%	N	%
Food Items	107	99%	0	0%	0	0%
Housing (including rent payment)	0	0%	61	56%	10	9%
Warm Clothes (for Winter)	0	0%	26	24%	19	18%
Home Heating Material	0	0%	11	10%	39	36%
Healthcare/Medicine	1	1%	10	9%	27	25%
Household Utilities (Stove, Dishes, Cook and others)	0	0%	0	0%	6	6%
Drinking water	0	0%	0	0%	2	2%
Sanitation	0	0%	0	0%	2	2%
Did not have expenses	0	0%	0	0%	3	3%
Total	108	100%	108	100%	108	100%

Regardless of the categories of the most vulnerable households, food items emerged as the top priority. The second expenses varied by different categories of vulnerability. Clothing (warm clothes for winter) featured as the second priority expense among female-headed households, while housing was the second priority expense for the rest of the groups.

Among these expenditure items prioritized by vulnerable households, demand for warm clothes and home heating materials arises in winter, when 74% of households report a low-income level in a year. Presumably, vulnerable households struggle more to make their ends meet in colder months.

Current unmet household needs

As presented in Table – 17 below, overall, the data highlights the urgent needs for food, housing, warm clothing, heating materials for winter, and healthcare, closely following the same pattern of prioritization as household expenditure. The finding implies that vulnerable households remained unable to meet their most important needs, even if they prioritize such items in managing household expenditure.

The most pressing unmet need was food items for 96% of households (both for beneficiaries and non-beneficiaries). Housing (cost of dwelling and utilities) ranked as the second most critical unmet need for 56% of households (beneficiaries 49% and non-beneficiaries 62%) and as the third for 7% (beneficiaries 9% and non-beneficiaries 6%). Clothing, particularly warm clothes for winter, was also a significant unmet need, with 19% of households indicating it as their second unmet need (beneficiaries 22% and non-beneficiaries 17%) and 16% as their third (beneficiaries 11% and non-beneficiaries 21%). Heating materials to cope with the cold, such as wood, were a notable third unmet need for 31% of households (beneficiaries 25% and non-beneficiaries 36%) and the second unmet need for 10% (beneficiaries 13% and non-beneficiaries

7%). Healthcare and medicine were critical for 25% of households as a third unmet need (beneficiaries 24% and non-beneficiaries 26%) and 8% as a second unmet need (beneficiaries 9% and non-beneficiaries 7%). House repair needs, including window glazing or plastic covers (especially in winter), were identified by 4% of households as both their second and third unmet needs.

Table 17: Current Unmet Household Needs in Kabul

Current Unmet Needs	First Unmet Need		Second Unmet Need		Third Unmet Need	
	N	%	N	%	N	%
Food items	104	96%	1	1%	0	0%
Housing (including rent payment)			60	56%	8	7%
Clothing (warm clothes for winter)	2	2%	21	19%	17	16%
Heating materials (heating material to cope with cold like wood and others)	1	1%	11	10%	33	31%
Healthcare and medicine	0	0%	9	8%	27	25%
House repair (including windows glazing or plastic cover)	0	0%	4	4%	3	3%
Sanitation facilities	1	1%	2	2%	4	4%
Household utilities (stove, dishes, cooker and others)	0	0%	0	0%	10	9%
Education for children	0	0%	0	0%	2	2%
Clean drinking water	0	0%	0	0%	1	1%
Household materials (blanket, mattress, carpet and others)	0	0%	0	0%	1	1%
Total	108	100%	108	100%	108	100%

Different categories of vulnerable households seemingly had different emphasis in ranking the second and the third critical unmet needs, although the sample size is too small to draw a definite conclusion. Overwhelming majority of households without any source of livelihoods, households living in temporary shelters and households who met two criteria of vulnerability identified housing needs as the second critical unmet need. Warm clothing needs came next for households without any source of livelihoods, while home heating materials followed housing needs for the latter two categories. For large households with more than eight members and female-headed households, housing needs also featured prominently, closely followed by needs for warm clothing. Among households whose head is chronically ill or elderly, home heating materials and healthcare and medicine ranked high as unmet needs. Healthcare and medicine ranked as the third unmet needs for approximately one third of female-headed households, large households with more than eight members, and households without any source of livelihoods.

Table 18: Current Unmet Household Needs by Categories of Vulnerability in Kabul

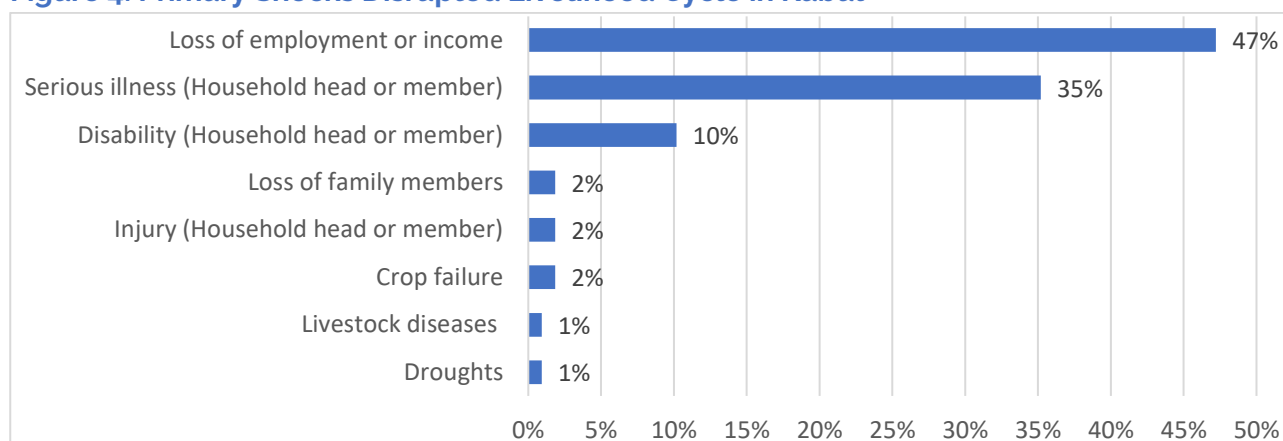
Most vulnerable households		Warm Clothing		Healthcare and Medicine		Home Heating Materials		House Repair (Windows Glazing and others)		Housing/ Dwelling		Others		Total
		2 nd	3 rd	2 nd	3 rd	2 nd	3 rd	2 nd	3 rd	2 nd	3 rd	2 nd	3 rd	
Female headed households	N	11	5	1	9	1	3	0	0	12	3	0	5	25

	%	44%	20%	4%	36%	4%	12%	0%	0%	48%	12%	0%	20%	100%
Households whose head has disability	N	1	0	1	2	1	1	0	1	1	0	0	0	4
	%	25%	0%	25%	50%	25%	25%	0%	25%	25%	0%	0%	0%	100%
Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner	N	1	3	3	3	5	5	2	0	3	0	0	3	14
	%	7%	21%	21%	21%	36%	36%	14%	0%	21%	0%	0%	21%	100%
Households living in temporary houses in informal settlements or in a single room	N	1	0	0	2	0	7	0	0	10	0	1	3	12
	%	8%	0%	0%	17%	0%	58%	0%	0%	83%	0%	8%	25%	100%
Households with more than 8 family member and one bread earner	N	3	4	0	3	1	1	0	0	6	2	0	0	10
	%	30%	40%	0%	30%	10%	10%	0%	0%	60%	20%	0%	0%	100%
Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	1	0	2	0	1	1	0	2	0	0	0	1	4
	%	25%	0%	50%	0%	25%	25%	0%	50%	0%	0%	0%	25%	100%
Households without any source of livelihood and income generating assets (land, livestock and others)	N	2	4	0	5	0	2	0	0	12	1	0	2	14
	%	14%	29%	0%	36%	0%	14%	0%	0%	86%	7%	0%	14%	100%
Two Vulnerabilities	N	1	1	1	3	2	10	2	0	13	2	1	5	21
	%	5%	5%	5%	14%	10%	48%	10%	0%	62%	10%	5%	24%	100%
Three Vulnerabilities	N	0	0	1	0	0	3	0	0	3	0	0	1	4
	%	0%	0%	25%	0%	0%	75%	0%	0%	75%	0%	0%	25%	100%
Total	N	21	17	9	27	11	33	4	3	60	8	2	20	108
	%	19%	16%	8%	25%	10%	31%	4%	3%	56%	7%	2%	19%	100%

4.1.5 Shocks to livelihood

The household survey examined the shocks that disrupted their livelihoods between fall 2023 and summer 2024, i.e. the duration of REALs/Zamir Foundation's project. As shown in Figure – 4 below, the most common and impactful shocks to livelihood were the loss of employment or income, reported by 47% of households (beneficiaries 42% and non-beneficiaries 53%), followed by 35% for serious illness affecting a household head or member (beneficiaries 36% and non-beneficiaries 34%), and 10% for disability of a household head or member (beneficiaries 13% and non-beneficiaries 8%). Less frequently reported shocks included crop failure, injuries, and the loss of family members, each affecting 2% of households, while droughts and livestock diseases were reported by just 1% of respondents.

Figure 4: Primary Shocks Disrupted Livelihood Cycle in Kabul



Additionally, 41% of households (beneficiaries 45% and non-beneficiaries 36%) experienced more than one shock during this period. Among those affected by secondary shocks, 32% (beneficiaries 36% and non-beneficiaries 26%) reported the loss of a family member, 27% (beneficiaries 12% and non-beneficiaries 47%) faced serious illness (household head or member), 14% (beneficiaries 12% and non-beneficiaries 16%) experienced loss of employment or income, and 9% (beneficiaries 12% and non-beneficiaries 6%) were impacted by injuries to a household head or member.

As presented in Table – 19, the primary shocks affecting livelihoods among the most vulnerable households varied. The loss of employment or income was particularly high among female-headed households (76%) and those without any source of livelihood (93%). Serious illness, either affecting the household head or a family member, was high among elderly household heads without another breadwinner (64%), and disability, either affecting the household head or a family member, was reported as a primary shock by 25% among those whose head has a disability. For the households with two vulnerabilities, serious illness, either affecting the household head or a family member, was reported as primary shock by more than half (62%), followed by the loss of employment or income (14%), and disability, either affecting the household head or a family member (14%).

Table 19: Primary Shocks Affecting Livelihood among Most Vulnerable Households in Kabul

Most vulnerable households		Disability (self or family member)	Loss of employment or income	Serious illness (self or family member)	Others*	Total
Female-headed households	N	1	19	2	3	25
	%	4%	76%	8%	12%	100%
Households whose head has disability	N	1	1	2	0	4
	%	25%	25%	50%	0%	100%
Household head with chronic illness or elderly (more than 65) and no other breadwinner	N	2	3	9	0	14
	%	14%	21%	64%	0%	100%
Households living in temporary houses in informal settlements or in a single room	N	2	5	4	1	12
	%	17%	42%	33%	8%	100%
Households with more than 8 family member and one bread earner	N	2	6	1	1	10
	%	20%	60%	10%	10%	100%
	N	0	0	4	0	4

Households having chronically ill person(s) or person(s) with disability	%	0%	0%	100%	0%	100%
Households without any source of livelihood and income generating assets	N	0	13	0	1	14
	%	0%	93%	0%	7%	100%
Two Vulnerabilities	N	3	3	13	2	21
	%	14%	14%	62%	10%	100%
Three Vulnerabilities	N	0	1	3	0	4
	%	0%	25%	75%	0%	100%
Total	N	11	51	38	8	108
	%	10%	47%	35%	7%	100%

These shocks were reported to have significantly disrupted household livelihood cycles, greatly impacting their ability to meet their basic needs. As shown in Table – 20 below, 61% of households (beneficiaries 47% and non-beneficiaries 76%) reported being severely affected, unable to meet their essential needs, while 28% (beneficiaries 38% and non-beneficiaries 17%) were moderately affected, struggling to meet most of their needs. Comparatively, non-beneficiaries were more severely affected than beneficiaries, hinting at an exclusion error in targeting. Among those severely affected, the most pronounced impact on livelihood was observed in households experiencing loss of employment or income, with 71% reporting severe effects (unable to meet basic needs). This was followed by 64% of households facing the disability of a household head or member and 50% of those affected by serious illness or other shocks.

Table 20: Impact of Shocks on Household Livelihoods in Kabul

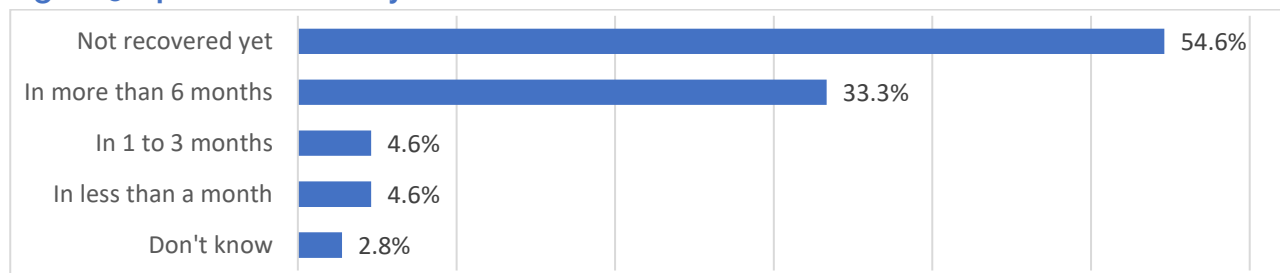
Disruption in Household Livelihood Cycle		All others	Disability (Household Head or Member)	Serious Illness (Household Head or Member)	Loss of Employment or Income	Total
Slightly affected (can meet some needs)	N	1	1	7	3	12
	%	13%	9%	18%	6%	11%
Moderately affected (struggling to meet most needs)	N	3	3	12	12	30
	%	38%	27%	32%	24%	28%
Severely affected (unable to meet basic needs)	N	4	7	19	36	66
	%	50%	64%	50%	71%	61%
Total	N	8	11	38	51	108
	%	100%	100%	100%	100%	100%

4.1.6 Perceived Recovery from the Impact of Shocks

The respondents were asked if they believed their livelihood had recovered from the impact of specific shocks they experienced. As presented in Figure – 5 below, overall, 42.6% of the surveyed households reported partial or full recovery from the shocks at the time of the survey, with 4.6% recovering in less than a month, another 4.6% within 1 to 3 months, and 33.3% taking more than six months to recover. However, the majority (54.6%) of respondents indicated they had not yet recovered from these shocks and continued to lack sufficient livelihoods to meet their basic needs. Possibly, the current state and speed of recovery are influenced by the

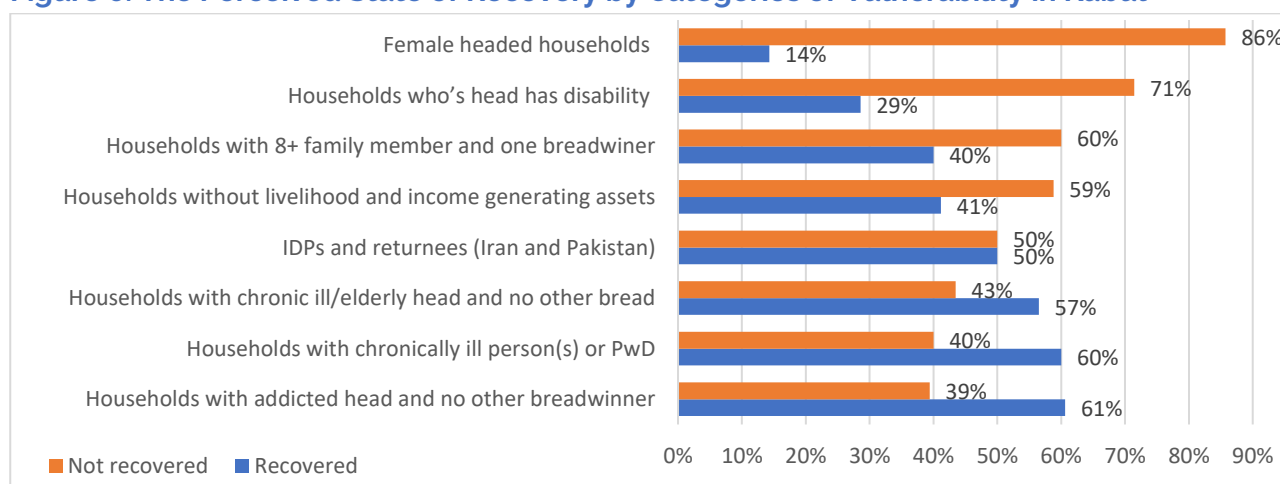
types/number of shocks experienced by respondents, and/or the severity of their impact. The data were not disaggregated as such, however.

Figure 5: Speed of Recovery form Shock in Kabul



The recovery patterns among households in different categories of vulnerability varied, with some groups perceived to remain largely unrecovered. Majority (88%) of the female-headed households reported not recovered from the shocks they experienced in the past one year preceding the household survey. Similarly, households headed by individuals with disabilities reported 71% not recovering. Households with high dependency ratios (more than eight family members and one breadwinner) and those lacking income-generating assets followed closely, with 60% and 59% reporting unrecovered, respectively. Households headed by elderly or chronically ill individuals without additional breadwinners and those with chronically ill or disabled members reported slightly better self-identified recovery status, 43% and 40%, respectively, perceived unrecovered. Possibly, households with multiple characteristics of vulnerability (e.g. female-headed households who were also IDP) may struggle to recover more than those with single characteristics. The disaggregated data were not available, however. Figure – 6 below, highlights the perceived recovery status among various groups of vulnerable households.

Figure 6: The Perceived State of Recovery by Categories of Vulnerability in Kabul



4.1.7 Adopted Coping Strategies

Affected households responded to the aforementioned shocks, by taking the following measures over time⁵⁰. As presented in Table – 21 below, the most common actions immediately after the shock included borrowing money (36%), reducing household expenses (14%), and moving to a neighbourhood with lower house rent (12%). Though less common, reliance on

⁵⁰ "Response to the shock" reported in the above paragraph was obtained in response to the multiple-choice question "How did your household respond to the [MENTION THE SHOCK IDENTIFIED BY THE RESPONDENT]? In the immediate aftermath of [MENTION THE SHOCK], In first 4 to 6 weeks, In the first 3 months, In the first 6 months."

community and family support continued from the immediate aftermath up to the 4th-6th week. On the one hand, reducing household expenses and borrowing gradually declined and nearly ceased after 3 months. On the other hand, relocation to affordable housing or to a relative's increased afterwards, reaching a peak in the first 3 months. Likewise, seeking humanitarian aid increased from 5% in the immediate aftermath to 9% in the 3rd month, before waning down to 1% by the 6th month. use of saving appeared rather exceptionally in the immediate aftermath and after 4-6 months. Nonetheless, only 19% of the affected households reported partially meeting their household needs after taking these measures.

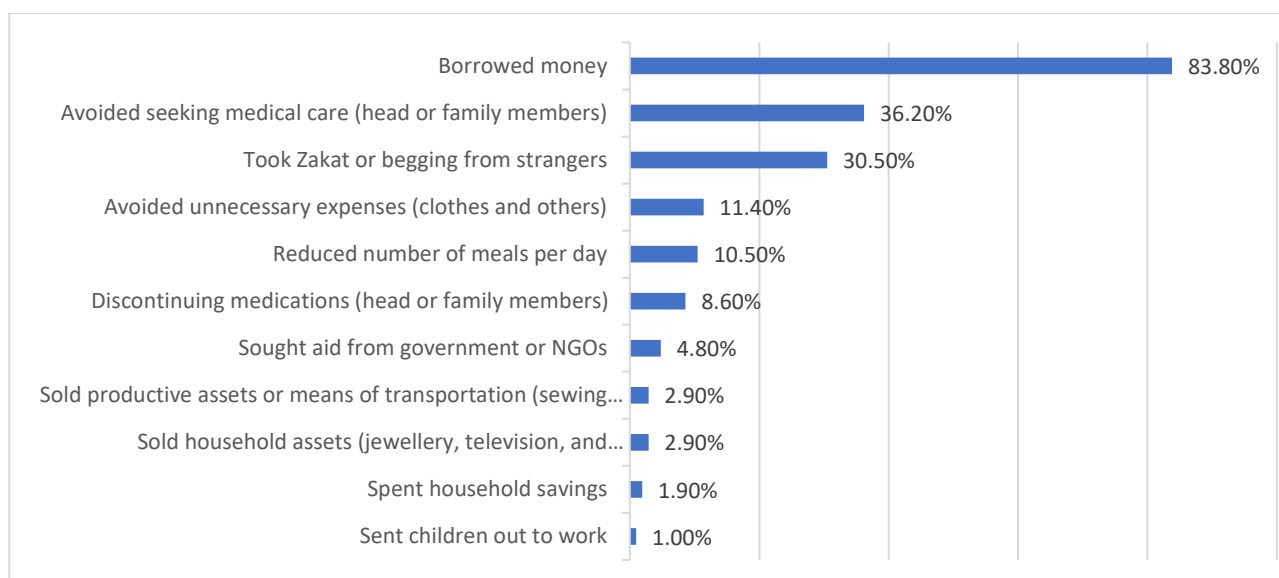
Table 21: Timeline for Response to the Shocks in Kabul

Response to the shocks		In the immediate aftermath	In first 4 to 6 weeks	In the first 3 months	In the first 6 months
Moved house to another neighbourhood where house rent was less	N	13	17	29	5
	%	12%	16%	27%	5%
Moved house to live with another relative	N	1	2	5	2
	%	1%	2%	5%	2%
Reduced household expenses	N	15	11	2	0
	%	14%	10%	2%	0%
Borrowed money	N	39	15	0	2
	%	36%	14%	0%	2%
Utilised savings	N	1	0	0	1
	%	1%	0%	0%	1%
Sought humanitarian aid	N	5	9	10	1
	%	5%	8%	9%	1%
Relied on community support	N	1	3	0	0
	%	1%	3%	0%	0%
Relied on family support	N	1	1	0	0
	%	1%	1%	0%	0%

The affected households adopted various coping strategies after experiencing shocks⁵¹. The most common strategy was borrowing money, utilised by 83.8% of households. Avoiding medical care for themselves or family members was also significant, with 36.2% adopting this measure. Taking Zakat or begging from strangers was reported by 30.5%, while 11.4% avoided unnecessary expenses, and 10.5% reduced the number of meals per day. Other strategies included discontinuing medications (8.6%), seeking aid from government or NGOs (4.8%), selling productive assets or means of transportation (2.9%), selling household assets such as jewellery and televisions (2.9%), spending household savings (1.9%), and sending children out to work (1%).

Figure 7: Coping Strategies Adopted by Households after Shock Exposure in Kabul

⁵¹ "Coping strategies" were asked in a multiple-choice question framed as "What coping strategies did your household adopt following [MENTION THE SHOCK IDENTIFIED]?" after having inquired into limitations in response to the shock. Multiple choices provided partially overlapped with the earlier question on "response to the shock" at different points in time.



Regarding the effectiveness of the coping strategies, 26% of households found these mechanisms to be effective in managing their situations. Although the majority did not consider these coping strategies ineffective, however, 93% of households indicated that the strategies were similar to those they had previously adopted in difficult times.

Table – 22 compares different coping strategies adopted by the households recovered and those not recovered from shocks. Although the comparison does not yield a striking difference between the two groups, the rate of adoption varied with regard to some of the coping strategies. Recovered households relied on debt (71.7% borrowing money) and Zakat or begging (26.1%) to a lesser extent than non-recovered households (93.2% borrowing money and 33.9% taking Zakat). Recovered households were more likely to avoid unnecessary expenses (15.2%) compared to non-recovered households (8.5%). Reducing the number of meals per day was more common among non-recovered households (15.3%) than recovered households (4.3%). Overall, non-recovered households were seemingly more likely to adopt more severe negative coping strategies like reducing meals and taking zakat or begging from strangers.

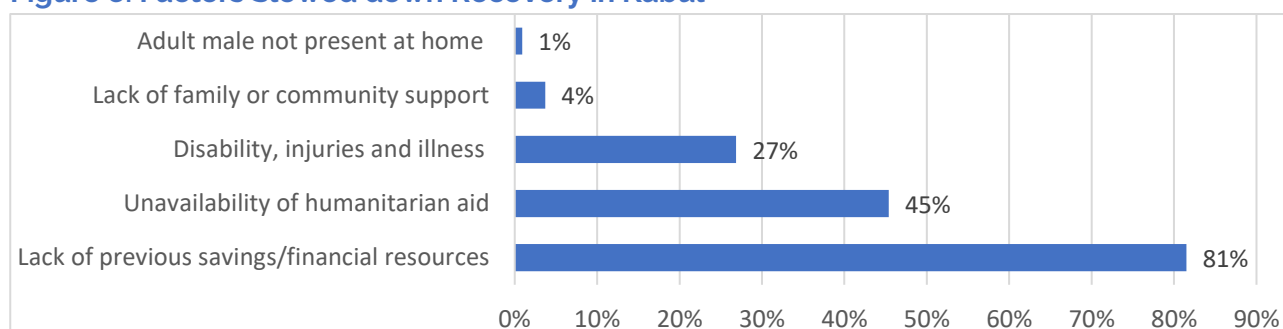
Table 22: Coping Strategies by Recovered and Not-recovered Households in Kabul

Coping Strategies by the Households		Recovered	Not recovered	Total
Borrowed money	N	33	55	88
	%	71.7%	93.2%	83.8%
Avoided seeking medical care (head or family members)	N	17	21	38
	%	37.0%	35.6%	36.2%
Took Zakat or begging from strangers	N	12	20	32
	%	26.1%	33.9%	30.5%
Avoided unnecessary expenses (clothes and others)	N	7	5	12
	%	15.2%	8.5%	11.4%
Reduced number of meals per day	N	2	9	11
	%	4.3%	15.3%	10.5%
Discontinuing medications (head or family members)	N	4	5	9
	%	8.7%	8.5%	8.6%
Sought aid from government or NGOs	N	2	3	5
	%	4.3%	5.1%	4.8%

Sold household assets (jewellery, television, and household assets)	N	1	2	3
	%	2.2%	3.4%	2.9%
Sold productive assets or means of transportation (sewing machine, bicycle, motorcycle, vehicle, etc)	N	2	1	3
	%	4.3%	1.7%	2.9%
Spent household savings	N	2	0	2
	%	4.3%	0.0%	1.9%
Sent children out to work	N	1	0	1
	%	2.2%	0.0%	1.0%

Affected households identified several factors that had slowed down their recovery process. The most significant factor was the lack of previous savings and financial resources, affecting 81% of households. Unavailability of humanitarian aid was the second major factor, reported by 45% of households. Disability, injuries, and illness among household members slowed down recovery for 27% of households, possibly worsened by such coping strategies as avoiding medical care and discontinuing medications. Considering that disability (10%) and serious illness (35%) were also cited as shocks, these shocks presumably have a lingering impact, undermining household capacity to earn income. A smaller percentage of households, 4%, attributed their slow recovery to a lack of family or community support, while 1% reported that the absence of an adult male at home hindered their recovery efforts. In all, the finding indicates absence of a safety net in the event of sudden loss of income in the context where employment, especially casual labour, is among the main livelihoods.

Figure 8: Factors Slowed down Recovery in Kabul



4.1.8 Role of aid

The household survey with 54 beneficiaries assessed the effectiveness of REALs/Zamir Foundation's project (three rounds of Afghani 2,700-2,800 per round from March to May 2024) in addressing critical food insecurity, including its timeliness and relevance and ensuring protection and accountability to affected people.

Role of the project in supporting recovery of beneficiaries

Beneficiaries tended to have recovered (52%) more than unrecovered (48%). Moreover, a ratio of self-reported recovery was higher among beneficiaries than non-beneficiaries, of whom only 35% reported recovery, with a significantly higher proportion (65%) struggling to recover.

Nonetheless, this should be read in conjunction with the above finding 4.1.4 that 96% of households, both beneficiaries and non-beneficiaries, were still unable to fully meet their household food needs at the time of the survey. It implies that recovery from the shocks does

not necessarily mean that they were now food secure in the context of chronic food insecurity. Notably, however, REALs reported in the project final report that 74% of beneficiaries demonstrated an acceptable level of Food Consumption Score (FCS), and 79% reported improvement in access to food. This survey fell short of shedding light on what affected households meant by “recovery” or how the project supported beneficiary households to recover.

Table 23: Current State of Recovery by Beneficiaries/Non-beneficiaries in Kabul

Beneficiary Status		Recovered	Not recovered	Total
Beneficiaries (Received Food Vouchers)	N	28	26	54
	%	52%	48%	100%
Non-beneficiaries (Did not receive Food Vouchers)	N	18	33	51
	%	35%	65%	100%
Total	N	46	59	105 ⁵²
	%	44%	56%	100%

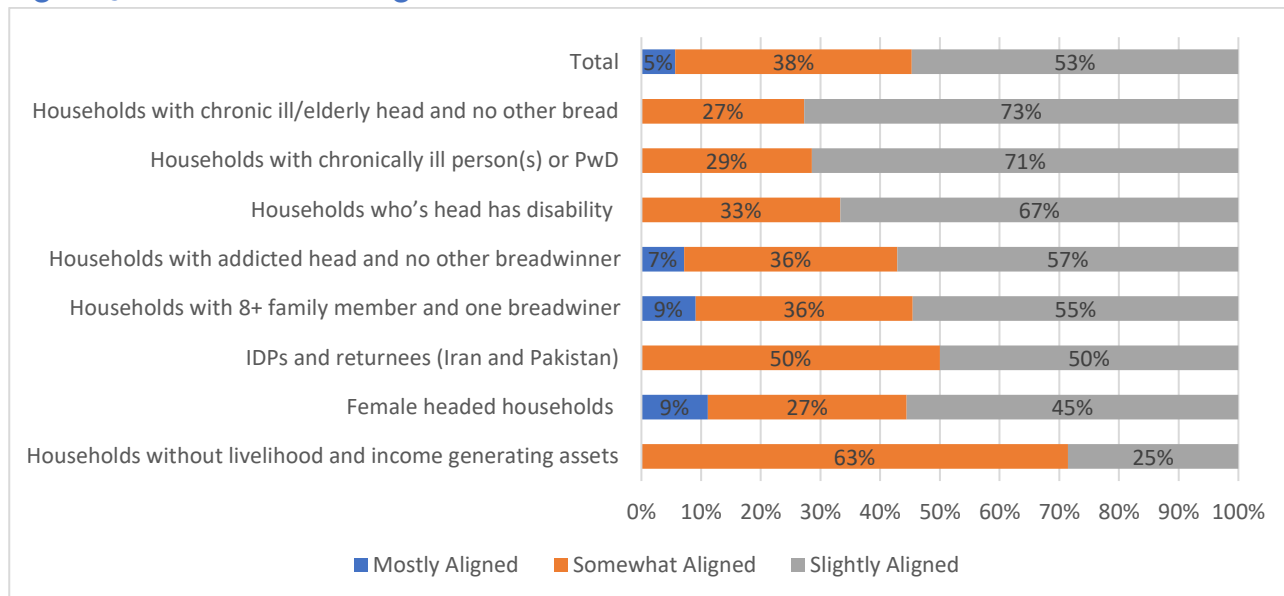
Alignment of the project with household needs

Notwithstanding the role of the project in supporting their recovery, beneficiary households did not rate the project high in terms of its alignment with their needs. Out of a scale of 1-5, ranging from “1. not aligned at all” to “5. completely aligned” with their needs, more than half, 53% of respondents, reported that the cash for food aid was “2. slightly aligned”, addressing a few of their critical needs, and 38% rated “3. somewhat aligned”, meeting some of their critical needs. Only 5% of households rated “4. mostly aligned”, effectively addressing most of their critical needs.

No significant difference emerged by different categories of vulnerability in this regard. As presented in Figure – 9 below, alignment of the project with beneficiary needs was rated relatively lower than average among households whose head has a chronic illness or is elderly, households having chronically ill persons or persons with disabilities, and households whose head has a disability. On the other hand, households without livelihood and income generating assets tend to be neutral, 63% rating that the project was “3. somewhat aligned” with their needs.

⁵² This figure excludes 3 respondents or 2.8% who stated, “Don’t know”.

Figure 9: Food Vouchers Alignment with Household Food Need in Kabul

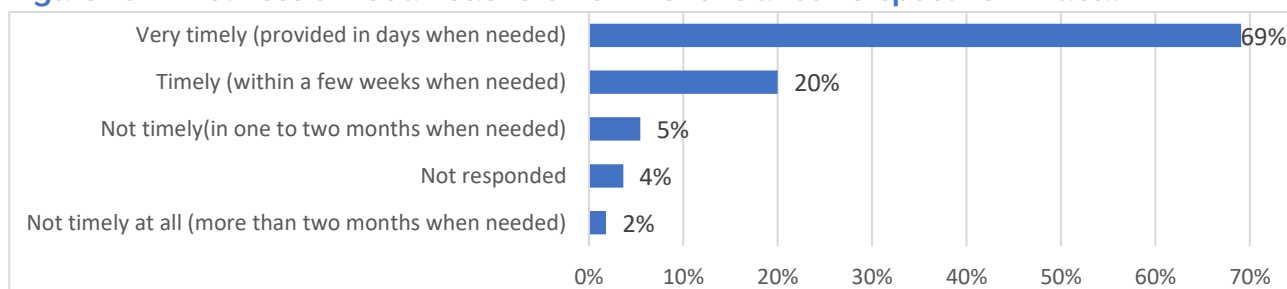


This finding is in contrast with REALs' Post Distribution Monitoring (PDM) report, in which 81% of beneficiaries were very satisfied and 19% were satisfied with the amount of cash received.

Timeliness of the project

Overall, most households received the cash for food in a timely manner. As presented in Figure – 10 below, the majority of respondents (69%) reported that the aid was very timely, arriving immediately within days when needed. Another 20% found the aid to be timely, as it was provided within a few weeks. A smaller portion of households (5%) stated that the aid was not timely, taking one to two months to arrive. Only 2% reported that the aid was not timely at all, taking more than two months.

Figure 10: Timeliness of Food Vouchers from Beneficiaries Perspective in Kabul



It should be kept in mind that REALs project addressed chronic humanitarian situations, and came at the end of the winter, a lean period of relatively lower income and a greater expenditure on winter goods. in the context of chronic humanitarian situation.

Meaningful access to humanitarian aid

As shown in Table – 24 below, 96.4% of beneficiaries expressed satisfaction (mostly or completely) with the project services⁵³.

⁵³ This survey question was framed as “Are you satisfied with the assistance provided?” Although the question did not clearly specify which aspects they were satisfied or not satisfied with, it was asked in the context of inquiring into manners in which aid was provided.

Asked whether they were aware of households in need of food vouchers who were excluded from the humanitarian assistance, 69.1% (38 out of 55) confirmed so. This is consistent with the above finding in 4.1.5 that non-beneficiaries in the target areas were more severely affected than beneficiaries. Among the reported eligible households that were not considered for food vouchers, 60.5% were identified as female-headed households, 29% were households where the head had a chronic illness, and 11% were households with chronically ill or disabled members. This finding suggests that the existing selection criteria might not have been adequate in distinguishing the most vulnerable among vulnerable households.

Table 24: Satisfaction of Beneficiary Households and Access to Food Vouchers in Kabul

Satisfaction of Beneficiary Households						
Satisfied with the assistance/service provided		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
	N	2	42	11	0	55
	%	3.6%	76.4%	20%	0%	100%
Accessing Humanitarian Aid						
Know of people needing assistance who were excluded from the assistance/service provided		Not at all	Not really	Yes a few	Yes a lot	Total
	N	3	14	27	11	55
	%	5.5%	25.5%	49.1%	20%	100%

Safety and dignity

As presented in Table – 25 below, 92.7% of the beneficiaries felt safe (completely or mostly) in receiving the humanitarian aid, and 7.3% did not know.

Similarly, 96.4% reported being treated with respect (completely or mostly) by the project staff during household selection and aid distribution process. Only 3.6% of the respondents responded “Don't know”.

Table 25: Safety and Dignity in Accessing Humanitarian Aid in Kabul

Safety and dignity of beneficiaries		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
Felt safe at all times travelling to receive the assistance (to/from home)	N	4	37	14	0	55
	%	7.3%	67.3%	25.5%	0%	100%
Treated with respect by project staff during household selection and providing assistance	N	2	36	17	0	55
	%	3.6%	65.5%	30.9%	0%	100%

Accountability (Suggestions and Complaints)

REALs/Zamir Foundation established a feedback mechanism whereby affected communities could channel their suggestions or complaints regarding project activities via telephone and an online form, and informed beneficiaries of how to provide feedback and lodge complaints. As shown in Table – 26, only 9.1% of beneficiaries (3.6% completely and 5.5% mostly) confirmed the availability and functionality of the feedback mechanism, while a significant majority (61.8%) reported the absence of such a system, and 29.1% were unsure. This is a large disparity from REALs' PDM result that reported 89% awareness of the feedback mechanism among beneficiaries.

Importantly, CHS uphold that accountability mechanisms should be made open and accessible to affected people and their communities, not just for project beneficiaries. Neither this survey nor REALs' PDM report looked at awareness or use of the feedback mechanism by non-beneficiaries, however.

The survey missed to ask how many respondents out of the sampled beneficiaries actually raised feedback or complaints. Nonetheless, 25 out of 55 sampled beneficiaries indicated that their submissions had not been followed up or addressed. There were only 5 cases where the complaints or suggestions were addressed by the project team.

Table 26: Complaints and Feedback Mechanism in Kabul

Accountability to affected households		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
Suggestion for, or a problem with the project services could be channelled	N	16	2	3	34	55
	%	29.1%	3.6%	5.5%	61.8%	100%
Suggestions or complaints raised have been responded to or followed up by the project team	N	25	2	3	25	55

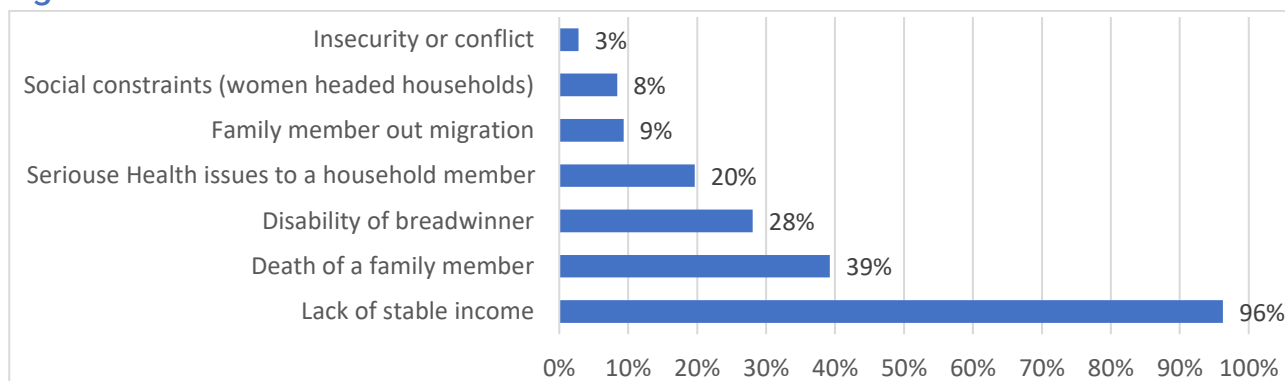
4.1.9 Future prospects

The Phase 1 of this assessment provided valuable insights into the primary causes of critical food insecurity, such as loss of income or unstable livelihoods, serious health issues, disabilities and death affecting household members. The Phase 2 looked at the extent to which these causes continued to be perceived as future fears/risks, and what adaptive measures they hoped to take at the household level in the future—such as diversifying livelihood sources, securing stable income, maintaining savings, and acquiring vocational training or employable skills.

Fear for the future

As presented in Figure – 11 below, households in Kabul have expressed several fears about the future. The overwhelming concern for the future was the lack of stable income, with 96% of households highlighting this as their primary fear. Death of a family member was also a significant worry for 39% of households. Disability of the breadwinner posed a concern for 28%, while 20% feared serious health issues affecting a household member, and only, 3% of households feared insecurity or conflict. These findings align closely with the major shocks that have disrupted households' livelihoods, as detailed in Section 3.1.2. This implies that affected households continue to perceive themselves as vulnerable to the same shocks that they had experienced.

Figure 11: Fears for the Future in Kabul

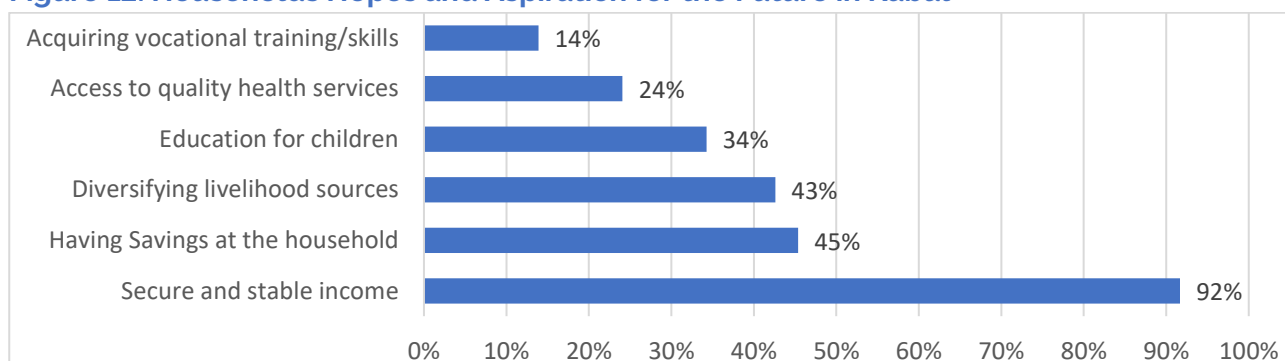


Hopes and aspirations for the future

As presented in Figure – 12 below, an overwhelming priority was to secure a stable income, identified by 92% of households, underscoring the critical role of economic stability in mitigating vulnerabilities. This was followed by aspirations for financial security, with 45% of households emphasising the importance of having savings to buffer against future crises. Diversifying livelihood sources, cited by 43% of households, points to a proactive approach toward reducing reliance on a single income stream and strengthening economic resilience. Education for children (34%) and access to quality health services (24%) were recognized as important in the long run, although they were subjected to cost cutting measures in the immediate aftermath of shocks. On the other hand, only 14% of households aspired to acquire vocational or professional training, prioritising skill-building efforts that could enhance employability and income-generating potential.

Overall, these hopes signify an acknowledgment of the need for adaptive measures at the household level to improve preparedness and resilience against future shocks, while also identifying areas where external support can further empower households in achieving these aspirations.

Figure 12: Households Hopes and Aspiration for the Future in Kabul



4.2 Nangarhar Province

The findings for Nangarhar Province relate to PWJ/YVO project in Pachir Wa Agam District under the Emergency Food Assistance program, and AAR Japan project in Jalalabad and SVA project in Surkhroad District under the Returnees Response program.

4.2.1 Locally defined vulnerable households

This study sought to locally define vulnerability in the respective humanitarian contexts addressed by the JPF-funded projects.

Most vulnerable households to food insecurity: Households with severely compromised food security between March to October 2023, i.e. the duration of PWJ/YVO project.

Most vulnerable returnee households from Pakistan: Households repatriated since October 2023 and have been re-settled in AAR and SVA project areas.

Most vulnerable host community households: Households in AAR and SVA projects areas whose communities have hosted returnees from Pakistan since October 2023.⁵⁴

The following categories of households were identified as the most vulnerable:

Table 27: Categories of the Most Vulnerable Households in Nangarhar

Characteristics of the most vulnerable households	Description
Common characteristics to food insecure, returnee and host community households	
1. Female headed households	FGD participants with this specification reported frequent occasions of starvation due to a lack of food, reporting less livelihood opportunities for women in the current situation.
2. Households whose head has disability and no breadwinner	FGD participants with this specification reported frequent occasions of starvation due to a lack of food and selling household assets, reporting less livelihood opportunities for PwDs without another breadwinner in the household.
3. Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	FGD participants with this specification reported frequent occasions of starvation due to a lack of food and selling household assets, reporting the need for both food and/or essential household items along with the treatment/medication cost with no livelihood opportunity for elderly or chronically ill person and without any other breadwinner in the household.
4. Households with more than 8 family member and one bread earner (dependency ratio of 1:7 or more)	According to FGD participants, large families with a high dependency ratio and only one source of income struggled to meet their basic food needs. The financial burden on the sole breadwinner was immense, making it difficult to ensure adequate food for all members.
5. Households having chronically ill person(s) or person(s) with disability (people with special needs)	These households faced additional economic pressures due to medical expenses. The presence of chronic illness or disability reduced the household's overall earning potential, exacerbating food insecurity.

⁵⁴ Host communities were not targeted either by AAR or SVA projects but were sampled as non-beneficiaries in this assessment.

6. Households without any source of livelihood and income generating assets (land, livestock and others)	Referred to household without any livelihood or source of income or income generating assets. This included those without any farming land or livestock from which they could have some constant income.
7. Child headed households	FGD participants with this specification reported frequent occasions of starvation due to a lack of food, reporting less livelihood opportunities
Characteristics unique to food insecure households	
1. Returnees from Iran and Pakistan	Referred to those returnees who could not settle, lacked social support and livelihood.
2. Households whose head is addicted and don't have another breadwinner.	FGD participants with this specification reported frequent occasions of starvation due to a lack of food and selling household assets.
Common characteristics to returnee and host community households	
1. Households relying on community or neighbours' support, Zakat, or begging	Households relying on community and/or neighbours' support often did not get enough support to meet their end needs.
Characteristics unique to returnee households	
2. Split Households/families (half repatriated and half still in Pakistan).	Split repatriated households were identified as most vulnerable as (in most cases) the breadwinner was either detained or not repatriated.
Characteristics unique to host community households	
2. Households with child labour	Families with child labour to supplement their income faced significant challenges in meeting their basic food needs.

The three JPF-funded projects used the following criteria for beneficiary selection respectively.

Table 28: Selection Vulnerability Criteria Adopted by JPF-Funded Projects in Nangarhar

Jalalabad City Returnees (AAR)	Surkhroad District Returnees (SVA)
<ol style="list-style-type: none"> 1. Elder Person as head of the household 2. Women as head of the household without adult male. 3. Child as head of the households without adult male. 4. Household with more than 3 children under the age of five 5. Widow woman in the household 6. Lactating woman in the household 7. Pregnant woman in the household 8. Person with chronic illness in the household 9. Person with disability in the household 	<ol style="list-style-type: none"> 1. New returnees from Pakistan in Surkhroad district (those returned since Oct 2023), holding IOM and WFP registration card. 2. Female-headed households 3. Households with malnourished children 4. Households with many vulnerable groups (orphans, elderly, people with disabilities, etc.) 5. Households with many children 6. Other households that have been identified as a high priority for assistance by the community and the SVA local staff.
Pachir Wa Agam District (PWJ/YVO using WFP Targeting and Vulnerability Criteria)	
<ol style="list-style-type: none"> 1. Women or child headed household without adult male. 	

-
2. Households with dependency ratio of 9 or more.
 3. Households with no adult male of working age or adult working women
 4. Person with disability as headed household
 5. Households with no (or little) assets or income
 6. Households that live with other households or have other family members living with them.
 7. Households living in temporary accommodation such as tents or temporary shelters.
 8. Households relying only on borrowing, begging or zakat.
 9. Households relying on casual labour by one family member
 10. Households without any source of livelihood or income generating activities
 11. Households with one or more members having disability or chronic illness, excluding head of the household
 12. Households recommended for assistance by agencies specialising in protection.
-

While PWJ/YVO project in Pachir Wa Agam adopted the WFP targeting and vulnerability criteria, this assessment could not find any rationale for the selection criteria for returnee households in AAR and SVA projects. Interestingly, AAR and SVA used a different set of the selection/vulnerability criteria in identifying the most vulnerable among returnee households.

On the one hand, PWJ/YVO criteria largely coincide with the locally defined characteristics of vulnerability, except for households whose head is addicted. The project also targeted households recommended for assistance by agencies specialising in protection, a characteristic not identified by local stakeholders.

On the other hand, some of the AAR and SVA criteria lack specificity and may fail to effectively target households critically in need of immediate assistance. Non-vulnerable households could also be eligible for assistance in accordance with AAR criteria such as households with more than 3 children under the age of five, a lactating or pregnant woman. It was unclear if such criteria were applied independently of other more distinguishing criteria or in conjunction with other vulnerability criteria. Some of SVA criteria involves arbitrary interpretations in their application. It is unclear how SVA distinguished vulnerable from non-vulnerable households, based on such criteria as households with "many vulnerable groups (orphans, elderly, people with disabilities, etc.)", households with "many" children, or households that have been "identified as a high priority for assistance by the community and the SVA local staff". It was also unclear how SVA measured malnutrition in children, of what age, in applying the criteria "households with malnourished children".

4.2.2 Socio-demographic profile of surveyed households

Overall, 90% of the respondents in Nangarhar were head of the households (91% returnees, 98% food insecure, and 82% host community households). Out of the total sample of 303 respondents, 36% were female. With the median age of 44.5 years (46.8 food insecure, 38.9 returnees, and 48.8 host community), majority (39%) of the respondents were aged 50 to 65 year, followed by 25% aged more than 65 years. A significant majority (91%) of the respondents never attended school.

An average household size was 8.4 member per household (8.4 food insecure, 7.9 returnees, and 8.9 host community households). Close to half (48%) of the household had more than 8 members, followed by 39% with 6 to 8 members. 42% of households had one or more members with disabilities, and 25% of households had heads of the household with disabilities. 72% of households had one or more household members with chronic illness, and 40% of households had heads of the household with chronic illness.

Finally, 27% of households had no family member with income at the time of the survey (the highest being sampled households in Pachir Wa Agam at 71%). 72% had only one family member with income, and 1% had more than one family member with income.

Table 29: Socio-demographic Profile of Households Surveyed in Nangarhar

Respondents' Demographics			Jalalabad		Surkhroad		Pachir Wa Agam		TOTAL
			Returnee	Host Com'ty	Returnee	Host Com'ty	Not Beneficiary	Beneficiary	
Respondents' gender	Female	N	9	26	12	28	24	9	108
		%	17%	50%	23%	54%	50%	20%	36%
	Male	N	45	26	40	24	24	36	195
		%	83%	50%	77%	46%	50%	80%	64%
Respondents' age categories	18 to 25 Years	N	6	2	3	2	0	6	19
		%	11%	4%	6%	4%	0.0%	13.3%	6%
	26 to 35 Years	N	16	12	19	11	4	7	69
		%	30%	23%	37%	22%	8.3%	15.6%	23%
	36 to 49 Years	N	23	18	21	18	19	20	119
		%	43%	35%	40%	36%	39.6%	44.4%	39%
	50 to 65 Years	N	6	16	8	18	17	10	75
		%	11%	31%	15%	36%	35.4%	22.2%	25%
	More than 65 Years	N	3	4	1	1	8	2	19
		%	6%	8%	2%	2%	16.7%	4.4%	6%
Respondents' status in this household	Single Parent	N	5	4	7	14	2	7	39
		%	9%	8%	13%	27%	4.2%	15.6%	13%
	Son or Daughter	N	6	2	2	3	0	4	17
		%	11%	4%	4%	6%	0.0%	8.9%	6%
	Wife or Husband	N	43	46	43	35	46	34	247
		%	80%	88%	83%	67%	95.8%	75.6%	82%
Respondents' level of education	Never Attended School	N	44	48	49	47	45	42	275
		%	81%	92%	94%	90%	94%	93%	91%
	Primary School	N	3	2	0	0	0	0	5
		%	6%	4%	0%	0%	0%	0%	2%
	Religious Education	N	1	2	0	1	2	0	6
		%	2%	4%	0%	2%	4%	0%	2%
	Secondary School	N	3	0	3	4	1	2	13
		%	6%	0%	6%	8%	2%	4%	4%
	High School	N	1	0	0	0	0	1	2
		%	2%	0%	0%	0%	0%	2%	1%
	University	N	2	0	0	0	0	0	2
		%	4%	0%	0%	0%	0%	0%	1%
Respondents' Household Size	5 or Less Members	N	14	6	13	10	6	7	56
		%	26%	12%	25%	19%	13%	16%	18%
	6 to 8 Members	N	19	16	23	17	28	16	119
		%	35%	31%	44%	33%	58%	26%	39%
		N	21	30	16	25	14	22	128

	More than 8 Members	%	39%	57%	31%	48%	29%	49%	43%
Persons with Disability at the Household	Households having member(s) with disability	N	15	25	11	20	26	29	126
		%	28%	48%	21%	38%	54%	64%	42%
	Households with the head of the household with disability	N	6	24	3	16	12	16	77
		%	11%	46%	6%	31%	25%	36%	25%
Persons with Chronic Illness at the Household	Households having member(s) with chronic illness	N	49	23	41	41	20	43	217
		%	91%	44%	79%	79%	42%	96%	72%
	Households with the head of the household with chronic illness	N	24	15	26	30	7	18	120
		%	44%	29%	50%	58%	15%	40%	40%
Number of Household Members with Income	No family member with income	N	23	6	7	8	6	32	82
		%	43%	12%	13%	16%	13%	71%	27%
	One family member with income	N	31	46	43	42	42	13	217
		%	57%	88%	83%	82%	88%	29%	72%
	More than one family member with income	N	0	0	2	1	0	0	3
		%	0%	0%	4%	2%	0%	0%	1%
Total Sample			54	52	52	52	48	45	303

4.2.3 Categories of most vulnerable households in Nangarhar

Overall, as presented in Table – 30 below, 62% of the surveyed households in Nangarhar were identified with single vulnerability, 34% of households experienced two simultaneous vulnerabilities, while 4% face three vulnerabilities. Returnee households had the highest ratio exhibiting multiple categories of vulnerabilities (50%), compared with food insecure (27%) or host community (36%) households. Although breakdown is not available, 20% of these returnees seem to lack livelihood or income generating assets from the data in 4.2.4⁵⁵.

Among those with single category of vulnerability, households with a disabled head and those with an elderly or chronically ill head without another breadwinner constituted 15% each. Female-headed households and households with chronically ill or disabled members accounted for 10% each, and large households with a high dependency ratio was 7%.

Among food-insecure households in Pachir Wa Agam, households whose heads have disability (19%), or chronic illness (18%) were most common, followed by female-headed households and households with a dependency ratio of 1:8 (15% respectively). Similarly, host community households exhibiting a single category of vulnerability mainly consisted of households whose head has disability (23%) or chronic illness (17%), and female-headed households (12%). Only a handful of households in host communities were without any source of livelihood or productive assets (5%), with child labour (4%), with members who have chronic illness or disability (3%), and with more than 8 dependents (1%) On the other hand, a vulnerability profile of returnee households was distinct, composed of households whose members have chronic illness or disability (20%), followed by households whose head is chronically ill or elderly (9%), households without income or income generating assets, and those with an over 1:8

⁵⁵ It is reported that 27% of returnees had no income at all. Among the returnees exhibiting single vulnerability category, households without any source of livelihood and income generating assets account for 7%, leaving the remaining 20% supposedly included in those with multiple categories.

dependency ratio (7% each). Female-headed households (4%) and households whose head has disability (3%), or split households (1%) were small to negligible among returnee respondents.

Table 30: Most Vulnerable Households with Single, Double and Triple Vulnerabilities in Nangahar

Vulnerability Categories	Food insecure		Returnees		Host Community		Total	
	N	%	N	%	N	%	N	%
Common characteristics to food insecure, returnee and host community households								
1. Female headed households	14	15%	4	4%	12	12%	30	10%
2. Households whose head has disability	18	19%	3	3%	24	23%	45	15%
3. Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	17	18%	10	9%	18	17%	45	15%
4. Households with more than 8 family member and one bread earner	14	15%	7	7%	1	1%	22	7%
5. Households having chronically ill person(s) or person(s) with disability (people with special needs)	5	5%	21	20%	3	3%	29	10%
6. Households without any source of livelihood and income generating assets	0	0%	7	7%	5	5%	12	4%
7. Child headed households	0	0%	0	0%	0	0%	0	0%
Characteristics unique to food insecure households								
1. Returnees from Iran and Pakistan	0	0%	NA	NA	NA	NA	NA	NA
2. Households whose head is addicted and don't have another breadwinner.	0	0%	NA	NA	NA	NA	NA	NA
Common characteristics to returnee and host community households								
1. Households relying on community or neighbours' support, Zakat, or begging	NA	NA	0	0%	0	0%	0	0%
Characteristics unique to returnee households								
2. Split Households/families (half repatriated and half still in Pakistan).	NA	NA	1	1%	NA	NA	1	0%
Characteristics unique to host community households								
2. Households with child labour	NA	NA	NA	NA	4	4%	4	1%
Multiple characteristics of vulnerability								
Two Vulnerabilities	25	27%	43	41%	34	33%	102	34%
Three Vulnerabilities	NA	NA	10	9%	3	3%	13	4%
Total	93	100%	106	100%	104	100%	303	100%

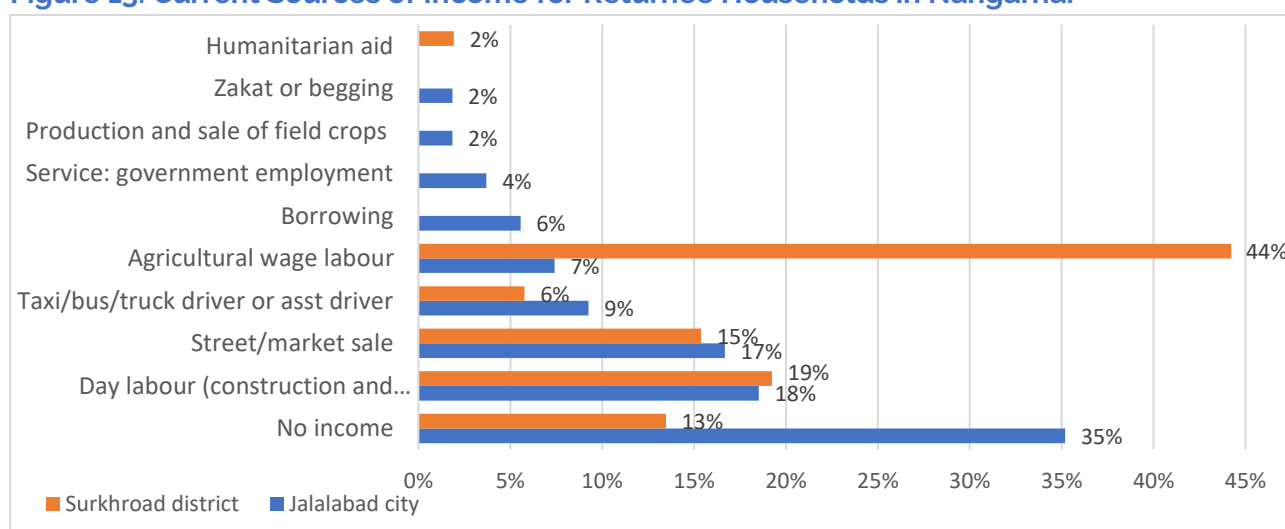
4.2.4 Current livelihood cycle

Current sources of income for returnee households

At the time of the household survey, 27% of returnees reported having no income at all. A higher proportion of households (35%) in Jalalabad city reported having no income compared to Surkhroad district (13%). Among 73% of returnee households with livelihoods, their sources of income varied between Jalalabad city and Surkhroad district. As presented in Figure – 13

below, agricultural wage labour dominated in Surkhroad (44%), whereas this was a less common income source in Jalalabad (7%). Instead, day labour, including construction work and other similar tasks, and street/market sales were equally important sources of income in Jalalabad city. Day labour and street/market sales constitute primary income sources for 18% and 17% of households in Jalalabad, and for 19% and 15% of households in Surkhroad respectively. Taxi/bus/truck driving was more prominent in Jalalabad city (9%) than in Surkhroad (6%). Humanitarian aid featured as primary source of income only in Surkhroad (2%), while a wider range of other income sources were reported in Jalalabad, such as borrowing (6%), government employment (4%), production and sale of field crops (2%), and Zakat or begging (2%).

Figure 13: Current Sources of Income for Returnee Households in Nangarhar



Households characterized by multiple categories of vulnerabilities were more likely to have no income. 33% and 60% lacked livelihoods among those households with two categories and three categories of vulnerability respectively.

The livelihood sources seemed to vary by different categories of vulnerable households. Although the denominators are too small to make a conclusive remark, female-headed households also seemed to struggle to earn income, and a relatively larger portion of the households with chronically ill or disabled members engaged in agriculture wage labour.

Table 31: Source of Income among Different Most Vulnerable Returnees Households

Most vulnerable households		Agri - wage labour	Day labour	No income	Street/ market sale	Driving Jobs	Others	Total
Female-headed households	N	1	0	3	0	0	0	4
	%	25%	0%	75%	0%	0%	0%	100%
Households whose head has disability	N	0	1	1	0	0	1	3
	%	0%	33%	33%	0%	0%	33%	100%
Household head with chronic illness or elderly (more than 65) and no other breadwinner	N	2	1	1	4	1	1	10
	%	20%	10%	10%	40%	10%	10%	100%
Split Households/families (half repatriated and half still in Pakistan).	N	0	1	0	0	0	0	1
	%	0%	100%	0%	0%	0%	0%	100%
Households with more than 8 family member and one bread earner	N	0	6	0	0	1	0	7
	%	0%	86%	0%	0%	14%	0%	100%

Households having chronically ill person(s) or person(s) with disability	N	9	3	2	4	3	0	21
	%	43%	14%	10%	19%	14%	0%	100%
Households without any source of livelihood and income generating assets	N	2	2	2	1	0	0	7
	%	29%	29%	29%	14%	0%	0%	100%
Two Vulnerabilities	N	9	6	14	8	3	3	43
	%	21%	14%	33%	19%	7%	7%	100%
Three Vulnerabilities	N	4	0	6	0	0	0	10
	%	40%	0%	60%	0%	0%	0%	100%
Total	N	27	20	29	17	8	5	106
	%	25%	19%	27%	16%	8%	5%	100%

Respondents reported varying levels of household income across different seasons of the year. A significant 68% of the respondents experienced low-income levels during winter. In autumn, 32% of the respondents reported low-income levels.

Current sources of income for host community households

Among the host community households, those without income were significantly lower at 10% as compared with returnee households at 27%. Interestingly, 17% of respondents in Surkhroad reported having no income compared to 2% in Jalalabad, reversing the pattern observed among returnee households where urban households lacked income more than rural households.

The types of primary income sources were similar between returnees and host communities. As presented in Table – 32 below, the primary source of income for host community households in Jalalabad City, were day labour (37%), street or market sales (25%) and driving (25%). In Surkhroad, host community households relied predominantly on agricultural wage labour (50%), followed by day labour (17%), and street/market sales (12%).

Table 32: Current Sources of Income for Host Community Households in Nangarhar

Sources of Livelihoods		Jalalabad City	Surkhroad	Total
Agricultural wage labour	N	2	26	28
	%	4%	50%	27%
Day labour (construction and other)	N	19	9	28
	%	37%	17%	27%
Handicraft work (carpet weaving, embroidery and others)	N	1	0	1
	%	2%	0%	1%
No income	N	1	9	10
	%	2%	17%	10%
Remittances	N	1	1	2
	%	2%	2%	2%
Street/market sale	N	13	6	19
	%	25%	12%	18%
Taxi/bus/truck driver or assistant driver	N	13	1	14
	%	25%	2%	13%
Zakat or begging	N	2	0	2
	%	4%	0%	2%
Total	N	52	52	104
	%	100%	100%	100%

Current source of income for food insecure households in Pachir Wa Agam District

Overall, 30% of the households in Pachir Wa Agam district (28% beneficiary and 33% non-beneficiary) primarily relied on agricultural wage labour as a source of their income. Day labour accounted for 16% of income sources (7% beneficiary and 25% non-beneficiary), while another 16% relied on Zakat or begging (22% beneficiary and 10% non-beneficiary). Moreover, a significant portion (20%) reported having no income (40% beneficiary and 2% non-beneficiary). The breakdown by beneficiaries and non-beneficiaries underscores disproportionately more beneficiaries are without income, and dependent on begging, than non-beneficiaries.

When disaggregated by categories of vulnerability, female-headed households primarily relied on Zakat or community support (33%) for their income. Agriculture wage labour was the primary source of income for households whose head had chronic illness (44%), households with more than 8 members and one breadwinner (37%), and households whose head had disability (30%).

4.2.5 Current Household Expenditure

Current expenditure for returnee households

As presented in Table – 33 below, food items were the top priority in the current expenditure for returnee households, ranked the first by 79.6% of households in Jalalabad city and 92.3% in Surkhroad district, and among the top 3 priorities by all the respondents. Shelter and housing expenses, including rent payments, ranked the second in importance as a whole, rated as the first by 20.4% and 5.8%, as the second by 31.5% and 46.2% and the third by 7.4% and 19.2% in Jalalabad and Surkhroad respectively. The patterns diverged between the two areas in terms of prioritization of the other items, however. In Jalalabad, on the one hand, clothing (casual/daily wear) came the next in priority, 35.2% rating as the second and 5.6% as the third, far above home heating materials (3.7% rating 2nd and 9.3% rating as 3rd), health care (1.9% rating 2nd and 9.3% 3rd), clothing (warm clothes for winter) (1.9% rating 2nd and 3.7% as 3rd), and household utilities (2% rating as 2nd). In Surkhroad, on the other hand, clothing (casual/daily wear) was rated as 2nd and 3rd priorities by 34.6% and 28.8% respectively, while clothing (warm clothes for winter) was prioritized by 1.9% as 1st, 3.8% as 2nd and 7.7% as 3rd. This was followed by house repairs (including windows glazing and plastic cover) that ranked 2nd for 7.7% and 3rd for 19.2%, house utilities that ranked 2nd for 4% 3rd for 3.8%, household materials (blanket, mattress, carpet and others) that ranked 2nd for 2% and 3rd for 3.8%. Home heating materials and health care were only cited as 3rd priorities by 7.7% and 5.8% in Surkhroad.

Table 33: Priorities in the Current Household Expenditure for Returnee Households

Categories of main item or service your household currently spends money on		First Item/Services for Expenses		Second Item/Services for Expenses		Third Item/Services for Expenses	
		Jalalabad city	Surkhroad district	Jalalabad city	Surkhroad district	Jalalabad city	Surkhroad district
Food items	N	43	48	10	4	1	0
	%	79.6%	92.3%	18.5%	7.7%	1.9%	0%
Shelter/housing (including rent payment)	N	11	3	17	24	4	10
	%	20.4%	5.8%	31.5%	46.2%	7.4%	19.2%
Clothing (warm clothes for winter)	N	0	1	1	2	2	4
	%	0.0%	1.9%	1.9%	3.8%	3.7%	7.7%
House repair (including windows glazing or plastic cover)	N	0	6	0	4	0	10
	%	0%	0%	0.0%	7.7%	0.0%	19.2%
Clothing (casual/daily wearing)	N	1	3	19	18	3	15

	%	0%	0%	35.2%	34.6%	5.6%	28.8%
Home heating (material to warm room in winter)	N	0	0	2	0	5	4
	%	0%	0%	3.7%	0.0%	9.3%	7.7%
Healthcare and medicine	N	0	0	1	0	5	3
	%	0%	0%	1.9%	0.0%	9.3%	5.8%
Household utilities (stove, dishes, cooker and others)	N	0	0	1	2	0	2
	%	0%	0%	2%	4%	0.0%	3.8%
Household materials (blanket, mattress, carpet and others)	N	0	0	0	1	0	2
	%	0%	0%	0%	2%	0%	3.8%

Current expenditure for host community households

Similarly, food items were the first priority among 98% of the host community households both in Jalalabad and Surkhroad. Shelter and housing expenses were not given as high a priority by host community households as were by returnee households, however. In Jalalabad, home heating materials were prioritized by 71% (2nd by 48%, 3rd by 23%), and health care costs by 71% (2nd by 21%, 3rd by 50%). Some households in Jalalabad indicated that they had no other expenditure other than the first one (12%) or after the second one (21%). In Surkhroad, housing/dwelling expenses were 2nd or 3rd priority for 33% (2nd for 23%, 3rd for 10%). Casual clothing and warm winter clothes were reported as 2nd main expenses by 29% and 25% respectively in Surkhroad. House repair, sanitation and home heating materials were 3rd priorities for 21%, 19% and 10% respectively. 13% of households in Surkhroad reported not having any third expenses, other than the first and second expenses. Both in Jalalabad and Surkhroad, host community households seemed to have fewer types of expenses than returnee households.

Current expenditure for food insecure households in Pachir Wa Agam District

As presented in Table – 34 below, food items were identified as the first priority by 100% of respondents. The second significant expenses were healthcare/medicine for 45% (ranked 2nd for 22% and 3rd for 23%), followed by home heating material for 33% (ranked 2nd for 25% and 3rd for 8%), sanitation facilities for 25% (ranked 2nd for 19% and 3rd for 6%) and casual clothing for 12% (ranked 2nd for 11% and 3rd for 1%). A large portion of respondents did not indicate 2nd or 3rd priorities (18% and 59% respectively) in their spending.

Table 34: Priorities in the Current Household Expenditure for Food Insecure Households in Pachir Wa Agam District

Current Expend	First Expenses		Second Expenses		Third Expenses	
	N	%	N	%	N	%
Food items	93	100%	0	0%	0	0%
Heating materials (heating material to cope with cold like wood and others)	0	0%	23	25%	7	8%
Healthcare and medicine	0	0%	20	22%	21	23%
Sanitation facilities	0	0%	18	19%	6	6%
Clothing (casual/daily wearing)	0	0%	10	11%	1	1%
Clothing (warm clothes for winter)	0	0%	3	3%	1	1%
House repair (including windows glazing or plastic cover)	0	0%	1	1%	1	1%
Shelter/housing (including rent payment)	0	0%	1	1%	0	0%

Household materials (blanket, mattress, carpet and others)	0	0%	0	0%	1	1%
No response			17	18%	55	59%
Total	93	100%	93	100%	93	100%

A pattern of prioritization of expenditure differed by categories of vulnerability. Female-headed households (28%), households headed by a chronically ill or elderly person (37%) and those headed by disabled persons (35%) prioritized healthcare and medicine as the second important expenses, while home heating materials were the second priority for the remaining categories of vulnerable households in Pachir Wa Agam, such as Households with a dependency ratio of 1:8 and households having chronically ill person(s) or person(s) with disability. Home heating materials were also identified as the 3rd priority by 22% of households headed by a chronically ill or elderly person, while sanitation facilities were prioritized 3rd by 22% of female headed households.

4.2.6 Current Unmet Household Needs in Nangarhar

Current unmet needs for returnee households

As presented in Table – 35 below, shelter and housing were identified as the most urgent unmet need by 50% of respondents in Jalalabad city and 52% in Surkhroad district at the time of the survey. Food needs ranked the second, prioritized by 43% in Jalalabad and 19% in Surkhroad.

A comparison of unmet needs between Jalalabad and Surkhroad revealed notable differences in priorities. Shelter and housing emerged as the top need among half the respondents in both locations, with 42% in Jalalabad also indicating it as their second (22%) or third (20%) unmet need relative to 25% in Surkhroad (17% as second and 8% as third). Food was identified as unmet need by 78% in Jalalabad (43% as their first and 35% as second priority need), as compared to 25% in Surkhroad (19%, 4%, and 2% as the first, second and third unmet need respectively). Additionally, home heating materials featured more prominently as second or third unmet need in Jalalabad (49%) than in Surkhroad (34%). On the other hand, winter clothing and house repairs were more prominent unmet needs in Surkhroad (41% and 46%) compared to Jalalabad (28% and 7% respectively). On balance, respondents in Jalalabad reported priority needs, such as food and shelter, unmet to a greater extent than in Surkhroad, although those were prioritized expenditure.

Table 35: Current Unmet Needs for Returnee Households in Nangarhar

Types of currently unmet needs		First Unmet Need		Second Unmet Need		Third Unmet Need	
		Jalalabad city	Surkhroad district	Jalalabad city	Surkhroad district	Jalalabad city	Surkhroad district
Shelter/housing (including rent payment)	N	27	27	12	9	11	4
	%	50%	52%	22%	17%	20%	8%
Food items	N	23	10	19	2	0	1
	%	43%	19%	35%	4%	0%	2%
Clothing (warm clothes for winter)	N	3	6	5	15	7	8
	%	6%	11.5%	9%	29%	13%	15%
	N	0	6	0	8	4	10

House repair (including windows glazing or plastic cover)	%	0%	11.5%	0%	15%	7%	19%
Clothing (casual/daily wearing)	N	1	3	4	4	4	6
	%	2%	6%	7%	8%	7%	12%
Home heating (material to warm room in winter)	N	0	0	10	9	16	9
	%	0%	0%	19%	17%	30%	17%
Healthcare and medicine	N	0	0	1	1	2	5
	%	0%	0%	2%	2%	4%	10%
Household utilities (stove, dishes, cooker and others)	N	0	0	1	2	4	0
	%	0%	0%	2%	4%	7%	0%
Sanitation facilities	N	0	0	2	0	1	3
	%	0%	0%	4%	0%	2%	6%
Household materials (blanket, mattress, carpet and others)	N	0	0	0	1	4	3
	%	0%	0%	0%	2%	7%	6%
No response	N	0	0	0	1	1	3
	%	0%	0%	0%	2%	2%	6%
Total	N	54	52	54	52	54	49
	%	100%	100%	100%	100%	100%	100%

Current unmet needs for host community households

Unmet needs for host community households in Jalalabad showed a distinct pattern from those of returnee households, while unmet needs reported in Surkhroad were similar for returnee and host community households.

In Jalalabad, overwhelming majority of host community households reported food as their first or second unmet need (90% and 6%), over housing and shelter (6% as the 1st unmet need), which took precedence for returnee households. Other priority unmet needs for host community households included home heating materials reported by 63% (44% ranking 2nd and 19% 3rd), healthcare and medicine by 58% (4% ranking 1st, 19% 2nd, and 35% 3rd), and warm clothing by 21% (19% ranking 2nd and 12% 3rd).

In Surkhroad, 37% of households did not respond to the question on unmet needs. Of those who responded⁵⁶, food, shelter and housing, warm winter clothing, and home heating materials featured prominently among priority unmet needs. Unlike Jalalabad, healthcare and medicine were not cited as a priority unmet need in Surkhroad.

Current unmet needs for food insecure households in Pachir Wa Agam District

As presented in Table – 36 below, the most pressing unmet need was food items, prioritized by 91% of households (87% beneficiary and 96% non-beneficiary). Among beneficiary households, heating materials for winter were prioritized by 66% (4% as the 1st, 24% as the 2nd, and 33% as the 3rd unmet need), warm clothing for winter by 53% (4% as the 1st, 40% as the 2nd and 9% as the 3rd unmet need), and house repair by 40% (13% as the 2nd and 27% as the 3rd unmet need). Among non-beneficiary, heating materials for winter were prioritized by 79% (2% as the 1st, 46% as the 2nd and 31% as the 3rd unmet need), healthcare and medicine by 58% (2% as the 1st, 21% as the 2nd and 35% as the 3rd unmet need), and warm clothing for winter by 35% (29% as the 2nd and 6% as the 3rd unmet need).

⁵⁶ The data reported by TKH on Surkhroad were not coherent, a sum of the breakdown not adding up to 100%. Here only the main unmet needs are noted.

Table 36: Current Unmet Needs for Food Insecure Households in Pachir Wa Agam District

Categories of Basic Needs Currently Unmet		First Unmet Need		Second Unmet Need		Third Unmet Need	
		Non-beneficiary	Beneficiary	Non-beneficiary	Beneficiary	Non-beneficiary	Beneficiary
Food items	N	46	39	0	2	2	0
	%	96%	87%	0%	4%	4%	0%
Heating materials (heating material to cope with cold like wood and others)	N	1	2	22	11	15	15
	%	2%	4%	46%	24%	31%	33%
Clothing (warm clothes for winter)	N	0	2	14	18	3	4
	%	0%	4%	29%	40%	6%	9%
Housing/Dwelling related expenses	N	0	2	0	4	1	1
	%	0%	4%	0%	9%	2%	2%
Healthcare and medicine	N	1	0	10	1	17	4
	%	2%	0%	21%	2%	35%	9%
House repair (including windows glazing or plastic cover)	N	0	0	0	6	5	12
	%	0%	0%	0%	13%	10%	27%
Clothing (casual/daily wearing)	N	0	0	2	3	0	2
	%	0%	0%	4%	7%	0%	4%
Sanitation facilities	N	0	0	0	0	2	2
	%	0%	0%	0%	0%	4%	4%
Household utilities (stove, dishes, cooker and others)	N	0	0	0	0	2	1
	%	0%	0%	0%	0%	4%	2%
Total		48	45	48	45	48	45

4.2.7 Shocks to Livelihoods

Impact of repatriation on returnees' livelihoods

In a scale of 4 (1. No effect, 2. Slightly affected, 3. Moderately affected and 4. Severely affected), 44.3% of returnee households reported that their ability to meet basic needs had been 4. severely affected in the aftermath of repatriation. Another 44.3% reported that they had been 3. moderately affected, having struggled to meet most of their basic needs. Only 11.3% of households described themselves as having been 2. slightly affected, able to meet some needs.

As presented in Table – 37 below, the impact of the repatriation varied between Jalalabad city and Surkhroad district, with the former more severely affected than the latter. Among returnee households in Jalalabad city (assisted by AAR), a significant 64.8% reported having been severely affected, and 35.2% moderately affected. In Surkhroad District (assisted by SVA), on the other hand, the survey found a more diverse distribution of affected households across the scale, where 23.1% had been severely affected, the majority (53.8%) had been moderately affected, and another 23.1% had been only slightly affected.

Table 37: Impact of Repatriation on Returnees' Livelihoods in Nangarhar

By geographical area and implementing agency		2. Slightly affected (can meet some needs)	3. Moderately affected (struggling to meet most needs)	4. Severely affected (unable to meet basic needs)	Total
Jalalabad city (AAR Japan)	N	0	19	35	54
	%	0.0%	35.2%	64.8%	100%
Surkhroad district (SVA)	N	12	28	12	52
	%	23.1%	53.8%	23.1%	100%
Total	N	12	47	47	106
	%	11.3%	44.3%	44.3%	100%

In Jalalabad, repatriation has significantly impacted the livelihoods of households headed by an elderly or chronically ill person without another breadwinner, and households headed by individuals with disabilities, of which 80% each had seen their livelihoods severely affected.

In Surkhroad, households whose head has disability had seen their livelihoods most severely affected, with 100% unable to meet basic needs after having reached Surkhroad. This is followed by households headed by chronically ill or elderly individuals without another breadwinner, of whom 50% had been moderately affected and 29% severely affected upon reaching Surkhroad.

Impact of accommodating returnees on host community livelihoods

As presented in Table – 38 below, 81% of the host community households in Jalalabad reported rising prices for food and other essential items since the influx of returnees from Pakistan in October 2023. Furthermore, 38% of them had been affected by increased house rent, and 23% reported loss of their income as an impact of the influx of returnees. Only 19% stated no effect on their livelihoods. To the contrary, 6% reported increased income after the influx of returnees.

In Surkhroad, on the other hand, the returnees' influx impacted host community livelihoods to a lesser extent. Fewer households cited rising food prices (38%), a rise in house rent (25%) or loss of income (12%), compared to Jalalabad. Notably, 44% of the host community respondents in Surkhroad stated that the returnee influx since October 2023 had no effect on their livelihoods.

Table 38: Impact of Repatriation on Host Community Livelihood in Nangarhar

Returnees' Influx Impact on Household Livelihood		Jalalabad	Surkhroad	Total
Lost job or source of income	N	12	6	18
	%	23%	12%	17%
House rent increased	N	20	13	33
	%	38%	25%	32%
Price of food items and other essential items increased	N	42	20	62
	%	81%	38%	60%
Crops were damaged	N	2	2	4
	%	4%	4%	4%
Reduced customers to my shop, cart, street stall and others	N	3	1	4
	%	6%	2%	4%
Increased in sale/income	N	3	2	5
	%	6%	4%	5%

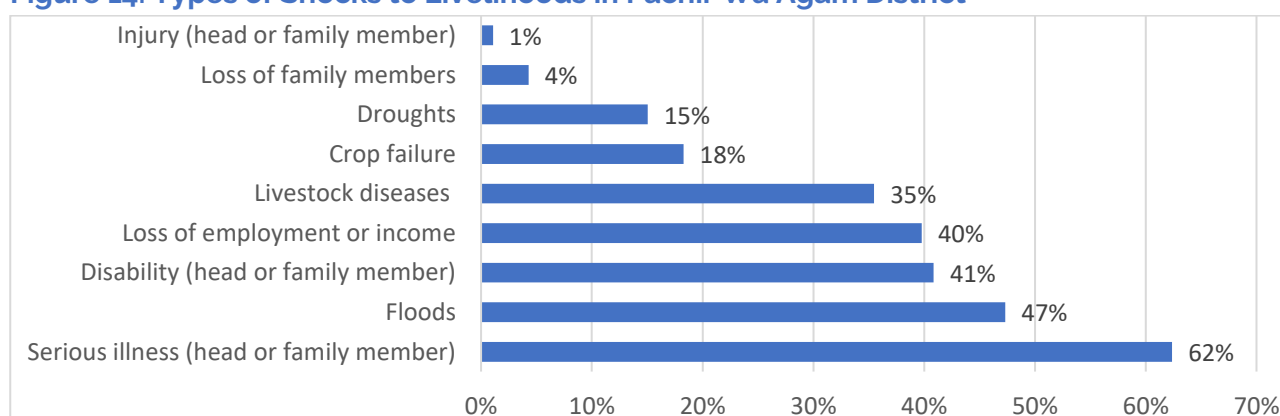
No effect	N	10	23	33
	%	19%	44%	32%
Total	N	52	52	104
	%	100%	100%	100%

Shocks to Livelihoods in Pachir Wa Agam District

The household survey examined types of shocks that disrupted the respondents' livelihoods between spring to fall 2023, i.e. duration of PWJ/YVO project. As shown in Figure – 14 below, the most common and impactful shocks were serious illness affecting a household head or member, reported by 62% of households, followed by floods (47%), disability of a household head or member (41%), and the loss of employment or income (40%)

Additionally, 45% of households experienced more than one shock during this period. Among those affected by secondary shocks, 57% reported floods and/or drought combined with serious illness of the household head or member.

Figure 14: Types of Shocks to Livelihoods in Pachir Wa Agam District



These shocks were reported to have significantly disrupted household livelihood cycles, greatly impacting their ability to meet basic needs. Majority of the households (60%) reported being severely affected, meaning they were unable to meet basic needs, while 38% were moderately affected, struggling to meet most of their needs. Among those severely affected were female-headed households (67%), households headed by chronically ill or elderly person (66%), and households headed by a disabled person (65%). Disaggregated data by beneficiaries and non-beneficiaries are not available.

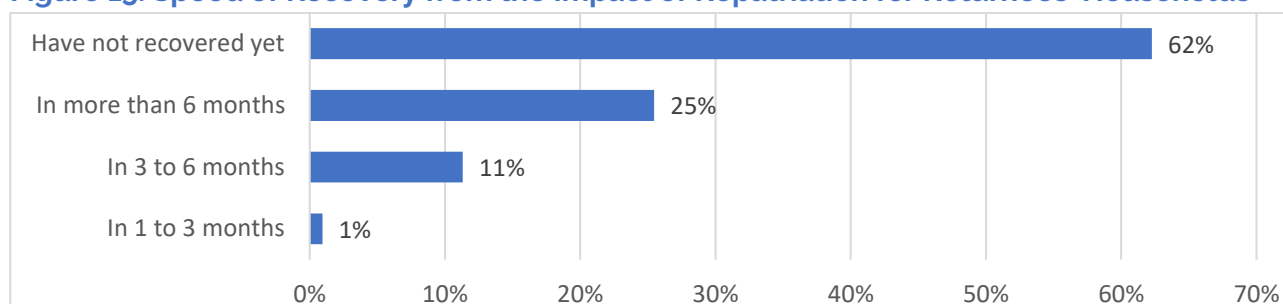
4.2.8 Perceived Recovery

Perceived recovery among returnee households

The respondents (all beneficiaries) were asked if they perceived their livelihoods had recovered from the impact of repatriation in Nangarhar. Overall, 38% reported their livelihood had recovered after repatriation (31% in Jalalabad and 44% in Surkhrood). As presented in Figure – 15 below, only 1% recovered within 1 to 3 months, 11% within 3 to 6 months, and 25% required more than six months to recover⁵⁷. However, the majority of households, 62%, reported that they had not yet recovered, highlighting the prolonged challenges faced by returnees in rebuilding their lives.

⁵⁷ The breakdown of recovered returnees by length of time for recovery doesn't add up to 38%, short of 1%, possibly due to rounding up figures.

Figure 15: Speed of Recovery from the Impact of Repatriation for Returnees' Households



As shown in Table - 39 below, 79% of households with two vulnerabilities and 48% of households with chronically ill or disabled members perceived that they had not recovered yet from the negative impact of repatriation. Possibly, the current state of recovery was also influenced by the severity of impact of the repatriation, which may partially explain the different levels of recovery between Jalalabad and Surkhroad. The data were not disaggregated as such, however.

Table 39: Perceived Recovery among Returnee Households by Categories of Vulnerability

Vulnerable Households		Recovered	Not recovered	Total
Female headed households	N	2	2	4
	%	50%	50%	100%
Households whose head has disability.	N	2	1	3
	%	67%	33%	100%
Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	N	4	6	10
	%	40%	60%	100%
Split Households/families (half repatriated and half still in Pakistan).	N	1	0	1
	%	100%	0%	100%
Households with more than 8 family member and one bread earner (dependency ratio of 1:8 or more)	N	7	0	7
	%	100%	0%	100%
Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	11	10	21
	%	52%	48%	100%
Households without any source of livelihood and income generating assets (land, livestock and others)	N	2	5	7
	%	29%	71%	100%
Two Vulnerabilities	N	9	34	43
	%	21%	79%	100%
Three Vulnerabilities	N	2	8	10
	%	20%	80%	100%
Total	N	40	66	106
	%	38%	62%	100%

Perceived recovery among host community households

Overall, 61% of the host community households perceived that their livelihoods recovered from the impact of the returnees' influx (65% Jalalabad and 58% Surkhroad). While noting a difference in how returnees and host communities had been affected, the speed of recovery seemed to have been faster among host communities than returnees. A higher ratio of host community households in Jalalabad reported recovery than those in Surkhroad, although the former had been more affected than the latter, as noted in the above findings 4.2.7. As

presented in Table – 40 below, households headed by individuals with disabilities, and those headed by elderly or chronically ill individuals reported a relatively high recovery rate of 71% and 67%. Among the households with two vulnerabilities, 56% reported recovery.

Table 40: Perceived Recovery among Host Community Households by Categories of Vulnerability

Vulnerable Host Community Households		Recovered	Not recovered	Total
Female headed households	N	6	6	12
	%	50%	50%	100%
Households whose head has disability	N	17	7	24
	%	71%	29%	100%
Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner	N	12	6	18
	%	67%	33%	100%
Households with child labour		1	3	4
		25%	75%	100%
Households with more than 8 family member and one bread earner (dependency ratio of 1:8 or more)	N	0	1	1
	%	0%	100%	100%
Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	2	1	3
	%	67%	33%	100%
Households without any source of livelihood and income generating assets (land, livestock and others)		4	1	5
		80%	20%	100%
Two Vulnerabilities	N	19	15	34
	%	56%	44%	100%
Three Vulnerabilities		3	0	3
		100%	0%	100%
Total	N	64	40	104
	%	62%	38%	100%

Perceived recovery among food insecure households in Pachir Wa Agam District

Overall, 55% of the households in Pachir Wa Agam perceived that their livelihood recovered from the aforementioned shocks, all in more than 6 months after their occurrence.

As presented in Table – 41 below, perceived state of recovery from shocks varied significantly by different categories of vulnerability. Comparatively higher rates of recovery were observed among households headed by elderly or chronically ill individuals without another breadwinner reported (82%), female-headed households (71%), and households whose head has a disability (67%). On the other hand, those reported recovery remained low among larger households with a dependency ratio of 1:8 (36%) and households with two vulnerabilities (36%). Possibly, the current state of recovery was also influenced by the types/number of shocks, and/or the severity of their impact. The data were not analyzed as such, however.

Table 41: Perceived Recovery among Food Insecure Households in Pachir Wa Agam by Categories of Vulnerability

Vulnerable Households		Recovered	Not recovered	Total
Female headed households	N	10	4	14
	%	71%	29%	100%
Households whose head has disability	N	12	6	18

	%	67%	33%	100%
Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner	N	14	3	17
	%	82%	18%	100%
Households with more than 8 family member and one bread earner (dependency ratio of 1:7 or more)	N	5	9	14
	%	36%	64%	100%
Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	1	4	5
	%	20%	80%	100%
Two Vulnerabilities	N	9	16	25
	%	36%	64%	100%
Total	N	51	42	93
	%	55%	45%	100%

The household survey explored factors contributing to recovery of affected households across the three project areas in Nangahar, in a manner comparable to the assessment in Kabul. The data were not reported by the consultant, however.

4.2.9 Adopted Coping Strategies

Coping strategies adopted by returnee households

As presented in Table – 42 below, returnee households responded to the challenges of repatriation, by taking different measures over time in each location⁵⁸.

In Jalalabad city, the immediate response included reducing household expenses (80%), borrowing money (76%), and utilising savings (41%). But these measures declined afterwards. In turn, selling household assets became a significant measure, adopted by 39% of households by the first six months. Reliance on family support peaked within the first 4 to 6 weeks (35%).

In Surkhroad district, reduction in expenses (33%) was commonly adopted in the immediate aftermath and maintained up to the 3rd month. The first 4 to 6 weeks saw increased adoption of other measures in parallel, such as family support (54%), selling household assets (40%) borrowing (35%), using saving (33%). While family support (35%) started to decline afterwards, borrowing (58%), use of saving (48%) and sales of household assets (44%) reached a peak in the 3rd month, subsequently waning down by the 6th month.

A course of actions taken in Jalalabad and Surkhroad differed significantly, although their repatriation was triggered by the same incidence. Possibly reflecting urban-rural contextual differences, returnees in Jalalabad drew more heavily on transactional measures such as cutting expenses and borrowing, while returnees in Surkhroad also counted on family support. Returnees in Surkhroad resorted to saving and sales of assets, implying they had a more financial buffer. These measures were adopted upfront in Jalalabad and at a slower pace in Surkhroad, possibly due to a higher level of vulnerability of the former returnees. This is also upheld by the finding in 4.2.7 which noted more severe impact on returnees in Jalalabad than in Surkhroad.

Overall, 74% of the households reported partially meeting their household needs after having taken these measures (Jalalabad city 81% and Surkhroad 67%). It should be noted that the 1st

⁵⁸ The survey question was "How did your household respond to repatriation? In the immediate aftermath of repatriation; In first 4 to 6 weeks; In the first 3 months; In the first 6 months."

rounds of distribution by AAR and SVA took place in July and June 2024, 8-9 months since the Pakistani government order of 3 October 2023 had triggered massive repatriation.

Table 42: Response to the Repatriation by Returnee Households

Response to the repatriation		In the immediate aftermath	In first 4 to 6 weeks	In the first 3 months	In the first 6 months
Utilised Savings: Jalalabad	N	22	15	4	8
	%	41%	28%	7%	15%
Utilised Savings: Surkhroad	N	2	17	25	8
	%	4%	33%	48%	15%
Borrowed money: Jalalabad	N	41	8	4	0
	%	76%	15%	7%	0%
Borrowed money: Surkhroad	N	1	18	30	2
	%	2%	35%	58%	4%
Reduced household expenses: Jalalabad	N	43	7	3	0
	%	80%	13%	6%	0%
Reduced household expenses: Surkhroad	N	17	17	14	4
	%	33%	33%	27%	8%
Sold household assets: Jalalabad	N	4	5	8	21
	%	7%	9%	15%	39%
Sold household assets: Surkhroad	N	3	21	23	5
	%	6%	40%	44%	10%
Relied on family support: Jalalabad	N	9	19	3	1
	%	17%	35%	6%	2%
Relied on family support: Surkhroad	N	3	28	18	3
	%	6%	54%	35%	6%

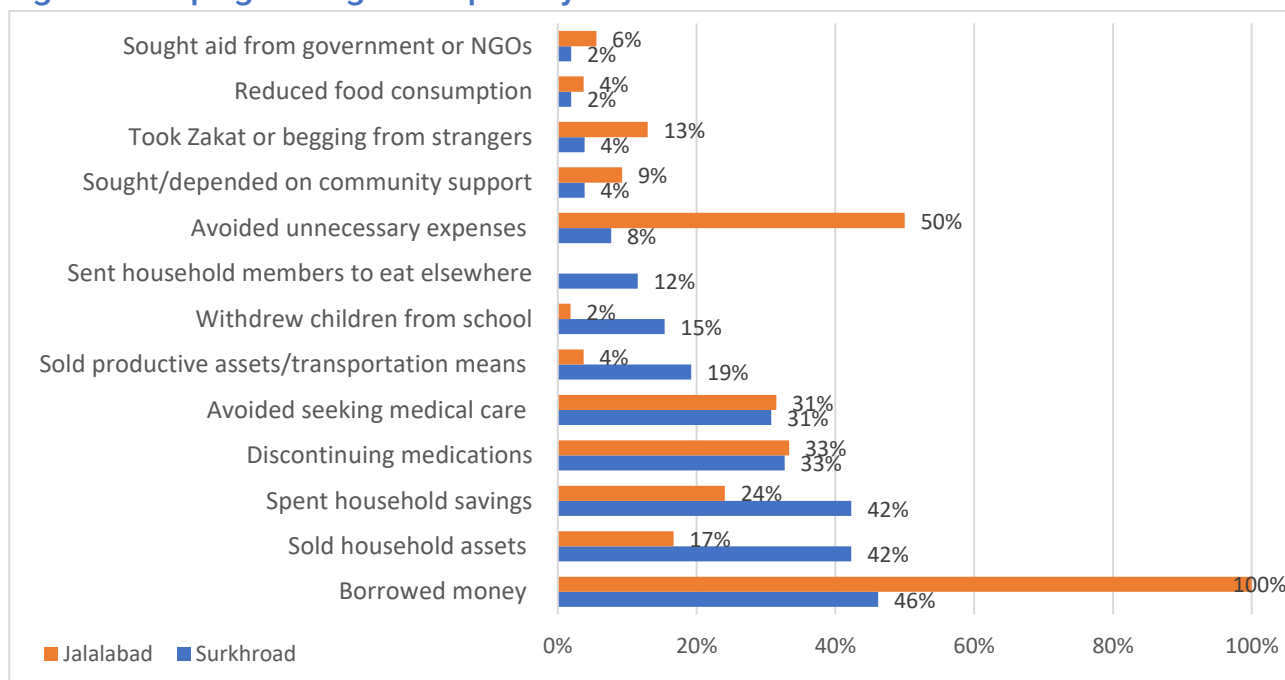
As presented in Figure – 16 below, returnee households adopted various coping strategies after their repatriation⁵⁹. The most common strategy was borrowing money, adopted by 78% of the returnee households (100% in Jalalabad and 46% in Surkhroad). Furthermore, 33% utilised household savings (24% in Jalalabad and 42% in Surkhroad), another 33% discontinued medications (for household heads or members) (both in Jalalabad and Surkhroad), and 31% avoided medical care (both in Jalalabad and Surkhroad).

Besides those strategies mentioned above, returnee households in Jalalabad also avoided unnecessary expenses (50%, significantly higher than 8% in Surkhroad). The least adopted strategies were reducing food consumption (4%), selling productive assets/means of transport (4%), and withdrawing children from school (2%).

On the other hand, additional strategies adopted in Surkhroad included selling household assets (42%, significantly higher than 17% in Jalalabad), withdrawing children from school (15%, higher than 2% in Jalalabad), sending household members to eat elsewhere (12%, a strategy not adopted in Jalalabad). Other strategies included seeking community support (4%), taking Zakat or begging (4%), reducing food consumption (2%), and seeking government or NGOs aid (2%).

⁵⁹ The survey question was framed as “What immediate coping strategies did your household adopt after reaching Nangarhar?”

Figure 16: Coping Strategies Adopted by Returnee Households in Jalalabad and Surkhroad

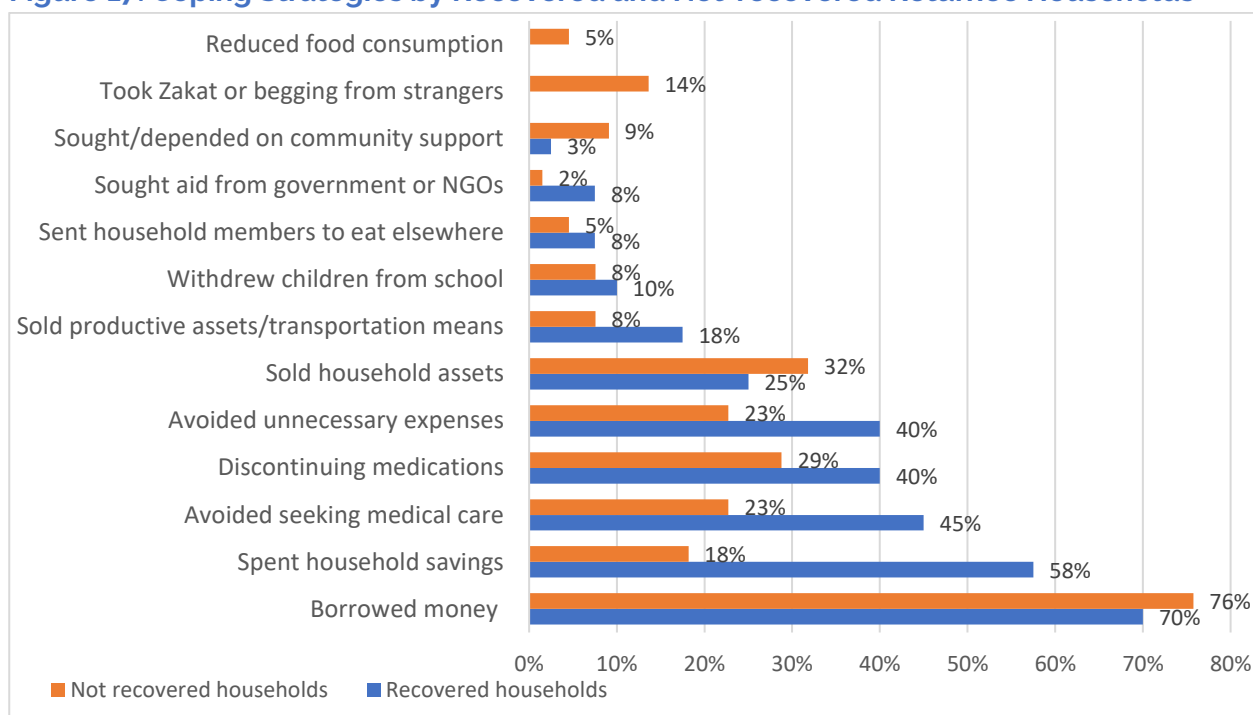


Asked about the effectiveness of these coping strategies, the majority of returnee households (77%) rated them as partially effective (85% in Surkhroad and 70% in Jalalabad city). This is corroborated by the above findings that only 38% of returnee households saw their livelihoods recovered in 4.2.8, and that roughly half of them continued to have their housing and food needs unmet at the time of the survey in 4.2.6. Furthermore, 89% of households indicated that the coping strategies they adopted were similar to those they had used during previous hardship

Figure – 17 compares different coping strategies adopted by the returnee households recovered and not recovered. Overall, both recovered and non-recovered households extensively borrowed money (70% and 76% respectively). The recovered households had a higher tendency to use their household savings (58%, possibly a sign that their pre-existing level of vulnerability had been lower), avoid seeking medical care (45%), discontinue medications (40%), avoid unnecessary expenses (40%), and sell productive assets/transport means (18%). Only a small ratio of recovered households sought humanitarian aid (8%),

On the other hand, non-recovered households resorted to selling household assets (32%) and seeking community support (9%) to a relatively greater extent than recovered households. Moreover, it was only among non-recovered households that such measures were adopted to take Zakat or begged from strangers (14%) and reduce food consumption.

Figure 17: Coping Strategies by Recovered and Not-recovered Returnee Households



Coping strategies adopted by host community households

As presented in Table – 43 below, host community households in Jalalabad and Surkhrood had adopted various coping strategies since October 2023 to manage economic hardships. Coping strategies taken by host community households are largely similar to those adopted by returnee households. Borrowing money was the most common strategy, particularly in Jalalabad (88.5%) compared to Surkhrood (48%). Avoiding unnecessary expenses (52%) was widely practiced, but more so in Jalalabad (76.9%) than in Surkhrood (26%). A significant number of households avoided seeking medical care (39.2%), and discontinued medications (35.3%), of which Surkhrood (58%) reporting a much higher rate than Jalalabad (13.5%). Selling productive assets (16.7%) was more prevalent in Surkhrood (28%) than in Jalalabad (5.8%). A sizable proportion of households (19.6%) sent their children out to work and 6.9% of the households withdrew children from school, with Jalalabad showing a slightly higher occurrence. Additionally, a smaller portion of households resorted to taking Zakat or begging (9.8%), while a single household reported marring off female family member whose age was less than 15 years.

Table 43: Coping Strategies Adopted by Host Community Households

Adopted Coping Strategies		Jalalabad	Surkhrood	Total
Sold household assets (jewellery, television, and household assets)	N	4	4	8
	%	7.7%	8%	7.8%
Borrowing money	N	46	24	70
	%	88.5%	48%	68.6%
Spent household savings	N	9	5	14
	%	17.3%	10%	13.7%
Sent household members to eat elsewhere	N	0	4	4
	%	0.0%	8.0%	3.9%
Sold productive assets or means of transportation (sewing machine, wheelbarrow, bicycle, motorcycle, others)	N	3	14	17
	%	5.8%	28%	16.7%

Avoided seeking medical care (self or family members)	N	20	20	40
	%	38.5%	40%	39.2%
Discontinued medications (self or family members)	N	7	29	36
	%	13.5%	58%	35.3%
Withdrew children from school	N	3	4	7
	%	5.8%	8%	6.9%
Sent children out to work	N	13	7	20
	%	25%	14%	19.6%
Took credit on land or house (Garawi)	N	1	1	2
	%	1.9%	2%	2%
Took Zakat or begging from strangers	N	6	4	10
	%	11.5%	8%	9.8%
Engaged in socially degrading high-risk jobs or income-generating activities	N	0	1	1
	%	0%	2%	1%
Avoided unnecessary expenses (clothes and others)	N	40	13	53
	%	76.9%	26%	52%
Seeking/depending on community support	N	0	9	9
	%	0%	18%	8.8%
Family member migrated to other province or country for work	N	1	0	1
	%	1.9%	0%	1%
Married off female family member whose age was less than 15 years	N	1	0	1
	%	1.9%	0%	1%
Total	N	52	50	102
	%	100%	100%	100%

Coping strategies adopted by food insecure households in Pachir Wa Agam

Affected households in Pachir Wa Agam responded to the aforementioned shocks, by taking the following measures over time⁶⁰. Immediately after the shock, the most common actions included reducing household expenses (75%), borrowing money (72%), and relying on community and family support (38%). In the first 4 to 6 weeks, households continued to borrow money (25%), though to a lesser extent, and maintained reliance on family and community support (37% and 31% respectively). By the first 3 months, sales of household assets (15%) became the main measure, while borrowing money nearly ceased during this period (2%). In the first 6 months, sales of household assets increased (25%), alongside adoption of another measure, i.e. relocation to live with other relatives (25%). Overall, 50% of the affected households reported partially meeting their household needs after having taken these measures.

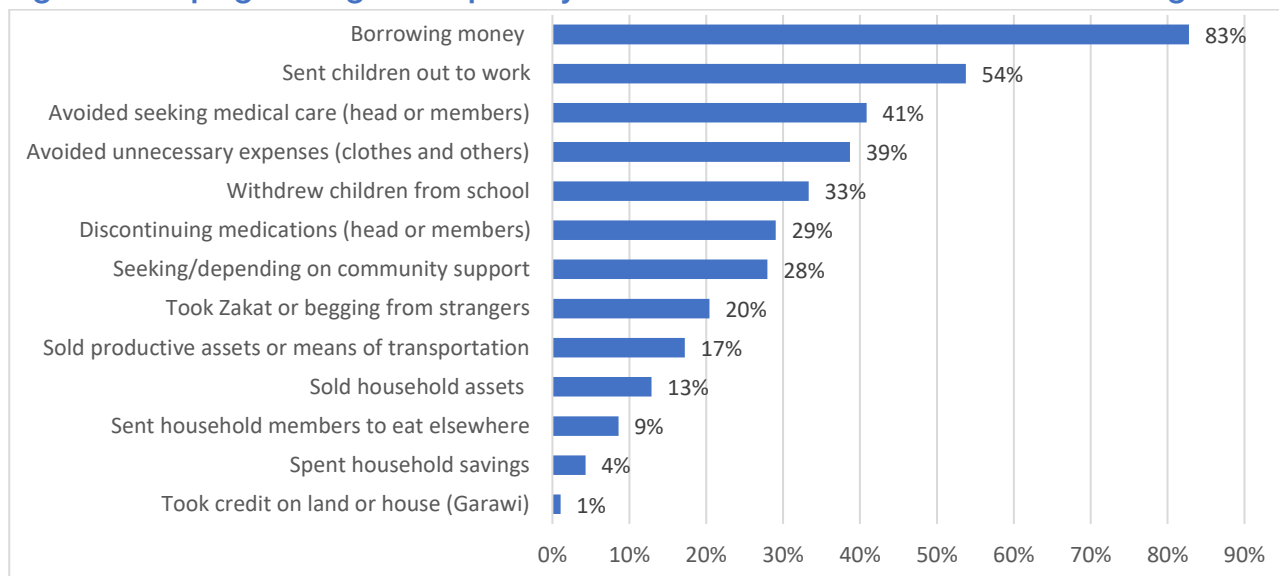
Respondents adopted various coping strategies after having experienced shocks.⁶¹ As presented in Figure – 18 below, the most common strategies were borrowing money, adopted by 83% of households (64% beneficiary and 100% non-beneficiary), sending children out to work, adopted by 54% (28% beneficiary and 79% non-beneficiary), and avoiding medical care for head or members of the household reported by 41% (24% beneficiary and 56% non-beneficiary). Significantly more non-beneficiaries had drawn on these strategies than beneficiaries. On the

⁶⁰ "Response to the shock" was in response to the multiple-choice question "How did your household respond to the [MENTION THE SHOCK IDENTIFIED BY THE RESPONDENT]? In the immediate aftermath of [MENTION THE SHOCK], In first 4 to 6 weeks, In the first 3 months, In the first 6 months."

⁶¹ "Coping strategies" were asked in a multiple-choice question framed as "What coping strategies did your household adopt following [MENTION THE SHOCK IDENTIFIED]?" after having inquired into limitations in response to the shock. Multiple choices provided partially overlapped with the earlier question on "response to the shock" at different points in time.

other hand, taking credit on land or house, and spending household savings were the least common coping strategies adopted only by 1% and 4% of households respectively.

Figure 18: Coping Strategies Adopted by Food Insecure Households in Pachir Wa Agam



49% of households perceived these coping strategies to be partially effective in managing their situations. 52% indicated that these coping strategies were similar to those they had previously adopted in difficult times.

Comparing the households recovered and non-recovered from shocks, recovered households seemingly took a greater number of coping strategies than non-recovered households, including negative coping strategies. A larger ratio of recovered households put into practice such coping strategies as borrowing money (98%, compared with 64% among non-recovered households), avoiding medical care (55%, compared to 24% for non-recovered households), withdrawing children from school (55%, compared to 7% among the non-recovered), sending children to work (78%, compared to 24% among non-recovered households), and taking Zakat or begging (27%, as opposed to 12% of non-recovered households). Presumably, such negative coping strategies would affect the most vulnerable members of households and would rather increase their long-term vulnerability to future shocks.

4.2.10 Role of aid

This section assesses the effectiveness of the three projects, with particular focus on relevance and timeliness of these interventions to the needs of the most vulnerable households.

- AAR's intervention in distributing food voucher worth USD 100 for 3 months in Jalalabad from July to September 2024,
- SVA's in-kind distribution of 3 months' worth of food and hygiene items in Surkhroad in June 2024 and
- PWJ/YVO's distribution of cash vouchers of USD 96 for 1-2 months in Pachir Wa Agam in June and/or August 2023,

Role of the projects in supporting recovery of beneficiaries

Across all the districts in Nangahar, beneficiaries consistently lagged behind non-beneficiaries in recovery. In both Jalalabad and Surkhroad, the majority of returnee households stated that they had not recovered while the majority of host community households had from the impact of the repatriation. A disparity was stark in Jalalabad where 65% host community households reported recovery, yet 69% of returnee households had not recovered. The December 2024

survey was unable to validate AAR's findings from the October 2024 telephone interviews that 97% of sampled beneficiaries increased the number of meals per day, and the number of households adopting negative coping strategies reduced by half. In Surkhroad district 56% of returnee households still remained unrecovered, whereas 58% of host community households reporting recovery. In Pachir Wa Agam, it was only 7% of the beneficiary households with perception of recovery from the shock, while all sampled non-beneficiaries reportedly had recovered.

In all, the findings indicate that the projects had little impact, beyond the project duration, on perceived recovery of targeted households. This is notwithstanding the relevance of the concerned interventions to their needs or timeliness of such interventions. As noted in 4.1.8, however, this finding should be put into a perspective, with all other findings taken into account.

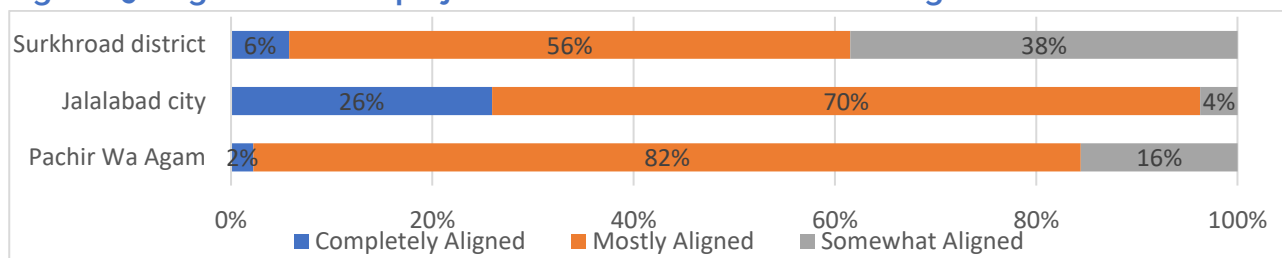
Table 44: Current State of Recovery by Project/District and Beneficiaries in Nangarhar

Project/District	Beneficiary Status		Recovered	Not recovered	Total
AAR project Jalalabad city	Host (Non-beneficiaries)	N	34	18	52
		%	65%	35%	100%
	Returnees (Beneficiaries)	N	17	37	54
		%	31%	69%	100%
	Total	N	51	55	106
		%	48%	52%	100%
SVA project Surkhroad District	Host (Non-beneficiaries)	N	30	22	52
		%	58%	42%	100%
	Returnees (Beneficiaries)	N	23	29	52
		%	44%	56%	100%
	Total	N	53	51	104
		%	51%	49%	100%
PWJ/YVO project Pachir Wa Agam District	Non-beneficiaries	N	48	0	48
		%	100%	0%	100%
	Beneficiaries	N	3	42	45
		%	7%	93%	100%
	Total	N	51	42	93
		%	55%	45%	100%

Alignment of the projects with household needs in Nangarhar

As presented in Figure – 19 below, more than half of the beneficiary respondents across all three projects reported that the provided aid was mostly aligned with their needs, effectively addressing most of their critical humanitarian needs. In Pachir Wa Agam, PWJ/YVO beneficiaries reported the cash vouchers had been either completely (2%) or mostly (82%) aligned with their needs. In Jalalabad, AAR beneficiaries reported the food vouchers completely (26%) or mostly (70%) aligned with their needs. In Surkhroad, it was 6% and 56% of SVA's beneficiaries who considered aid completely or mostly aligned respectively. The proportion of households reported that the provided aid was slightly aligned with their needs, addressing a few of their critical needs, varied from 4% in Jalalabad city to 38% in Surkhroad district.

Figure 19: Alignment of the projects with household needs in Nangarhar

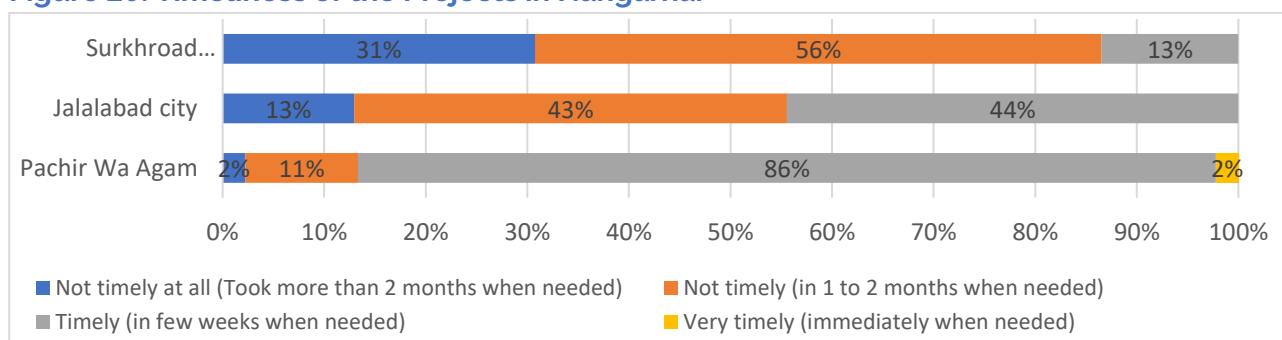


On the one hand, the above finding differs from SVA's PDM results in which all the sampled 80 beneficiaries rated usefulness of distributed food and hygiene items at 5 in a scale of 1-5. On the other hand, the finding is largely in line with AAR's PDM results with sampled 250 beneficiaries that 100% of them expressed satisfaction with items, quantity and quality of distribution. This finding is also generally consistent with PWJ's PDM report that validated with 859 beneficiaries their household food requirements had been met fully for 19%, mostly (over 80%) for 57%, more than half for 21%, and less than half for 3%. PWJ also reports that 99% of the voucher amounts were spent on purchasing essential food items such as rice, beans, flour, vegetables, cooking oil, sugar, and meat, while 1% was used to repay loans.

Timeliness of the projects in Nangarhar

As shown in Figure 20, perceptions of the timeliness of the aid varied significantly across the projects. Perceived levels of timeliness of aid were particularly low in the returnee assistance projects. In Surkhroad district, a significant proportion of SVA beneficiaries reported that the aid was not timely, taking more than 2 months (31%) or one to two months (56%) since the needs had arisen, leaving only 13% indicating timely delivery within a few weeks of the needs. In Jalalabad city, likewise, more than half of AAR beneficiaries attested to a delay of more than 2 months (13%) or 1-2 months (43%), while 44% stating arrival of aid within a few weeks, although the aforementioned AAR PDM reported 100% of sampled beneficiaries satisfied with the timing of delivery. In contrast, the majority of PWJ/YVO beneficiaries in Pachir Wa Agam district perceived the aid had been timely, provided either within a few weeks (86%) or immediately/within a few days since needed (2%). It was only 11% reporting delays of 1-2 months or 2% reporting delays more than 2 months.

Figure 20: Timeliness of the Projects in Nangarhar



These findings highlight the need to improve timeliness of humanitarian aid in the context of involuntary repatriated of returnees from Pakistan. The need for timely aid may be perceived acutely under such circumstances. While the massive repatriation of Afghan refugees from Pakistan began in October 2023, both AAR and SVA could only started delivering aid to returnees in July 2024 (AAR) and June 2024 (SVA), 7-8 months after the onset of forced repatriation.

As was the case in Kabul, PWJ/YVO project addressed chronic humanitarian situations, and came in the middle of the summer, when household expenditure (e.g. for winter goods) might be relatively lower than the winter.

Meaningful access

As shown in Table – 45 below, all the beneficiaries expressed satisfaction (mostly 4.7% or completely 94.7%) with the project services. The data are not disaggregated by project, however.

57% (86 out of 151) of respondents reported knowing individuals in their communities who required humanitarian aid but were not selected. Among those households that were eligible yet not targeted were female-headed households (45.3%), households whose head has a chronic illness or is elderly (32.6%), and households with chronically ill or disabled members (24.7%). The data are not disaggregated by project, however. Nonetheless, this finding may suggest that the respective projects' selection criteria fell short of distinguishing the most vulnerable from the vulnerable. A possibility of an exclusion error in targeting is also supported by the finding in 4.2.6 that an equally high, if not higher, ratio of non-beneficiaries struggled to meet food needs at the time of the survey, as compared with beneficiaries. Unmet food needs persisted, even after a higher ratio of non-beneficiaries had reportedly "recovered" from the shocks, as noted above in this section. Moreover, the targeting criteria may need to be scrutinized for a possible inclusion error, in light of such finding in 4.2.7 that 23.1% of SVA's beneficiaries escribed themselves as "slightly affected, able to meet some needs".

Table 45: Satisfaction of Beneficiary Households and Access to Aid in Nangarhar

Satisfaction of Beneficiary Households						
Satisfied with the assistance/service provided		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
	N	1	143	7	0	151
	%	0.7%	94.7%	4.7%	0%	100%
Accessing Humanitarian Aid						
Know of people needing assistance who were excluded from the assistance/service provided		Not at all	Not really	Yes a few	Yes a lot	Total
	N	15	22	54	32	151
	%	9.4%	14.6%	35.8%	21.2%	100%

Safety and dignity

As presented in Table – 46 below, all the respondents (100%) felt safe (completely or mostly) in receiving the aid from the 3 projects. Similarly, all reported being treated with respect (completely or mostly) by the project staff during household section and aid distribution process.

Table 46: Safety in Accessing Humanitarian Aid and Dignity of Households in Nangarhar

Safety and dignity of beneficiaries		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
Felt safe at all times travelling to receive the assistance (to/from home)	N	1	149	1	0	151
	%	0.7%	98.6%	0.7%	0%	100%
	N	0	105	46	0	151

Treated with respect by project staff during household selection and providing assistance	%	0%	69.5%	30.5%	0%	100%
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Accountability (suggestions and complaints):

As shown in Table – 47, 95.4% of beneficiaries (70.2% completely and 25.2% mostly) confirmed the availability and functionality of a mechanism to process suggestions and complaints, while only 3.3% reported the absence of such a system, while 1.3% were unsure. The data were not disaggregated by the projects, however. The survey result was validated by cross checking PDM data from PWJ/YVO and SVA as well as AAR's final report, which showed that all the beneficiaries were aware of the presence of a complaints mechanism and how to lodge a complaint if any.

Importantly, CHS uphold that accountability mechanisms should be made open and accessible to affected people and their communities, not just for beneficiaries. Neither this survey nor PDM reports looked at awareness or use of the feedback mechanism by non-beneficiaries, however.

The survey missed to ask how many respondents out of the sampled beneficiaries actually raised feedback or complaints. Nonetheless, 24 out of 151 sampled beneficiaries from the 3 projects indicated that their submissions had not been followed up or addressed. This finding was not fully corroborated by any of PDM data by the implementing agencies, however. PWJ/YVO's PDM data with all 452 beneficiaries show none of the beneficiaries had actually lodged complaints, while their log sheet for complaints and feedback records 15 cases, including those lodged by non-beneficiaries outside Pachir Wa Agam, of which 5 had no recorded responses⁶². SVA's PDM data with 80 sampled beneficiaries recorded only 4 cases, all of which had been addressed to full satisfaction of complainants in a scale of 1-5, although how SVA had responded to the respective cases was undocumented⁶³. AAR received no complaint or feedback as of the end of the second month of 3-month food voucher distribution in August 2024. No further details were provided on those 24 outstanding cases identified in the survey.

Table 47: Complaint and Feedback Mechanism in Nangarhar

Accountability to affected households		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
Suggestion for, or a problem with the project services could be channelled	<i>N</i>	2	106	38	5	151
	%	1.3%	70.2%	25.2%	3.3%	100%
Suggestions or complaints raised have been responded to or followed up by the project team	<i>N</i>	5	45	81	24	151
	%	3.3%	29.8%	53.4%	15.9%	100%

4.2.11 Future prospects⁶⁴

⁶² 15 cases on record comprised 4 requests to increase the number of beneficiaries, another request to extend the timeframe, 4 cases of feedback on operations and a clarification sought by a person with disability if s/he was included in the selection process. Of those, no record was found on responses to the operational feedback and the clarification from the person with disability.

⁶³ All 4 cases sought information or assistance, such as dates and places for distribution, or quantity of food and non-food items to be distributed.

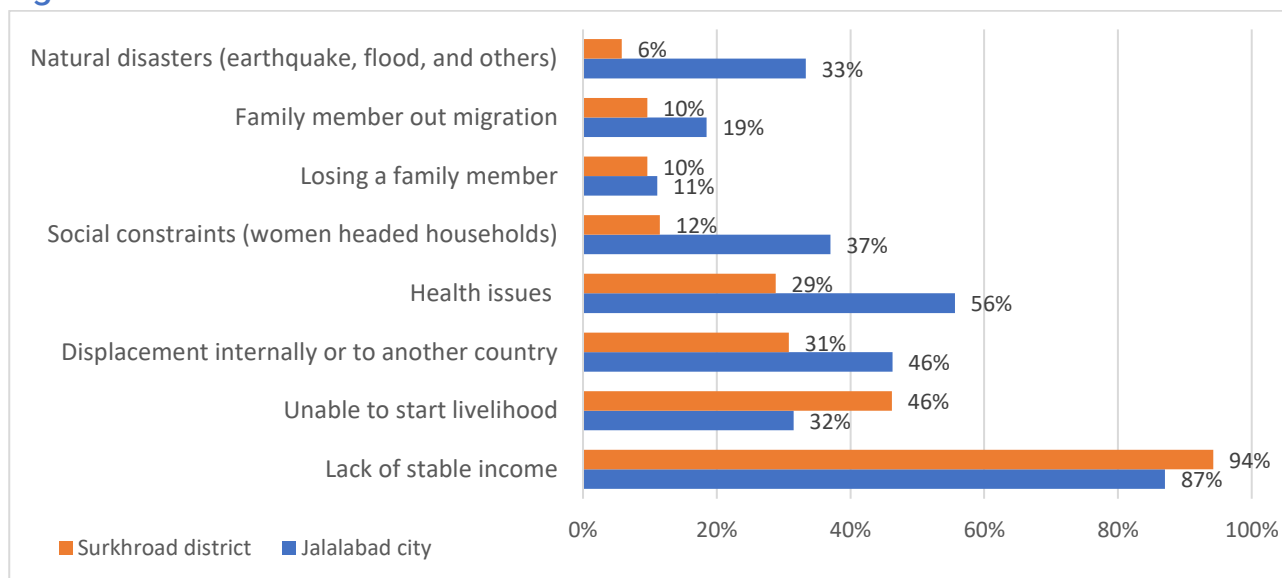
⁶⁴ It is unclear if the data in this section represent all the respondents, including non-beneficiaries and host community respondents. The survey tool was designed to ask these questions to both beneficiaries/returnees and non-beneficiaries/host community members. The 1st draft report by the consultant didn't include host community data, which was rectified in the other sections. The data reported in 4.2.11 remain the same as the 1st draft, however, without a clear indication of the denominators used in calculating % figures or without disaggregation of beneficiaries and non-beneficiaries.

Fear about the future

Across all the districts in Nangahar, the respondents continue to hold multiple fears about future occurrence of shocks. In Jalalabad city and Surkhroad district, lack of stable income was by far the most prevalent fear among returnee households (87% in Jalalabad and 94% in Surkhroad). In Surkhroad, the next common fear was about inability to start livelihood (46%). One third of respondents in Surkhroad were also concerned about risks for further displacement (31%) and ill health (29%). On the other hand, a concern about health issues (56%) was the second highest in Jalalabad, followed by a perceived risk of displacement (46%), both significantly exceeding those of Surkhroad. One third of respondents in Jalalabad were also afraid of impact of social constraints on female-headed households (37%), natural disasters (33%) and inability to start livelihood (32%). On balance, respondents in Jalalabad held more fears than those in Surkhroad.

In Pachir Wa Agam, lack of stable income was the top concern, reported by 82% of respondents, similar to Jalalabad and Surkhroad. This was nearly paralleled by a fear for health issues, expressed by 80% of respondents. A full range of data are not available for Pachir Wa Agam.

Figure 21: Fears about the Future in Jalalabad and Surkhroad



Hopes and aspirations about the future

The overwhelming priority was securing a stable income, identified by 92% of households in Jalalabad city, 83%, in Surkhroad, and 81% in Pachir Wa Agam District, underscoring the critical role of economic stability in mitigating vulnerabilities. A large majority also expressed aspirations for accessing quality healthcare services (72% in Jalalabad, 68% in Pachir Wa Agam, and 64% in Surkhroad), although, in reality, a considerable ratio of respondents cut health care expenses in times of crises as noted in 4.2.9.

4.3 Hirat Province

This section presents the findings specific to the JPF-funded earthquake response project implemented by ADRA in Zindajan and Injil districts of Hirat province.

4.3.1 Locally defined vulnerable households

Severity of impact of the earthquake of October 2023 was coupled with predisposing social factors to push affected households to the edge, forcing them to sell their assets to purchase food or even into starvation, according to KII and FGDs. The following categories of households were identified as the most vulnerable in the aftermath of the earthquake in Hirat:

Table 48: Categories of the Most Vulnerable Households in Hirat

Characteristics of the Most Vulnerable Households in Hirat	Description
1. Female headed households	Frequent occasions of food shortages and struggling to make ends meet with less livelihood opportunities for women in the current situation.
2. Households whose head has disability without another breadwinner	Frequent occasions of food shortages and other essential yet unmet needs along with the treatment/medication cost with no livelihood opportunities for PwDs without another breadwinner in the household.
3. Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	Struggled to make their end meet in the face of the earthquake along with the treatment/medication cost with no livelihood opportunity for elderly or chronically ill person and without any other breadwinner in the household.
4. Households whose head is addicted and don't have another breadwinner	Often had pre-existing poor financial situation, further exacerbated by the earthquake and struggling to make their ends meet.
5. Households whose breadwinner was injured in earthquake	Losing household income and struggling to make their ends meet along with the additional burden of treatment cost.
6. Households with more than 8 member and only one breadwinner (dependency ratio of 1:7 or higher)	With the additional burden of the earthquake, a large family with a high dependency ratio and only one source of income struggled to meet their end needs.
7. Returnees (Iran and Pakistan) who were not able to settle	Unsettled returnees struggling to make their ends meet in the face of earthquake without social support or a livelihood.
8. Households having chronically ill person(s) or person(s) with disability (people with special needs)	Often did not have a livelihood or a source of income or income generating assets. Struggled to make their ends meet after the earthquake with the additional burden of treatment cost for chronically ill or disabled family member(s).
9. Households lacking any livelihood sources or income-generating assets (e.g., land, livestock).	Often had pre-existing poor financial situation, further exacerbated by the earthquake and struggling to make their ends meet without any prior savings or assets.

ADRA used the following beneficiary selection criteria, adopted from the Shelter and Non-Food Items Cluster (SNFC).

1. Women or child headed households without adult male.
2. Households with dependency ratio of 8 or more.
3. Households with no adult male of working age or adult working women
4. Person with disability, chronic illness or elder as head of the household
5. Households with poor asset holdings
6. Households residing with or hosting another household.
7. Households living in open, emergency or makeshift shelter
8. Households relying only on borrowing, begging or zakat
9. Households relying on casual labour by one member
10. Households without any source of livelihood or income generating activities
11. Households with one or more members having disability or chronic illness, excluding head of the households

Based on ADRA's project proposal, households that met any of the above criteria were considered most vulnerable and therefore eligible for aid. ADRA's selection criteria largely match with the categories of the most vulnerable households (as presented in Table 48) except for the categories 4 and 5. In particular, the category 5 was specific to the context of the earthquake. On the other hand, ADRA's selection criteria 6-9 might not directly correspond to the categories of vulnerable households on the face of it. When examined closely, however, the selection criteria 6-7 may be seen as more specific descriptions of the category 7 "unsettled returnees" and those in returnee-like conditions. Likewise, the selection criteria 8-9 may be taken as specific manifestations of lack of "livelihood sources or income-generating assets" and reflective of "pre-existing poor financial situation" as per the category 9.

4.3.2 Socio-demographic profile of surveyed households

Out of the total sample of 135 respondents in Hirat, 93.3% were heads of the households. As presented in Table – 49 below, 31% were female (20% of beneficiaries, 39% of non-beneficiaries) and 69% were male (80% of beneficiaries, 61% of non-beneficiaries).

With the median age of 45 years (43.3 for beneficiary and 48 for non-beneficiary respondents), majority (36%) of the respondents were aged 35 to 49 years (31% of beneficiaries, 40% of non-beneficiaries), followed by 31% aged 50 to 65 years (26% of beneficiaries, 35% of non-beneficiaries), and 16% aged 26 to 35 years (27% of beneficiaries, 8% of non-beneficiaries).

Further, 20.7% of the survey respondents were widowed, with females making up 93% of this group (62% of all female respondents were widowed, compared to 2% of male respondents). Additionally, a significant portion of respondents (87.4%) had never attended school, with 95% of female respondents and 84% of male respondents falling into this category, indicating that female respondents were less likely to have received formal education than male counterparts.

At the household level, 59.3% of the surveyed households were non-beneficiaries, while 40.7% were beneficiaries. The average family size was 7.2 members, with over half (55.6%) of the households having 6 to 8 family members and one-fourth (25%) having more than 8 members. Furthermore, 11.9% of households had a chronically ill family member, and 19.3% had a family member with disabilities, underscoring the diverse household compositions.

Table 49: Socio-demographic Profile of Households Surveyed in Hirat

Survey Respondents Characteristics

District		Female	Male	Married	Widowed	Never Attended School	Primary School	Religious Education
Injil	N	18	34	38	14	46	5	1
	%	34.6%	65.4%	73.1%	26.9%	88.5%	9.6%	1.9%
Zindajan	N	24	59	69	14	72	6	5
	%	28.9%	71.1%	83.1%	16.9%	86.7%	7.2%	6.0%
Total	N	42	93	107	28	118	11	6
	%	31.1%	68.9%	79.3%	20.7%	87.4%	8.1%	4.4%

Households Demographics

District		ADRA Non-beneficiary	ADRA Beneficiary	Having 5 or Less Members	6 to 8 Family Members	More than 8 Family Members	Having Chronic Ill Family Member	Having PwD Family Member
Injil	N	30	22	6	31	15	5	9
	%	57.7%	42.3%	11.5%	59.6%	28.8%	9.6%	17.3%
Zindajan	N	50	33	20	44	19	11	17
	%	60.2%	39.8%	24.1%	53.0%	22.9%	13.3%	20.5%
Total	N	80	55	26	75	34	16	26
	%	59.3%	40.7%	19.3%	55.6%	25.2%	11.9%	19.3%

4.3.3 Categories of most vulnerable households to food insecurity

As presented in Table – 50 below, 92% of the surveyed households were identified with single vulnerability (89% beneficiaries and 94% non-beneficiaries). Among them were households lacking any source of livelihood and income generating assets (28%), large households with more than 8 members with single breadwinner (25%), and female-headed households (21%).

Table 50: Most Vulnerable Households with Single, Double, and Triple Vulnerabilities in Hirat

Vulnerability Characteristics		Non-beneficiaries	Beneficiaries	Total
Female headed households	N	17	12	29
	%	21%	22%	21%
Households whose head has disability	N	1	0	1
	%	1%	0%	1%
Households whose head has chronic illness or is elderly (more than 65) and don't have another breadwinner.	N	16	4	20
	%	20%	7%	15%
Households with more than 8 family member and one bread earner (dependency ratio of 1:7 or more)	N	15	19	34
	%	19%	35%	25%
Households having chronically ill person(s) or person(s) with disability (people with special needs)	N	2	0	2
	%	3%	0%	1%
Households without any source of livelihood and income generating assets (land, livestock and others)	N	24	14	38
	%	30%	25%	28%
Households with two vulnerabilities	N	5	5	10
	%	6%	9%	7%
Households with three vulnerabilities	N	0	1	1
	%	0%	2%	1%

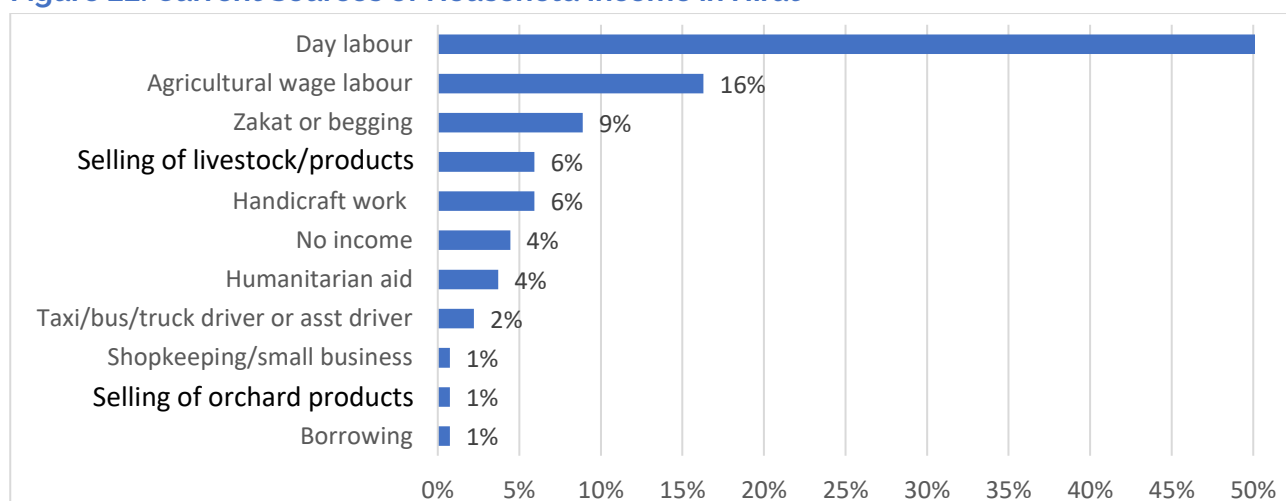
Total	N	80	55	135
	%	100%	100%	100%

4.3.4 Current livelihood cycle

Current household Sources of Income

The assessment revealed that 98% of households currently relied on a single source of income. As presented in Figure-22 below, half the affected households (50%) relied on day labour for the main income at the time of the survey. Agricultural wage labour came at a distant second as the primary source of income for 17% of households. As a whole, 18% of households cumulatively lacked means of livelihoods, dependent on Zakat or begging (9%), humanitarian aid (4%), borrowing (1%) or without sources of income at all (4%). Other minor income sources included sales of livestock and related products (6%), handicraft work (6%), driving (2%), shopkeeping or small businesses (1%), and sales of orchard products (1%). These findings illustrate the economic fragility of the surveyed households, characterised by a heavy reliance on informal, seasonal, or aid-dependent income streams.

Figure 22: Current Sources of Household Income in Hirat



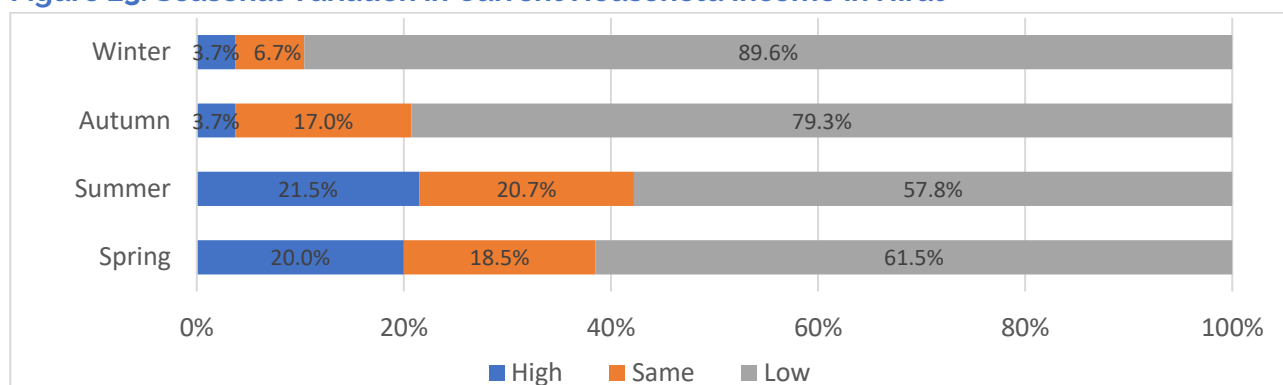
No significant differences were observed between beneficiaries and non-beneficiaries or by different categories of vulnerability, except for female headed households. Female-headed households demonstrated distinct income patterns compared to the others, in that they were more dependent on handicraft work (female-headed households 22.6%, male-headed households 1%), Zakat or begging (female-headed households 19.4%, male-headed households 5.8%), and humanitarian aid (female-headed households 12.9%, male-headed households 1%). Additionally, 9.7% of female-headed households reported having no income at all, compared to 2.9% among male-headed households.

As illustrated in Figure 23⁶⁵, household income exhibited some seasonal fluctuations, presenting a relatively higher income level in spring and summer, and a plunge in autumn and winter. Such seasonal fluctuations in income affected supposedly 30-40% of the respondents, while roughly 60% of respondents experienced consistently low income throughout the year. The spring and the summer seemed to offer more opportunities, with 20% (beneficiaries: 21.8%,

⁶⁵ The survey asked respondents to indicate whether their income was 1) high, 2) same or 3) low in each season. Those reporting "same" did not stay constant, however, increasing in spring/summer and declining in winter/autumn. Possibly, respondents interpreted 2) same to mean "moderate".

non-beneficiaries: 18.8%) reporting high income in spring and 21.5% respondents (beneficiaries: 23.6%, non-beneficiaries: 20%) in summer respectively. With the arrival of a lean period, households reporting high income dropped to only 3.7% in both autumn and winter. Correspondingly, those reporting low-income levels were 61.5% (beneficiaries: 49.1%, non-beneficiaries: 70%) in spring and 57.8% (beneficiaries: 40%, non-beneficiaries: 70%) in summer. This ratio surged to 79.3% (beneficiaries: 67.3%, non-beneficiaries: 87.5%) in autumn and further escalated to 89.6% in winter (beneficiaries: 89.1%, non-beneficiaries: 90%). A greater ratio of non-beneficiaries than beneficiaries struggled in the lean period.

Figure 23: Seasonal Variation in Current Household Income in Hirat



Current household expenditure

As shown in Table – 51 below, the surveyed households reported the current priorities for their expenditures in the following three patterns:

First, the vast majority of households (98%) identified food items as their primary expense (first current priority), and the remaining 2% as the second priority, underscoring the critical importance of food security and the prioritisation of basic nutritional needs.

Second, the three types of expenditure were prioritized by slightly less than half the respondents, although with differing levels of emphasis in the order of prioritization: Casual clothes are prioritized by 44% (first priority 1%, second priority 37%, third priority 6%), health/medicine by 46% (first priority 1%, second priority 26%, third priority 19%), and warm clothes by 49% (second priority 21%, third priority 28%)⁶⁶.

Third, the remaining items were prioritized by 2-5% of respondents as either second or third important expenditure.

The disaggregated data by beneficiaries and non-beneficiaries were not made available.

Table 51: Priorities in the Current Household Expenditure in Hirat

Current Expend	First Expenses		Second Expenses		Third Expenses	
	N	%	N	%	N	%
Food Items	132	98%	3	2%	0	0%
Casual Clothes	1	1%	50	37%	8	6%
Healthcare/Medicine	2	1%	35	26%	26	19%
Warm Clothes (for Winter)	0	0%	28	21%	38	28%
Home Heating Material	0	0%	11	8%	25	19%

⁶⁶ The timing of the survey, undertaken in winter, might have influenced respondents' prioritization of this item.

House Repair	0	0%	2	1%	5	4%
Drinking water	0	0%	1	1%	2	1%
Blankets and Mattress	0	0%	1	1%	5	4%
Household Utilities (Stove, Dishes, Cook and others)	0	0%	1	1%	6	4%
Don't know	0	0%	0	0%	11	8%
Total	135	100%	135	100%	135	100%

Current unmet household needs

Notably, no households reported always having sufficient income to meet their basic needs. While 11.1% stated it was sometimes sufficient, the majority of households (86.7%) reported that their income was rarely sufficient to cover basic needs, and 2.2% indicated it was never sufficient. Among different categories of vulnerability, female-headed households (9.7% reported never sufficient, 87.1% rarely sufficient), households without any livelihood sources or income generation assets (88.4% reporting rarely sufficient), households whose head has chronic illness or is elderly (86.4% reporting rarely sufficient) were particularly challenged in meeting their basic needs. The disaggregated data by beneficiaries and non-beneficiaries were not made available

4.3.5 Shocks to livelihoods

Impact of the earthquake on the livelihoods

The earthquake significantly disrupted household livelihoods. Out of 135 households surveyed, 62% reported that their livelihoods had completely stopped, while 38% indicated that their livelihoods had been significantly reduced.

Among the pre-earthquake livelihoods, agricultural wage labour was more severely impacted than day labour. While those engaged in the former had more often experienced a complete halt (64%) than significant reduction (36%), there were more chances to continue with day labour, though at a significantly reduced scale (54%) than to stop completely. Plausibly, the impact on day labour/agricultural wage labour may be attributable to loss of employment opportunities in the aftermath of the earthquake, as well as to loss of labour caused by injuries/deaths of income earners. Furthermore, sales of livestock and livestock products were totally discontinued after the earthquake in all 10 cases, and Zakat/begging and handicraft work had completely stopped in 9 out of 10 cases.

Table 52: Impact of the Earthquake on the Pre-Earthquake Livelihoods⁶⁷ in Hirat

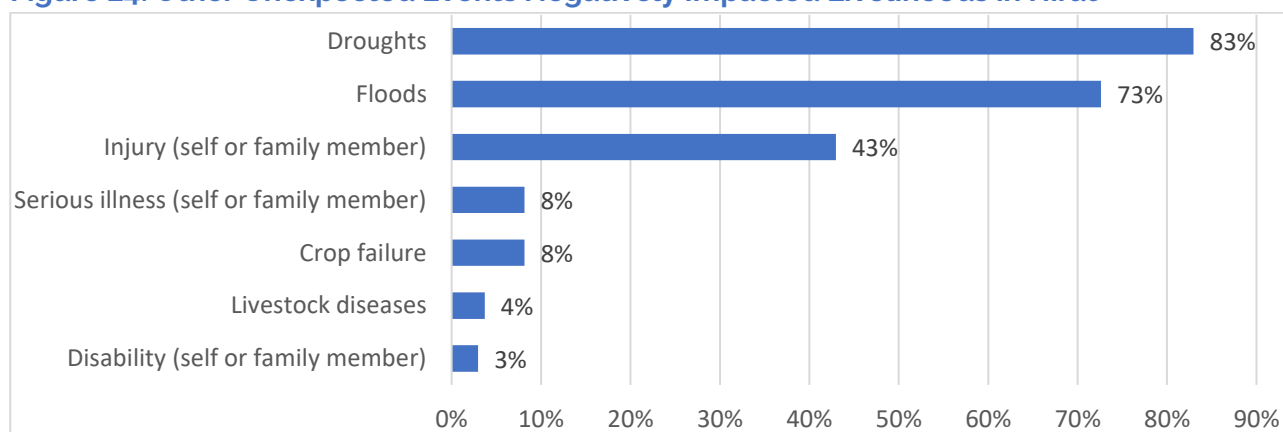
Livelihoods		Completely stopped	Reduced significantly	Total
Day labour (construction and other)	<i>N</i>	30	35	65
	<i>%</i>	46%	54%	100%
Agricultural wage labour	<i>N</i>	16	9	25
	<i>%</i>	64%	36%	100%
Zakat or begging	<i>N</i>	9	1	10

⁶⁷ The list excludes those who indicated "no income" and "humanitarian aid" as their livelihoods.

	%	90%	10%	100%
Handicraft work (carpet weaving, embroidery and others)	N	9	1	10
	%	90%	10%	100%
Sale of livestock and livestock products	N	10	0	10
	%	100%	0%	100%
Taxi/bus/truck driver or assistant driver	N	2	1	3
	%	67%	33%	100%
Borrowing	N	1	1	2
	%	50%	50%	100%
Production and sales of field crops	N	2	0	2
	%	100%	0%	100%
Shopkeeping/small business	N	1	1	2
	%	50%	50%	100%
Total	N	80	49	129
	%	62%	38%	100%

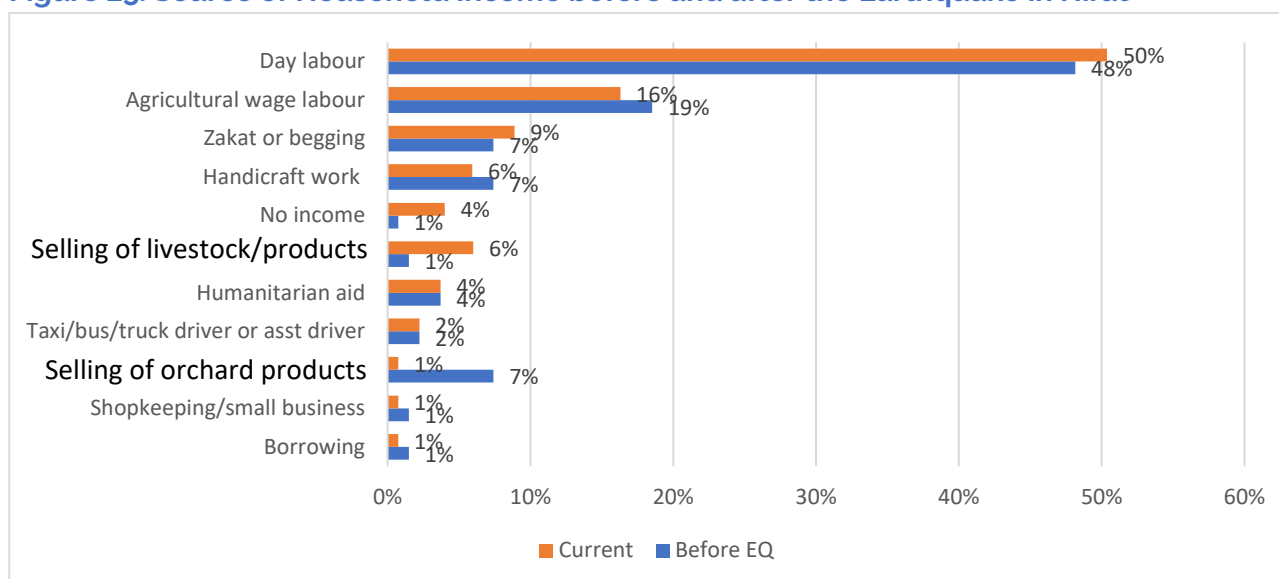
As presented in Figure – 24 below, affected households experienced a range of unexpected events, in addition to the earthquake, in the year preceding the survey, i.e. late 2023-late 2024. Droughts and floods were the most frequently reported events, affecting 83% and 73% of households, respectively. Injuries to a family member impacted 43% of households, while serious illness to a family member and crop failure each affected 8%. Livestock diseases and disabilities were less common, impacting 4% and 3% of households, respectively. Possibly, these events of shocks could have affected agriculture and household labour negatively.

Figure 24: Other Unexpected Events Negatively Impacted Livelihoods in Hirat



Consequently, affected households have continued to maintain largely the same livelihoods post the earthquake, but with some notable shifts. While day labour continued to provide income for most households, agricultural wage labour decreased from 19% to 16%. Income from sales of orchard products dropped from 7% to 1%. Such shifts in the livelihoods may be traced to the combined effects of the earthquake and the other events of shocks. Moreover, reliance on Zakat or begging increased from 7% to 9%, and a ratio of households without income rose from 1% to 4%.

Figure 25: Source of Household Income before and after the Earthquake in Hirat



Impact of the earthquake on basic household needs

The earthquake changed the types of basic needs prioritized by affected households. Prior to the earthquake, food had been by far the most important need identified by 91% (84% as 1st, 6% as 2nd and 1% as 3rd). Casual clothing and winter clothing had been ranked as 2nd-3rd priorities by roughly half the respondents, while heating materials and health care had been low in ranking but cited as critical among over 60% of respondents. Only 11% of respondents identified shelter as a critical need ranked between 1st to 5th.

Table 53: Households Needs Before Earthquake in Hirat

Household's Most Urgent Basic Need Before Earthquake	First		Second		Third		Fourth		Fifth	
	N	%	N	%	N	%	N	%	N	%
Food items	114	84%	8	6%	1	1%	0	0%	0	0%
Clothing (casual/daily wearing)	5	4%	50	37%	4	3%	6	4%	2	1%
Clothing (warm clothes for winter)	0	0%	26	19%	31	23%	3	2%	8	6%
Shelter (including tents, waterproof sheets, and other temporary shelter)	10	7%	1	1%	2	1%	2	1%	1	1%
Heating materials (heating material to cope with cold)	1	1%	19	14%	25	19%	20	15%	18	13%
House repair (including windows glazing or plastic cover)	0	0%	1	1%	11	8%	12	9%	7	5%
Household utilities (stove, dishes, cooker and others)	4	3%	2	1%	13	10%	22	16%	16	12%
Household materials (blanket, mattress, carpet and others)	0	0%	2	1%	5	4%	16	12%	20	15%
Clean drinking water	0	0%	6	4%	17	13%	20	15%	15	11%
Healthcare and medicine	1	1%	19	14%	22	16%	28	21%	21	16%
Education for children	0	0%	0	0%	2	1%	2	1%	4	3%
Sanitation facilities	0	0%	0	0%	1	1%	3	2%	13	10%

In the first month of the earthquake, shelter replaced food items to take the first place. As presented in Table – 54 below, shelter, including tents, waterproof sheets and other temporary structures, emerged as the top priority among 90% (73% as the 1st, 10% as 2nd, and 7% as 3rd-4th critical need). Food items were the second need prioritized by 77% (26% as 1st, 47% as 2nd, and 4% as 3rd-5th). Other critical needs included winter clothing, heating materials, casual clothing, and house repair, healthcare, among which respondents were distributed more or less evenly.

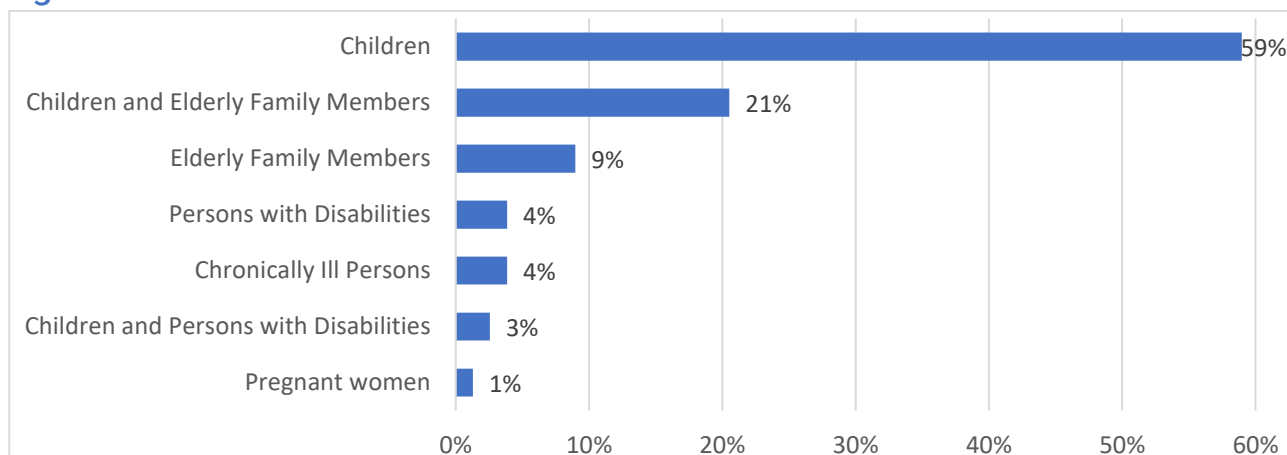
Table 54: Households Needs in the First Month post the Earthquake

Household's Most Urgent Basic Need Before Earthquake	First		Second		Third		Fourth		Fifth	
	N	%	N	%	N	%	N	%	N	%
Food items	35	26%	63	47%	3	2%	2	1%	1	1%
Clothing (casual/daily wearing)	0	0%	18	13%	11	8%	3	2%	3	2%
Clothing (warm clothes for winter)	0	0%	29	21%	29	21%	4	3%	6	4%
Shelter (including tents, waterproof sheets, and other temporary shelter)	99	73%	13	10%	4	3%	6	4%	0	0%
Heating materials (heating material to cope with cold)	0	0%	6	4%	36	27%	20	15%	11	8%
House repair (including windows glazing or plastic cover)	1	1%	3	2%	20	15%	21	16%	17	13%
Household utilities (stove, dishes, cooker and others)	0	0%	0	0%	12	9%	28	21%	14	10%
Household materials (blanket, mattress, carpet and others)	0	0%	0	0%	5	4%	15	11%	23	17%
Clean drinking water	0	0%	1	1%	5	4%	15	11%	21	16%
Healthcare and medicine	0	0%	2	1%	10	7%	19	14%	31	23%
Education for children	0	0%	0	0%	0	0%	0	0%	1	1%
Sanitation facilities	0	0%	0	0%	0	0%	0	0%	7	5%

The earthquake significantly disrupted affected households' livelihoods, thus undermining their capacity to meet their needs. A substantial majority (93.3%) reported having been severely affected, unable to meet their basic needs after the earthquake. A smaller portion (5.2%) indicated they were moderately affected, struggling to meet most needs. Only a minimal percentage (1.5%) reported to have been slightly affected, able to meet some needs. Disaggregated data by beneficiaries and non-beneficiaries were not made available.

Moreover, 58% of the earthquake affected households testified that their household members' needs were not addressed equally, and that more vulnerable members had their needs not addressed as compared with other members. Those households were asked to specify which members are more vulnerable. As presented in Figure – 26 below, children were reported by 59% as the most vulnerable within their households. 21% of households reported both children and elderly family members, and 9% identified elderly family members.

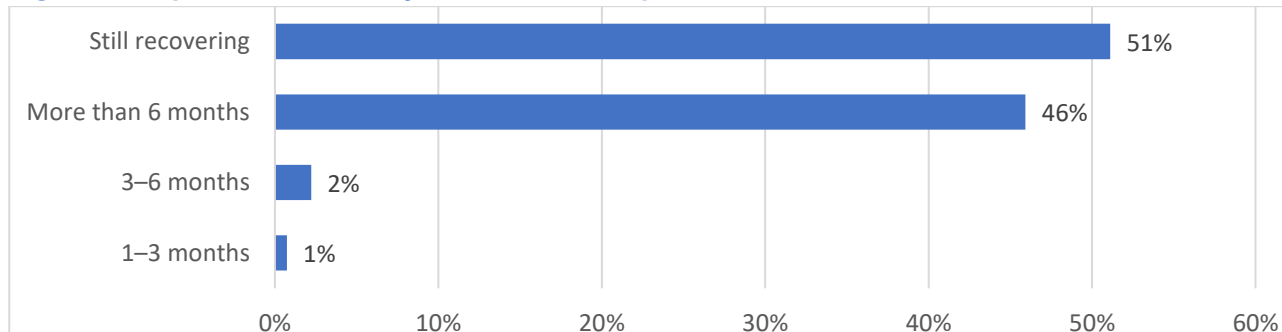
Figure 26: Vulnerable Household Members with Unmet Needs in Hirat



4.3.6 Perceived Recovery from the Earthquake

As presented in Figure – 27 below, majority of households took a considerable amount of time to recover from the impact of the earthquake. Only 1% of households, recovered within 1–3 months, and 2% recovered within 3–6 months. A significant portion, 46%, took more than 6 months to recover. Notably, 51% of households, were still in the process of recovering at the time of household survey, indicating the long-term and ongoing impact of the earthquake on these communities. Disaggregated data by beneficiaries and non-beneficiaries are not available.

Figure 27: Speed of Recovery from the Earthquake in Hirat

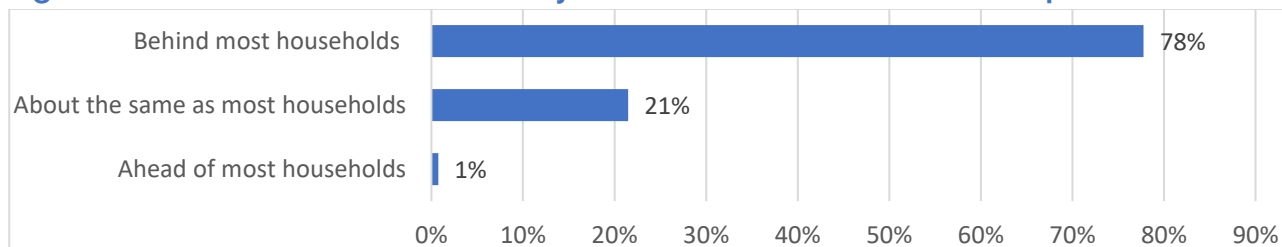


A significant majority of households (81.5%) were not able to resume their income-generating activities after the earthquake. Only a small fraction of households (0.7%) managed to resume their income-generating activities within 1 to 3 months, while 3% resumed within 3 to 6 months, and 14.8% took more than 6 months to resume. This finding is also supported by the finding in 4.3.5 that, setting aside day labour and wage labour, only 16% of respondents were currently engaged in independent source of livelihood (i.e. handicraft 6%, sales of livestock and livestock products 6%, driving 2%, sales of orchard products 1%, shopkeeping/small business 1%). This highlights the prolonged economic impact of the earthquake on the affected households. Given that beneficiary households comprised 41% of the respondents, a ratio of those unable to resume income generation activities among beneficiary households is presumed to be high.

As presented in Figure – 28 below, vulnerable households were asked to rate their perceived state of recovery relative to others in their community. A significant majority, 78% of respondents, felt that their household recovery progress was behind most other households.

Meanwhile, 21% of respondents perceived their recovery to be keeping pace with other households, and only 1% felt that they were ahead of other households. This indicates that many households felt they were struggling to catch up in their recovery efforts compared to others in their community.

Figure 288: Perceived State of Recovery relative to Others after the Earthquake in Hirat



The respondents identified various factors that had slowed down their recovery process. A lack of previous savings and financial resources was a common challenge. While some singled out lack of saving as a key factor, others attributed their slow recovery to a combination of factors including lack of previous savings, unavailability of humanitarian aid, lack of family or community support, repeated shocks (such as floods or crop failure), disability, injuries, illness, and absence of an adult male in a household.

4.3.7 Adopted coping strategies

Affected households responded to the earthquake, by taking the following measures over time⁶⁸. An initial focus on safe housing gradually gave way to a struggle at household financial management.

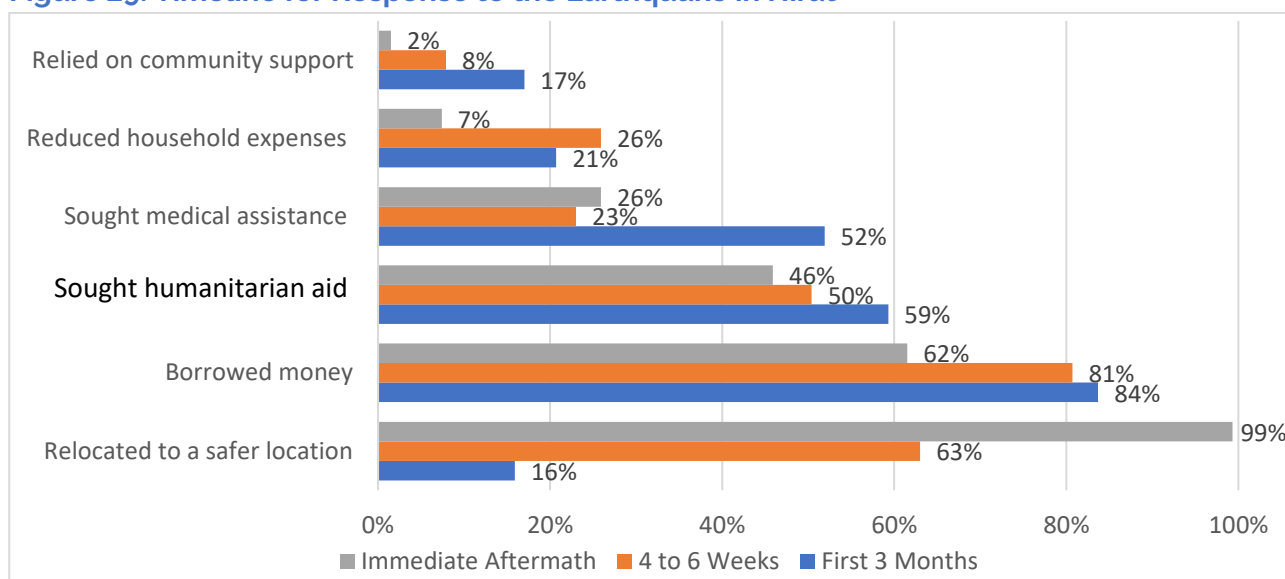
In the immediate aftermath: In the immediate aftermath of the earthquake, a substantial 99% of households relocated to safer locations. Other actions included borrowing money (62%), seeking humanitarian aid (46%), and seeking medical assistance (26%). Only a small ratio of affected households also resorted to such actions as reducing household expenses (7%) and relying on community support (2%).

In the first 4 to 6 weeks: Beyond the initial phase, the urgency for relocation subsided to 63% of affected households. On the other hand, those who borrowed money and reduce household expenses jumped from 62% to 81%, and from 7% to 26% respectively, possibly reflecting ongoing financial challenges. To a lesser extent, reliance on community support increased to 8%. Affected households continued to seek humanitarian aid (50%) and medical assistance (23%).

In the first 3 months: Only 16% of households relocated to a safer location in this phase. On the other hand, access to medical assistance and community support doubled to 52% and 17%. The need persisted to borrow money (84%) and rely on humanitarian aid (59%), while those reducing household expenses slightly declined to 21%.

⁶⁸ "Response to the shock" reported in the above paragraph was obtained in response to the multiple-choice question "How did your household respond to earthquake? In the immediate aftermath of earthquake, In first 4 to 6 weeks, In the first 3 months, In the first 6 months." No data were provided on response taken in the first 6 months, however.

Figure 29: Timeline for Response to the Earthquake in Hirat



As presented in Table – 55 below, these measures had only limited effect in addressing the post-earthquake needs of affected households. From the immediate aftermath to the first 4-6 weeks of the earthquake, it was reported that household needs had been partially met for 88.9%-86.7% of affected households, and fully met for only 3%-4.4%, while 7.4% stated that their needs were not met after these measures. Moreover, the first three months post-earthquake even saw an increase to 21.5% in households reporting that their needs were not met, suggesting that what little effects these measures might have in alleviating a difficult situation, may be short-lived.

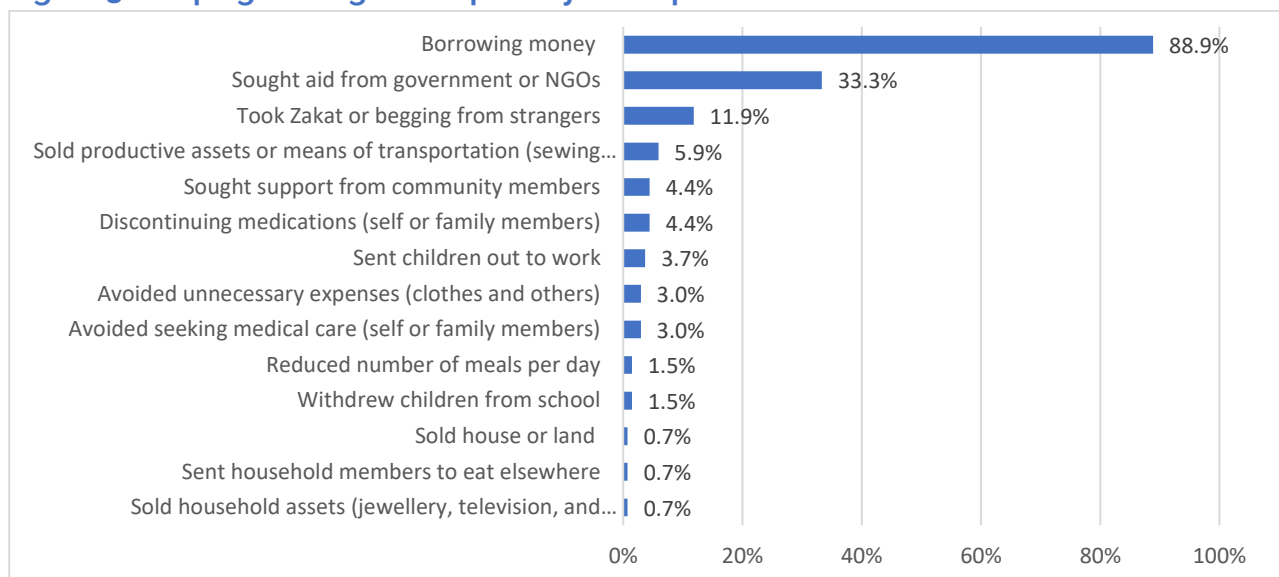
Table 55: Household Critical Needs met by Adaptive Approaches in Hirat

Household Critical Needs		Don't know	Fully met	Not met	Partially met	Total
Immediate Aftermath	N	1	4	10	120	135
	%	0.7%	3.0%	7.4%	88.9%	100%
4 to 6 Weeks	N	2	6	10	117	135
	%	1.5%	4.4%	7.4%	86.7%	100%
First 3 Months	N	2	5	29	99	135
	%	1.5%	3.7%	21.5%	73.3%	100%

The affected households adopted various coping strategies after the earthquake⁶⁹. As presented in Figure – 30 below, the overwhelming majority (88.9%) borrowed money. Some sought aid from the government or NGOs (33%) and took Zakat or begging from strangers (11.9%). Only a small ratio of them adopted different coping strategies, including harmful ones. A considerable number of affected households reportedly adopted multiple coping strategies.

⁶⁹ "Coping strategies" were asked in a multiple-choice question framed as "What immediate coping strategies did your household adopt following the earthquake?" after having inquired into limitations in response to the shock. Multiple choices provided partially overlapped with the earlier question on "response to the shock" at different points in time.

Figure 30: Coping Strategies Adopted by Earthquake Affected Households in Hirat



4.3.8 Role of aid

This section assesses the effectiveness of ADRA's earthquake response project (distribution of three months' worth of food, winter goods and daily necessities in March-April 2024), with focus on relevance and timeliness of these interventions to the needs of the most vulnerable households. This section mainly draws on household survey results with 55 beneficiaries.

Role of the project in supporting recovery of beneficiaries

The aid provided by ADRA was rated positively by beneficiaries. As shown in Table – 56, 53% of households reported that the aid contributed most significantly to their immediate survival needs, such as food and non-food items, while 47% rated it as an average contribution. In this regard, ADRA's PDM with 444 sampled beneficiaries confirmed an improvement in FCS among 66% of households and in rCSI among 96%.

In terms of livelihood recovery, health and well-being, and sense of dignity and hope, the majority of households rated ADRA's contribution as average: 51% for livelihood recovery, 52% for health and well-being, and 73% for sense of dignity and hope. However, a smaller percentage rated ADRA's contribution as least significant in these areas, with 8% for livelihood recovery, 9% for health and well-being, and 7% for sense of dignity and hope. The survey result on well-being may be compared to ADRA's PDM that reported a substantial improvement in well-being among 95 % of sampled beneficiaries and a slight improvement among 5% as a result of food aid.

Table 56: ADRA's Aid Contribution in Households' Survival and Recovery in Hirat

Aid Contribution Categories		Average	Most significant	Least significant	Total
Immediate survival (food, water, shelter)	N	26	29	0	55
	%	47%	53%	0%	100%
Livelihood recovery	N	27	22	4	53
	%	51%	42%	8%	100%
Health and well-being	N	24	18	4	46
	%	52%	39%	9%	100%

Sense of dignity and hope	N	22	6	2	30
	%	73%	20%	7%	100%

In reference to the findings in 4.3.6, however, it should be noted that 51% of affected households (a sample constitutes 41% beneficiaries and 59% non-beneficiaries) had not recovered yet at the time of the survey. Without disaggregated data on the current state of recovery among beneficiaries relative to non-beneficiaries, it is premature to conclude on the project's contribution to livelihood recovery.

Alignment of the project with household needs in Hirat

A significant majority, 78% of beneficiary households, reported that ADRA's aid completely addressed all their critical needs⁷⁰. Additionally, 16% of households felt that the aid mostly addressed their critical needs. Smaller portions of the surveyed households reported that the aid was slightly aligned (2%) or somewhat aligned (2%) with their needs.

When asked specifically about the extent to which each item distributed had addressed their needs, however, beneficiaries somewhat lowered and varied their ratings. As presented in Table – 57 below, beneficiary households generally rated ADRA's aid (food items, kitchenware, blankets, emergency lights, floor mats, hygiene supplies, and plastic linings for protection from the winter temperature) having addressed most or some of their urgent needs. The ratings ranged from the highest for food items (86% reporting completely or mostly addressed) to the lowest for protecting family members from cold (53% reporting completely or mostly addressed).

Table 57: Alignment of ADRA's Aid in Meeting Urgent Needs of the Households in Hirat

ADRA's provided aid		Completely addressed: The aid fully met our most urgent needs.	Mostly addressed: The aid met most of our urgent needs.	Somewhat addressed: The aid met some of our urgent needs.	Slightly addressed: The aid met only a few of our urgent needs.	Not addressed at all: The aid did not meet our urgent needs.	Total
Food items	N	1	46	7	1	0	55
	%	2%	84%	13%	2%	0%	100%
Kitchenware	N	6	39	7	2	1	55
	%	11%	71%	13%	4%	2%	100%
Personal hygiene	N	7	24	19	4	1	55
	%	13%	44%	35%	7%	2%	100%
Protecting family members from cold	N	7	22	21	3	2	55
	%	13%	40%	38%	5%	4%	100%

On the other hand, a total of 23 households (42%) reported having additional unmet critical needs that were not fully addressed by ADRA's project. The most commonly reported unmet need was house repair (including windows glazing or plastic cover) raised by 22% of households. 9% of beneficiaries pointed to unmet needs for shelter (including tents, waterproof sheets and temporary shelter). These items are both consistent with the finding in 4.3.5 about critical unmet needs after the earthquake. In addition, several households identified multiple

⁷⁰ The survey question was framed as "How much ADRA's provided aid was aligned with your household's critical needs and priorities after the earthquake?", to which respondents were to rate in a scale of "1. Not aligned at all" to "5. Completely aligned".

unmet needs, such as a combined need for clean drinking water, healthcare, and medicine, as well as education for children. Another raised the need for sanitation facilities along with the previous items.

Timeliness of the project in Hirat

A substantial 93% of beneficiary households reported that the aid was very timely, provided immediately when needed and 5% of households found the aid to be timely. This validates ADRA's PDM finding that 98% of beneficiaries reported that the three rounds of distribution occurred at the right time for them.

Meaningful access

Beneficiaries were asked how satisfied they were with the assistance provided, and if they know of anyone in need of yet excluded from humanitarian aid, the same questions asked in Kabul and Nangahar. Nonetheless, responses to these questions were not reported.

Safety and dignity

As presented in Table – 58 below, a substantial 89.1% of beneficiaries felt safe (completely or mostly) in accessing ADRA's aid, a much higher level of perceived safety than non-beneficiaries accessing other humanitarian aid. Among non-beneficiaries, 53.8% reported feeling safe (completely or mostly) in receiving the humanitarian aid while 15% did not feel safe, and 30% were unsure about their safety.

Table 58: Safety in Accessing Humanitarian Aid in Hirat

Feeling safe at all times travelling to receive the assistance (to/from home)		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
Non-beneficiaries	N	25	26	17	12	80
	%	31.3%	32.5%	21.3%	15%	100%
ADRA Beneficiaries	N	1	41	8	5	55
	%	1.8%	74.5%	14.5%	9.1%	100%
Total	N	26	67	25	17	135
	%	19.3%	49.6%	18.5%	12.6%	100%

The survey respondents were asked if they were treated with respect and dignity by the staff of humanitarian organisations both during the beneficiaries' selection process and provision of assistance. As presented in Table – 59, among ADRA beneficiaries, 96.4% reported feeling completely respected by project staff, with an additional 1.8% indicating they mostly felt respected. None of the ADRA beneficiaries reported negative experiences, and only 1.8% responded with "Don't Know." Conversely, among non-beneficiaries, only 37.5% reported feeling completely respected, while 10% mostly felt respected, and 3.8% indicated they did not really feel respected. It was unclear which organization they referred to that didn't treat them well.

Table 59: Respect and Dignity of Households by Aid Workers in Hirat

Treated with respect and dignity during selection and providing assistance		Don't Know	Yes Completely	Mostly Yes	Not Really	Total
Non-beneficiaries	N	39	30	8	3	80
	%	48.8%	37.5%	10%	3.8%	100%
ADRA Beneficiaries	N	1	53	1	0	55

	%	1.8%	96.4%	1.8%	0%	100%
Total	N	40	83	9	3	135
	%	29.6%	61.5%	6.7%	2.2%	100%

Accountability (suggestions and complaints)

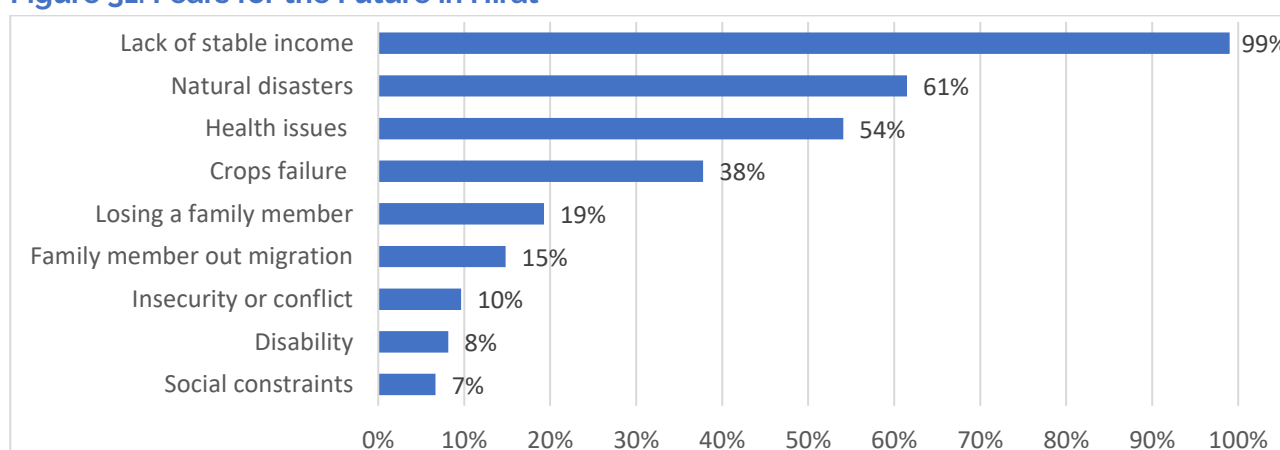
Although the survey included questions on awareness and use of the accountability mechanism, data were not made available.

4.3.9 Future prospects

Fears for the Future

Households regarded lack of stable income, natural disasters (earthquake, flood, drought and others), health issues, and crops failure as future risks. The most commonly expressed fear was lack of stable income, mentioned by 99% of households, followed by natural disasters (61%), health issues (54%), and crops failure (38%). For 87% of the households, the fear of lack of stable income was compounded by additional concerns, such as health issues and crop failures and natural disasters (like an earthquake).

Figure 31: Fears for the Future in Hirat



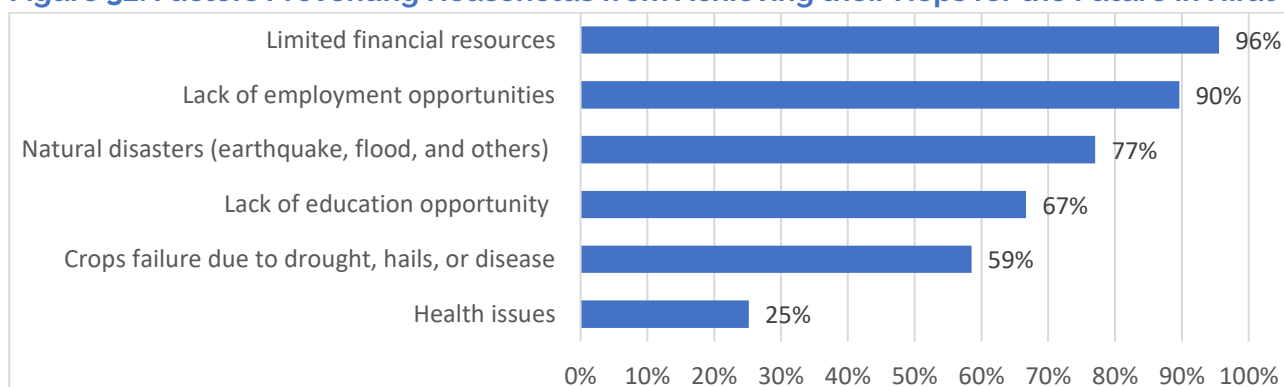
Hopes for the future

The households' main hopes for the future were strongly linked to their desires for secure and stable income, access to healthcare services, and improved housing and living conditions. A significant 99% of households stated that securing a stable income was their top priority. Access to healthcare services was equally important, highlighted by 96% of households. Given the health issues reported, such as injuries and illnesses during the recovery period, it's clear that reliable healthcare is essential for the well-being and resilience of these communities. The availability of healthcare services can directly impact households' capacity to recover and maintain their health in future crises. Improved housing and living conditions were cited by 97% of households as a primary hope for the future. This is particularly pertinent given the damage to shelters and homes caused by the earthquake. Better housing not only provides physical safety but also contributes to the overall stability and mental well-being of the affected families.

Factors preventing hopes

Among key factors perceived to prevent households from achieving their hopes for the future were limited financial resources, identified by 96% of respondents as the most significant barrier, and lack of employment opportunities noted by 90%. Natural disasters, such as earthquakes and floods, were cited by 77% of households, underscoring the impact of recurring crises. Additionally, 67% of households indicated that lack of education opportunities hindered their aspirations, while 59% pointed to crop failures due to droughts, hails, or diseases. Health issues were regarded by 25% of households as the major obstacles to achieving their future hopes.

Figure 32: Factors Preventing Households from Achieving their Hops for the Future in Hirat



5 VISIBILITY OF JAPANESE FUNDING

As presented in Table – 60 below, among the 261 beneficiary households interviewed across the three provinces (Kabul, Nangarhar, and Hirat), awareness of the funding source for the assistance received varied significantly by project and location. Overall, 72% of the households interviewed across all the provinces were aware of the source of funding, while 28% were not. Awareness levels appear to differ significantly by implementing partner and by geographical context, with the highest awareness reported in Surkhrood district (SVA returnees' response) and the lowest in Hirat (ADRA earthquake response).

Beneficiaries of SVA's Returnees Response project in Surkhrood district, Nangarhar, demonstrated the highest awareness level at 96%, followed by 93% of the beneficiaries from PWJ/YVO's Emergency Food Security Assistance project in Pachir Wa Agam district, Nangarhar. Approximately two thirds of the beneficiaries were aware of the funding source in REALs/Zamir Foundation's Emergency Food Security Assistance project in Kabul (71%) and AAR's Returnees Response project in Jalalabad city, Nangarhar (59%). However, less than half (47%) of the beneficiaries in ADRA's Earthquake Response project in Hirat reported being aware of the source of funding.

Table 60: Awareness of the Funding Source among the Beneficiaries

Projects and Implementing Agencies		Not Aware of Source of Funding	Aware of Source of Funding	Total
Returnees Response by AAR in Jalalabad city	N	22	32	54
	%	41%	59%	100%
Returnees Response by SVA in Surkhrood district	N	2	50	52
	%	4%	96%	100%
Emergency Food Security Assistance by PWJ/YVO in Pachir Wa Agam district		3	42	45
		7%	93%	100%
Emergency Food Security Assistance by REALs/Zamir Foundation in Kabul	N	16	39	55
	%	29%	71%	100%
Earthquake Response by ADRA in Hirat	N	29	26	55
	%	53%	47%	100%
Total	N	72	189	261
	%	28%	72%	100%

Respondents who were aware of the source of funding for the assistance they received were asked to identify it. Among them, the majority (93%) identified a Japanese organisation as the source, while 5% named the respective implementing agencies that provided the support, including AAR, SVA, PWJ or YVO, REALs or Zamir Foundation, and ADRA. Only 2% attributed the funding to the Government of Japan.

ANNEXE – I: SAMPLE SIZE CALCULATION SCREENSHOTS:

REALs Kabul

StatCalc - Sample Size and Power

Population survey or descriptive study
For simple random sampling, leave design effect and clusters equal to 1.

Population size:

Expected frequency: %

Acceptable Margin of Error: %

Design effect:

Clusters:

Confidence Level	Cluster Size	Total Sample
80%	33	66
90%	54	108
95%	74	148
97%	89	178
99%	120	240
99.9%	179	358
99.99%	230	460

ADRA Hirat

StatCalc - Sample Size and Power

Population survey or descriptive study
For simple random sampling, leave design effect and clusters equal to 1.

Population size:

Expected frequency: %

Acceptable Margin of Error: %

Design effect:

Clusters:

Confidence Level	Cluster Size	Total Sample
80%	33	66
90%	52	104
95%	71	142
97%	85	170
99%	113	226
99.9%	164	328
99.99%	206	412

SVA Nangarhar

StatCalc - Sample Size and Power

Population survey or descriptive study
For simple random sampling, leave design effect and clusters equal to 1.

Population size:

Expected frequency: %

Acceptable Margin of Error: %

Design effect:

Clusters:

Confidence Level	Cluster Size	Total Sample
80%	32	64
90%	49	98
95%	66	132
97%	77	154
99%	99	198
99.9%	137	274
99.99%	165	330

PWJ Nangarhar

StatCalc - Sample Size and Power

Population survey or descriptive study
For simple random sampling, leave design effect and clusters equal to 1.

Population size:

Expected frequency: %

Acceptable Margin of Error: %

Design effect:

Clusters:

Confidence Level	Cluster Size	Total Sample
80%	30	60
90%	46	92
95%	60	120
97%	69	138
99%	87	174
99.9%	114	228
99.99%	133	266

AAR Nangarhar

StatCalc - Sample Size and Power

Population survey or descriptive study
For simple random sampling, leave design effect and clusters equal to 1.

Population size:

Expected frequency: %

Acceptable Margin of Error: %

Design effect:

Clusters:

Confidence Level	Cluster Size	Total Sample
80%	31	62
90%	48	96
95%	64	128
97%	75	150
99%	96	192
99.9%	130	260
99.99%	155	310

ANNEXE – II: LIST OF DOCUMENTS CONSULTED

External documents, data, and literatures reviewed:

- Humanitarian Response Plan 2018 – 2020
- Humanitarian Needs and Response Plan 2021
- Humanitarian Needs and Response Plan 2022
- Humanitarian Needs and Response Plan 2023
- Humanitarian Needs and Response Plan 2024
- Afghanistan Drought Preparedness Plan 2024 (Slow-Onset Early Action Plan for Drought)
- Pakistan – Afghanistan Returns Emergency Response 2024
- UNHCR Operational Data Portal: Afghanistan Number of Returnees and IDPs
- Afghanistan Agriculture and Food Security Cluster Dashboard
- Afghanistan Food Security and Agriculture Cluster: Guideline on Food Security and Agriculture
- Afghanistan Food Security and Agriculture Cluster: Guideline on Food Security and Agriculture Cluster Response Packages (2022)
- Afghanistan Shelter Cluster Dashboard
- Afghanistan Shelter Cluster Vulnerability Criteria and Guidelines
- UNHCR Afghanistan Earthquake Emergency Six-Month Impact Report 2024
- World Food Programme (WFP): Targeting and Vulnerability Criteria
- Population Book (NSIA) Afghanistan Population Estimates for Afghanistan 2022 – 2023
- Afghanistan Living Conditions Survey 2017

Projects documents, data, and literature reviewed:

- AAR Japan Afghanistan Project Description: Distribution of food vouchers to returnees in Nangarhar province (Food voucher distribution to the returnees in Nangarhar province)
- AAR Japan Afghanistan Monthly Reports (January to June 2024)
- AAR Japan Afghanistan Amendments
- ADRA Project Description: Emergency food and wintering support for earthquake victims in Hirat Province, Afghanistan (Integrated Life-Saving Emergency In-kind Food and NFI Assistance to the Victims of Earthquake in Hirat Province, Afghanistan)
- PWJ Project Description: Emergency food assistance for vulnerable people in remote areas of Nangarhar province (Urgent food support for vulnerable households in remote areas of Nangarhar Province)
- REALs Project Description: Cash distribution project for food purchases to vulnerable groups in central Afghanistan (Project of Cash for Food for Vulnerable Households in Central Provinces, Afghanistan)
- SVA Project Description: Distribution of food and sanitary supplies to returnees in Nangarhar province (Distribution of food and WASH items for returnees in Nangarhar Province)

- Third Party Project Evaluation Report: Emergency Response to Improve Food Security and Build Resilience of Climate Affected Families Including IDPS and Returnees in Bamyan, Afghanistan (CWS)
- Third Party Project Evaluation Report: Improvement Project for WASH Environment for Returnees and IDPs in 2 Settlements of Nangarhar Province implemented by Japan Emergency NGO (JEN)
- Third Party Project Evaluation Report: Afghanistan Humanitarian Response Programme (Emergency response phase), Emergency Food Assistance in Nangarhar Province Implemented by Peace Winds Japan (PWJ)
- Third Party Project Evaluation Report: Save the Children Japan "*Integrated Humanitarian Response in Balkh Province through Food Security, Nutrition & WASH Interventions to the Communities*" Project
- Third Party Project Evaluation Report: SVA "*Afghan Humanitarian Crisis Response Support Programme in Emergency Response Period, Afghanistan*"
- Third Party Project Evaluation Report: Emergency Assistance (Phase-2) to Improve Food Security and Resilience of People affected by Climate Change (CWS)
- Third Party Project Evaluation Report: Support for Improving Access to Safe Water and Sanitation for Children and Residents in Poor Sanitation Environments in Hirat Provinces (NICCO and RSDO)
- Third Party Project Evaluation Report: Improving community's Resilience Through Cash for Food and Sensitisation Activities on Nutrition and Child Protection in Nangarhar Province (Save the Children)

ANNEX – III: TERMS OF REFERENCE

Terms of Reference for the evaluation of JPF-funded 2023 humanitarian response projects in Afghanistan

JPF seeks to engage the third party to conduct the Assessment of Vulnerability & Resilience in the JPF-funded Project Locations in Kabul, Nangahar & Herat, Afghanistan. This is the first phase of the three-stage evaluation process for 5 JPF-funded projects delivered in FY2023, as detailed below.


1. Background

Afghanistan continues to grapple with a protracted crisis in the face of four decades of conflicts and recurrent waves of displacements, exacerbated by localized, yet pervasive impacts of frequent natural disasters, such as earthquakes, droughts and floods. Furthermore, the Taliban takeover of 2021 marked overall reduction in conflicts associated with insurgency, international isolation, downturn of an aid dependent economy, state-sanctioned marginalization of women and girls, and heightened risks of gender-based violence, with multifaceted impact on different segments of the population. Characterizing Afghanistan as a protection emergency, the Humanitarian Needs & Response Plan (HNRP) 2024 calls for context-specific, gendered analysis of nature and severity of needs for different population groups. Such nuanced understanding of humanitarian needs is increasingly critical, given that limited availability of funding due to a suspension of large-scale international aid leaves no choice but to target the most vulnerable of all, focus only on acute humanitarian needs, distinguished from basic human needs, and selectively identify when and where to intervene. As relative stability under the de facto authority opens space for more developmental interventions, nonetheless, HNRP recognizes importance of ensuring close coordination of humanitarian actions with longer-term interventions addressing underlying layers of basic needs.

Japan Platform (JPF) has been supporting Afghanistan intermittently since 2001, and has been renewing funding commitments annually since 2017. In 2023, JPF funded a humanitarian response program in Afghanistan at JPY 289,931,280 in total composed of 8 projects, which was later supplemented by a returnee assistance program of JPY 190,604,709, delivered via 5 projects and an earthquake response program in Herat Province of JPY200,000,000, delivered via 4 projects. These projects were delivered by 9 Japanese NGOs, operating remotely via local partners or offices in various Provinces.

The question of target and focus, and the challenge in drawing distinction between acute humanitarian needs and basic human needs, as elucidated in the Afghanistan HNRP, are mirrored in the ongoing debate within JPF. Hard choices must be made when ever-rising humanitarian needs across the globe are to be met with limited funding available. JPF intends to gather lessons from various programs, including but not limited to Afghanistan, to inform discussion as to the rationale for JPF's engagement in protracted crises, and criteria for setting target and focus to maximize impact of its limited resources.

2. Purpose of the evaluation



The evaluation of JPF's 2023 program portfolio in Afghanistan aims to assess appropriateness of targeting, relevance and timeliness of interventions, and effective mainstreaming of protection and Do No Harm principles, keeping in sight of the persistent, if not deteriorating, vulnerability of the affected populations exposed to multiple shocks. In doing so, the evaluation interrogates what constitutes "acute humanitarian needs" as opposed to basic human needs, what can and cannot be realistically achieved with time-bound humanitarian actions, and what roles humanitarian actions may play vis-à-vis longer-term interventions addressing different layers of basic needs.

In doing so, the evaluation will respond to learning needs of the following key constituencies.

1) JPF's member organizations implementing humanitarian projects in Afghanistan

The evaluation will enable the implementing agencies to look at their respective projects from the perspective of the most vulnerable and marginalized. Specifically, the evaluation will shed light on:

- ① Ways in which the projects intervened into the critical moments of shocks,
- ② Extent to which they influenced affected people's survival, recovery and a sense of dignity and hope, and
- ③ Implications they might have, if any, to the compounding impact of recurrent and protracted crises on affected people's vulnerability and resilience at individual, household and community levels.

With renewed understanding of the dynamics in which crises-affected people find themselves, the implementing agencies will be able to reflect on appropriateness of targeting methods, relevance and timeliness of interventions, and effectiveness of approaches to protection and Do No Harm.

2) JPF

The evaluation will unpack multiple enablers and constraints that shaped decisions and actions taken by the implementing agencies in responding to the crises, and bring to light if and how JPF's funding scheme influenced such enablers and constraints. The evaluation will generate data and evidence that may inform JPF's decision making in the following regards:

- ① Target and focus: When/under what circumstances is JPF funding effective and when is it not? In the continuum of humanitarian to development and peace, which phases or aspects should JPF focus on in the context of protracted, underfunded humanitarian crises such as Afghanistan?
- ② Speed: How well is JPF prepared to respond to a rapid-onset emergency? Which aspects of JPF's application process and procedures influence the timeliness of response by implementing agencies?
- ③ Duration: Up to what point should JPF engage in a sudden onset emergency in the context of protracted crises? On what basis should JPF decide the timing of an exit?
- ④ Criteria for single-year vs. multi-year programs: What are advantages and disadvantages of single-year and multi-year programs respectively? When and to what aims is it effective for JPF to commit to multi-year programs?

3) A broader community of humanitarian agencies operating in and beyond Afghanistan

By illustrating multiple factors at play in shaping vulnerability and resilience of crises-affected people, the evaluation will interrogate the underlying assumption of the Afghanistan HNRP that acute humanitarian needs be clearly distinguished from basic human needs, and that humanitarian actions be focused yet linked to long-term interventions addressing different layers of the needs. In doing so, the evaluation questions a scope of humanitarian actions in a protracted crisis, and ways in which humanitarian agencies engage in such a crisis, generating insights that may be of interest to a broader

community of humanitarian agencies grappling with the Humanitarian-Development-Peace (HDP) nexus in the context of protracted, complex emergencies in and beyond Afghanistan.

3. Methodology


The evaluation is composed of three phases: 1) Third Party Assessment of Vulnerability and Resilience in project target areas, particularly focusing on the most vulnerable segments of the population, 2) Participatory After-Action Review by Japanese NGOs and local partners in each project, 3) A Sense-Making Workshop among the implementing agencies and JPF at the Afghanistan Working Group to collectively reflect on the learning questions on the basis of 1) and 2).

1) Third-Party Assessment of Vulnerability and Resilience

A context-specific assessment of vulnerability and resilience will be undertaken, with an aim to make voices heard from the most vulnerable segments of the target population in respective project areas. The Afghanistan HNRP identifies as the vulnerable groups women and girls, particularly female-headed households, recent returnees, households with a member with a disability, and rural households⁷¹. While being mindful of these segments, however, the evaluation seeks to locally define which individuals, households and communities may qualify as the most vulnerable, how and why. The evaluator may make use of the secondary data available and stakeholder interviews at provincial, district and community levels in distinguishing characteristics of the most vulnerable segments. On the basis of such locally defined indicators for vulnerability, the evaluator will then extract a sample of the most vulnerable individuals and households in the most vulnerable communities from the project target areas to explore the following questions.

- ① A current livelihood cycle: How do the most vulnerable people make their living currently? What are the seasonal patterns of income and expenditure in their households? When, and to what extent are these individuals and households able to satisfy their needs? Which types of needs, of whom within a given household, are met or unmet currently? How do they make their ends meet?
- ② Shocks to a livelihood cycle: In the past one year, what types of shocks have the most vulnerable people experienced? When, under what circumstances have such incidences occur? How significantly have such incidences disrupted their livelihood cycle, in what ways? What has been the compounding impact of multiple shocks on their lives?
- ③ Resilience against the shocks: What capacity have affected individuals, households and communities demonstrated to cope with and recover from the shocks? How so? What happened as a result? What types of needs and issues have they been able to address on their own, and what have they not? Why so? What differences may lie between those who are and are not able to cope with or recover from shocks?
- ④ Role of aid: To what extent have the most vulnerable people/households been informed of and able to access humanitarian aid in the event of aforementioned shocks? What might have been the barriers to information and access, if any? Did they feel that they have a say in planning, implementation and monitoring of humanitarian aid, and how so? In what ways have they made use of humanitarian aid, and to what effect? What difference, if any, has the humanitarian aid made in their survival, recovery and a sense of dignity and hope? How do they perceive limitations of the humanitarian aid, if any?

⁷¹ Nonetheless, concentration of people in need is the highest in an urban center such as Kabul. For the purpose of this evaluation, different natures of vulnerability and resilience will be explored in the rural and urban contexts.

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- ⑤ Future prospect: What hopes and fears do the most vulnerable people have for their future? What capacity and resources do they think they have to act individually or collectively on their hopes and fears? What are the types of external support do they desire? Why so?

2) Participatory After-Action Review

Japanese NGOs and their local partners will be taken through a facilitated process to self-reflect on their respective projects in light of the findings from the Third-Party Assessment of Vulnerability and Resilience.

At first, Japanese NGOs and their local partners will work in pair to produce a timeline of events that unfolded in the field and in Tokyo since/throughout the moments of concerned crises. In doing so, particular attention will be given to the timing and sequence of decisions and actions that led to delivery of the humanitarian aid on the ground, and interactions between the field and head offices in shaping such decisions and actions. A timeline exercise will also take into account the timing and procedures for funding applications to JPF.

Subsequently, each pair of Japanese NGOs and local partners will review the findings from the Third-Party Assessment of Vulnerability and Resilience, and discuss what this means to their projects. They will revisit the timeline, and reflect on what has worked and what has not in their projects, and see if and how they could have done things differently.

3) A Sense-Making Workshop

While the Participatory After-Action Review will be held project by project, a Sense Making Workshop will bring together Japanese NGOs, local partners and JPF across the projects to share and synthesize the lessons learnt from the Third-Party Assessment of Vulnerability and Resilience and the Participatory After-Action Review. A workshop will be designed in such a way for the participants to collectively reflect on the learning questions set forth, so as to enable shared learning between implementing agencies and collective feedback on how well JPF's funding scheme is working in the context of Afghanistan. The participants will also extract from this discussion replicable lessons that are of relevance to a broader humanitarian community and identify channels through which they may wish to take such lessons forward.

4. Scope of the evaluation

A total of 5 projects are subject to the evaluation, out of 17 projects under the three JPF-funded programs in Afghanistan in FY2023: the humanitarian response program (2 out of 8 projects), the returnee assistance program (2 of 5 projects) and the earthquake response program in Herat Province (1 of 4 projects). Of these, 3 NGOs continue to implement successive projects in Nangahar, Kabul and Herat in FY 2024. The Third-Party Assessment of Vulnerability and Resilience specifically focuses on these three provinces. While the Participatory After-Action Review will involve only those 5 NGOs and their local partners, the Sense-Making Workshop is open to all the members of the Afghanistan Working Group.

Table 1: A list of sampled projects

Programs	Projects	NGOs	Locations	Duration
The humanitarian response program	Urgent food support for vulnerable households in remote areas of Nangarhar Province	PWJ	Nangarhar	2023/3/31-2023/10/31
	Project of Cash for Food for Vulnerable Households in Central Provinces, Afghanistan	REALs	Kabul, Kapisa, Parwan & Wardak	2023/11/15-2024/5/31
The returnee assistance program	Food voucher distribution to the returnees in Nangarhar province	AAR	Nangarhar	2024/1/21-2024/7/21
	Distribution of food and WASH items for returnees in Nangarhar Province	SVA	Nangarhar	2024/2/16-2024/7/22
The earthquake response program in Herat Province	Integrated Life-Saving Emergency In-kind Food and NFI Assistance to the Victims of Earthquake in Herat Province, Afghanistan	ADRA	Herat	2023/11/1-2024/5/31

5. Roles

JPF's evaluation department provides oversight over the 2023 evaluation of the Afghanistan programs. An external research and evaluation consultant will be commissioned to undertake the Third-Party Assessment of Vulnerability and Resilience, producing a report that will respond to the key questions under the section 3 Methodology 1). An external research and evaluation consultant is expected to deliver: 1) an inception report, clearly justifying and specifying the methodology and tools for the Assessment of Vulnerability and Resilience, and 2) an assessment report, articulating the findings in response to the questions outlined in the ToR. S/he may be asked to assist in facilitation and documentation of the Participatory After-Action Review and the Sense-Making Workshop to be designed and delivered by JPF, in which case a contract extension will be negotiated separately.

JPF will closely coordinate with the Japanese NGOs who implemented the 5 sampled projects throughout the evaluation, and keep the Afghanistan Working Group informed of the progress as needed.

The following roles are envisioned of the concerned parties.

JPF

- 1) Ensure that the evaluation is performed in compliance with the agreed ToR.
- 2) Recruit and orient the external consultant to undertake the Third-Party Assessment of Vulnerability and Resilience
- 3) Coordinate with the Afghanistan Working Group (WG) and the Japanese NGOs whose projects are subject to the evaluation to ensure that the evaluation remains relevant to them.
- 4) Design and facilitate the Participatory After-Action Reviews and the Sense Making Workshop.
- 5) Document the outcomes of the workshops for learning and accountability.

External research & evaluation consultant

- 1) Design methodology and tools for the Assessment of Vulnerability and Resilience, based on the desk review and interviews with implementing agencies.
- 2) Conduct fieldwork in close coordination with the implementing agencies in Tokyo and in the field.
- 3) Analysis and report writing

Japanese NGOs whose projects are subject to the evaluation

- 1) Ensure their respective local partners are informed of the purpose and process of the evaluation, and introduce the external research and evaluation consultant to them.
- 2) Provide relevant information and documents for the assessment of vulnerability and resilience.
- 3) Be available for an interview with the external research and evaluation consultant.
- 4) Review and feedback on the inception report and research tools drafted by the external research and evaluation consultant.
- 5) Review and feedback on the assessment report on vulnerability and resilience.
- 6) Take part in the Participatory After-Action Review, and the Sense-Making Workshop.
- 7) Review and feedback on the workshop reports.

Local partners/offices

- 1) Facilitate access to the project areas for the external research and evaluation consultant, if and as needed.
- 2) Provide relevant information and documents for the assessment of vulnerability and resilience.
- 3) Be available for an interview with the external research and evaluation consultant.
- 4) Take part in the Participatory After-Action Review, and the Sense-Making Workshop.

Afghanistan Working Group

- 1) Take part in the Sense-Making Workshop.
- 2) Review and feedback on the workshop report.
- 3) Follow-up actions on the Sense-Making Workshop, if and as needed.

6. Schedule

An evaluation is expected to take 7 months from late August to late March 2025. An indicative schedule is as follows. A schedule for the fieldwork is subject to change, due to unforeseen circumstances that may arise.

#	Tasks	Responsible	Involved	Dates
1	Call for tender for the external research & evaluation consultant	JPF		1-21 July
2	Notification to shortlisted candidates	JPF		26 July
3	Interviews of the applicants	JPF		Week of 29 July
4	Signing of contract	JPF		12 August
5	Desk review documents available for the consultant	JPF	5 NGOs & local partners	By 12 August

6	An inception meeting for the consultant	JPF		12 August
7	Methodology & tool development	The consultant		12-29 August
8	A planning interview with the implementing agencies	The consultant	5 NGOs and local partners	25-29 August
9	Submission of the inception report & tools	The consultant		1 September
10	Feedback on the inception report & tools	JPF	5 NGOs	1-14 September
11	Finalization of the inception report & tools	The consultant	JPF	22 September
12	Field work	The consultant	5 NGOs & local partners	29 Sep-17 October
13	Submission of the first draft assessment report	The consultant		4 November
14	Feedback on the draft assessment report	JPF	5 NGOs	5-19 November
15	Submission of the final assessment report	The consultant	JPF	28 November
16	Planning for the Participatory After-Action Review	JPF		2 -6 December
17	The Participatory After-Action Review	JPF	5 NGOs & local partners	9-27 December
18	Draft workshop reports	JPF		10 January 2025
19	Feedback on the workshop reports	5 NGOs	Local partners	23 January
20	Finalization of the workshop reports on the Participatory After-Action Review	JPF		31 January
21	The Sense Making Workshop	JPF	Afghanistan WG & local partners	Early February 2025
22	Draft workshop report	JPF		28 February
23	Feedback on the draft workshop report	Afghanistan WG		14 March
24	Finalization of the workshop report on the Sense Making Workshop	JPF		21 March



ANNEX – IV: ASSESSMENT TOOLS