

**ENDLINE EVALUATION REPORT FOR EMERGENCY WASH AND EDUCATION  
ASSISTANCE TO RETURNEES, IDPS AND HOST COMMUNITIES IN COMMUNITY  
AND SCHOOLS IN NANGARHAR**

**EVALUATION CONDUCTED BY TAGHEER MOSBAT**

**MARCH 2020**



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## Acronyms

|       |  |
|-------|--|
| ACBAR | Agency Coordinating Body for Afghan Relief and Development |
| AHF   | Afghanistan Humanitarian Forum                             |
| CDC   | Community Development Council                              |
| CFS   | Child Friendly Spaces                                      |
| CHS   | Core Humanitarian Standards                                |
| DoE   | Department of Education                                    |
| DoRR  | Directorate of Refugees and Repatriation                   |
| DRRD  | Directorate of Rural Rehabilitation and Development        |
| FGD   | Focus Group Discussions                                    |
| HHs   | Household Survey   |
| IDPs  | Internally D   |
| JPF   | Japan Platform   |
| KII   | Key Informant Interview                                    |
| MoRR  | Ministry of Refugees and Returnees                         |
| PDC   | Provincial Development Council                             |
| SVA   | Shanti Volunteer Association                               |
| TLC   | Temporary Learning Classes                                 |
| TOR   | Term of Reference  |

## How to Read the Report?

This report is divided into six chapters: the first chapter presents a brief background of the project and its rationale, this chapter also outlines the purpose, the objectives and the scope of the evaluation assignment. Chapter Two presents the approach, the study area, the evaluation design and the methodology used. Chapter Three presents the analysis and discusses the major quantitative and qualitative findings of the evaluation exercise including progress on key indicators. While Chapter Four presents the lesson learned while Chapter Five presents the conclusion and recommendations for learning and future program adaptation. Chapter six presents the Annex.

## CHAPTER ONE

### INTRODUCTION

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#### 1.1 Background of the Project

As the conflict worsens, many IDPs have been flocking to Peri Urban areas in Nangarhar Province. This is in addition to a rapid increase of returnees from Pakistan. The Nangarhar Provincial Government and the local communities do accommodate Returnees and IDPs, but with insufficient infrastructure to provide daily livelihood opportunities and emergency relief assistance. In particular, the development of WASH systems are urgently required to help respond to the increasing numbers. They need a reliable source of water and knowledge of hygiene to improve their hygiene management. In addition, children of IDPs and Returnees require schooling and education facilities, and sanitary arrangements in these facilities, the lack of classrooms and safe latrines make it difficult for the existing public schools to say “yes” to these children. The classes are mostly held outdoors with students using open spaces as lavatory.

To respond to the above challenge, Shanti Volunteer Association (SVA) through funds from Japan Platform (JPF) designed and implemented the Emergency Wash and Education Assistance Project in two districts of Nangarhar province; Surkhrud and Deh-bala. The project started on Sep 10, 2018 and was completed on Sep 30<sup>th</sup>, 2019, aimed at ensuring that water sources are available through digging wells and helping to educate children in the target communities. The objective was to provide safe water supply, and enhance education and sanitation facilities together with hygiene awareness for IDPs and returnees.

#### 1.2 Key evaluation objectives

The key evaluation objectives were to verify the project activities and to report to JPF and SVA on the project accomplishments, accountability to local community, local government as well as the quality of work against the project log frame indicators and humanitarian standards.

## CHAPTER TWO

### EVALUATION METHODOLOGY

---

#### 2.1 Introduction

This chapter addresses the key methodological issues of the study focusing on the evaluation approach, evaluation design, study area, study population and units of analysis. Other areas of focus include, sample size and sampling techniques, the types and sources of data and study limitations.

## **2.2 Evaluation Approach**

TAGHEER used an interactive participatory approach and engaged JPF and SVA to conduct this evaluation exercise in order to ensure accountability and inclusiveness of all parties. The evaluation emphasised on assessing the Core Humanitarian Standard (CHS) whether

1. the humanitarian response was appropriate and relevant,
2. the humanitarian response was effective and timely,
3. the humanitarian response was based on communication, participation and feedback,
4. the humanitarian response was coordinated and complementary,
5. complaints were heard and addressed, and
6. the humanitarian actors continuously learnt and improved

As well as to understand if and how activities and outputs contributed to the project objectives and to what extent the log-frame indicators were achieved.

## **2.3 Evaluation Design**

The evaluation process employed a mixed method design because a single method on the evaluation of project may not have provided a comprehensive understanding of the problem. In addition, the findings may have minimised or distorted the experiences of the actors in the sector. The use of a combination of multiple methods helped to overcome the weakness and strengths of any one method used and to help provide a complete data set. The quantitative approach provided numerical data on the magnitude and extent of the activities/output's and achievements, while the qualitative approach provided the human context behind the numbers and complemented the assessment with the focus of problem resolution.

## **2.4 Study Area**

As the project was implemented in two districts of Nangarhar province (Surkhrud and Deh Bala districts), the evaluation also targeted the same districts to explore the project work for WASH facilities, "Wells", temporary classroom and latrine construction as well as hygiene awareness and education.

## **2.5 Study population, Units of analysis, Sample size, and Sampling procedure**

The study population involved households in Nangarhar (Surkhrud and Deh Bala districts), teachers, School Management Committee (SMC) members and students in the targeted area from IDPs and returnees from Pakistan. The following stakeholders were interviewed through KII and FGD guides at different stages of this evaluation assignment.

1. DoRR, DRRD, DoE, UN-OCHA,
2. SVA staffs in Afghanistan and Japan
3. FGDs with Well Maintenance / Management Committee (WMC)

The majority of key informants were identified from the semi-structured and oral history interviews. All of the interviews were conducted face-to-face using open-ended questions which allowed the asking of a wide range of questions yielding detailed responses.

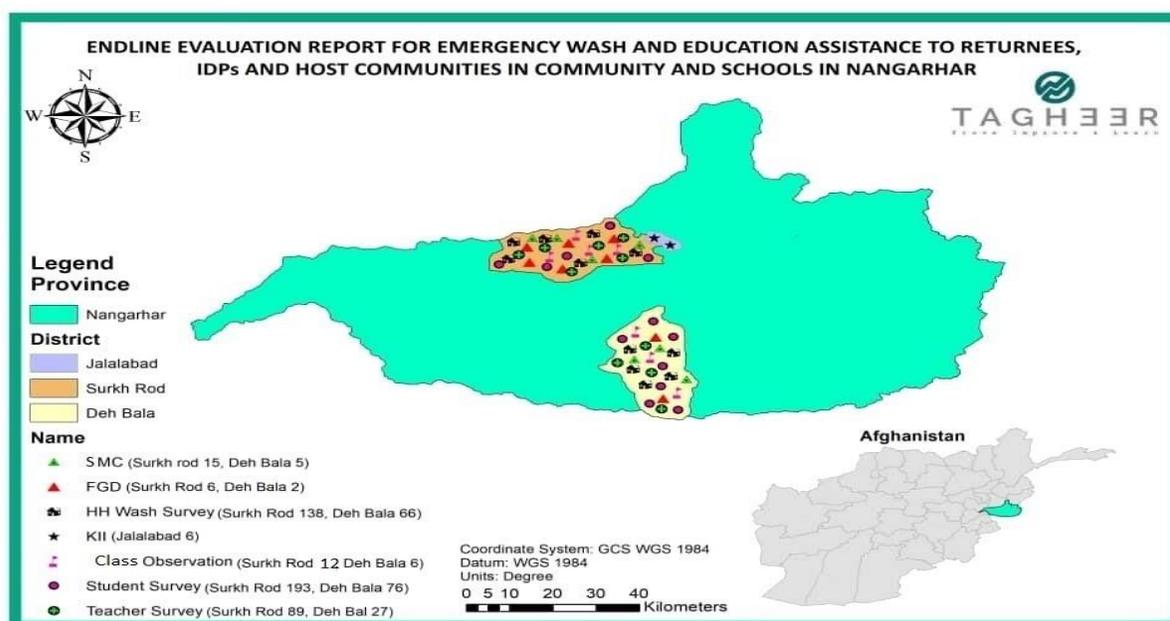
For the purpose of this assessment, the selected households were the primary unit of analysis with local communities forming the study's secondary unit of analysis. This was necessary because households do not function in a vacuum – they are shaped and influenced by their context. In turn, they also shape and influence the social context. Focusing on households and their members only would have missed the supportive and pivotal role played by the context and other members of the community in the study area. Purposive sampling techniques were used to select the respondents for KIIs and FGDs. A purposive sampling technique is a process where respondents in the study are deliberately selected to reflect particular features including personal profiles, positions and their role and engagement in the project. A random sampling system was used to select students for the survey while respondents for the HH survey were selected through the advice of SVA field staff.

**Table 1: Sample Size**

| S/N | Target Group | Planned sample | Actual Realized | Sample | % Achievement | of |
|-----|--------------|----------------|-----------------|--------|---------------|----|
| 1.  | Household    | 197            | 204             |        | 104%          |    |
| 2.  | Students     | 257            | 269             |        | 105%          |    |
| 3.  | Teachers     | 116            | 116             |        | 100%          |    |
| 4.  | SMC members  | 20             | 20              |        | 100%          |    |

Data were collected using “Kobo” on android phones which is an online tool used for the collection and synchronisation of data. The survey used household surveys and face-to-face interviews which were conducted with household members, teachers, SMC members and students as per Table 1.

**Photo 1: Map**



## 2.6 Limitation

The evaluation process included limitations on beneficiary sampling as TAGHEER had planned to select the beneficiaries using systematic random sampling using the list of the beneficiaries who had received the project services. This approach was not possible and therefore we had to switch to select them conveniently given the fact that the beneficiary list was not shared by SVA for all project activities in both districts and because some of the beneficiaries were displaced from the previous locations where they were supported during the project.

Also, the data collection for this project started a little later than planned as the SVA management/staff in Afghanistan were on a planned visit to Japan.

Despite the limitation, these findings are considered to present a credible assessment of the project’s accomplishments.

FINDINGS

This chapter presents the main findings from the evaluation. The chapter comprises basic demographics of the respondent households and key findings on Providing Water wells, Hygiene Awareness and Education, and **Develop water and learning environments at schools**, and how the project implementation met **Core Humanitarian Standards (CHS)**. The findings were triangulated with secondary data sources covering the analysis of the evaluation and measuring the positive and negative changes/outcomes on relevant indicators at the household level. More specifically, the findings of the study are presented to reflect the indicators in the log-frame.

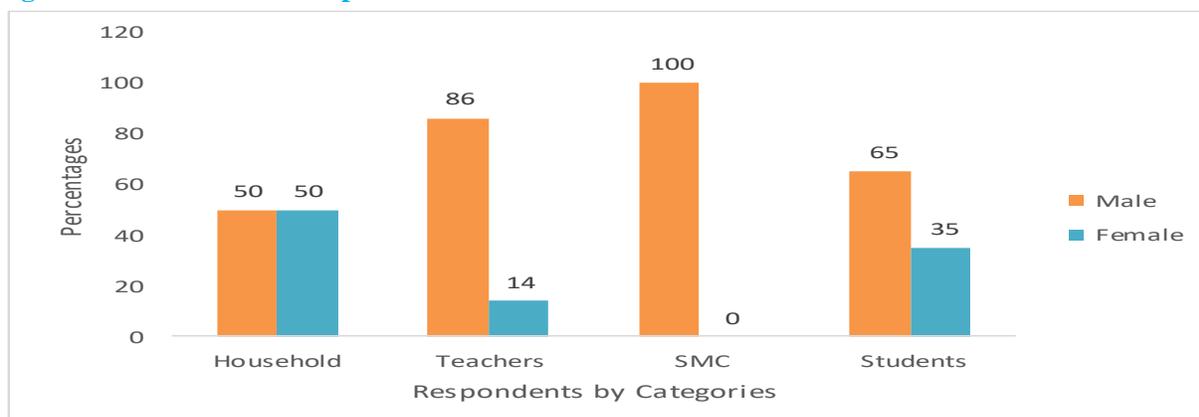
**3.1 Demographic Characteristics of the Respondents**

This section presents information on beneficiaries’ socio-demographic parameters which is the age and gender of the study respondents. The respondents included household members, teachers, SMC members and children of IDPs and returnees as students. They benefited from water supply, temporary classrooms, sanitary latrines and hygiene education.

**3.1.1 Gender of the Respondents**

The evaluation revealed that about fifty percent (50%) of the households of the returnee respondents were males and fifty percent (50%) were females, while 86 percent of teacher respondents were males, and 14 percent were females. About 65 percent of participating students were males while 35 percent were females, while all SMC respondents were male as shown in Figure 1.

**Figure 1: Gender of the Respondents**



**3.1.2 Age of the Respondents**

TAGHEER interviewed 269 students of which 68.8 percent were between 11 and 18 years of age and 31.2 percent were from 6 to 10. Out of 204 household respondent’s 49 percent were between the ages of 18 to 30, 22.5 percent were between 31 and 40 years and 28.1 percent were 41 years and above. Interviews were conducted with 116 teachers where 47.5 percent were between 18 and 30 years, 28.4 percent were between 31 and 40 years and 24.1 percent were 41 years and above. Twenty SMC members were interviewed, where 58.3 percent of were 41 years and above and 41.7 percent were between 31 and 40 years of age.

**Table 2: Respondents by Age**

| Age Groups (Years) | No. of HH Respondents | No. of Teachers | No. of SMC | No. of Students |
|--------------------|-----------------------|-----------------|------------|-----------------|
| 6 – 10             | 0                     | 0               | 0          | 84              |
| 11 – 18            | 0                     | 0               | 0          | 185             |
| 18-30              | 100                   | 55              | 0          | 0               |
| 31-40              | 46                    | 33              | 9          | 0               |
| 41 and above       | 58                    | 28              | 11         | 0               |
| <b>Total</b>       | <b>204</b>            | <b>116</b>      | <b>20</b>  | <b>269</b>      |

*Source: Field Survey 2020*

### 3.2 Providing Water Wells

Access to water is a fundamental human right and essential for life, health and dignity. Timely and adequate provision of clean water services to the uprooted people is particularly important given the vulnerability of their situation. Households' perception towards practices in safe water would provide some insights on their level of awareness and knowledge on safe water and would be a valuable input on the possible interventions preferred by community members.

**Photo 2: View of Well in Kuz Shikh Mesri**

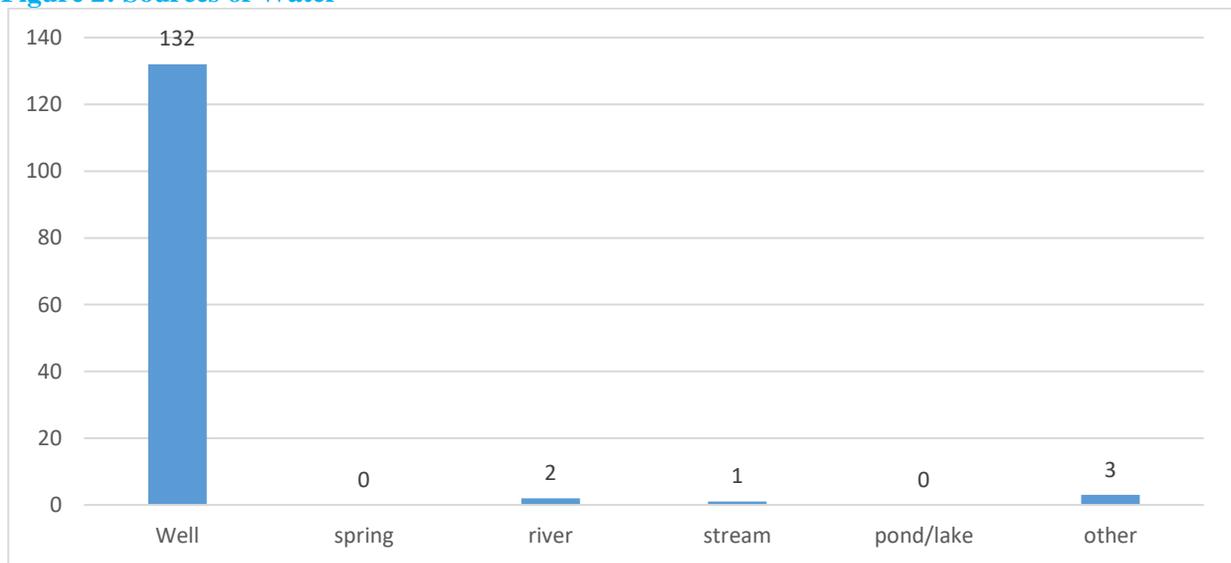


#### 3.2.1 Access to safe / clean water

Eight water wells were constructed in Kuz Shikh Mesri community of Surkhrud district to improve access to clean/safe water for target population.

During the survey exercise, the HH beneficiaries and teachers in Surkhrud were asked by the evaluation team about their main source of water, if they use the wells installed/constructed by SVA. Out of 138 total surveyed HH in Surkhrud; 132 (95.6%) are using water from the SVA constructed wells while the remaining 6 participants (4.4%) are still using water from un-hygienic sources. This means some people are still not convinced or educated to use clean and safe water. See Figure 2 for more information.

**Figure 2: Sources of Water**



The SVA project report on the water usage survey indicated that 644 households (approx. 4,229 people) were found to have access to water at not more than 500 m away from their homes which is the recommendation based on the Sphere Standards. This number was found correct during the TAGHEER evaluation exercise; where the Safe water/well distance from a beneficiary home in Shekh Misri community “Surkhrud” was reported at 20 – 120 meters. Safe water at such a short distance from home but some people still using water from other un-hygienic sources is a question mark about their awareness, education, and beliefs, which can be the center of attention for SVA in the next phase.

### 3.2.2 Water quality

Water quality refers to the chemical, physical, biological, and radiological characteristics of water. It is a measure of the condition of water relative to the requirements of one or more biotic species, or to any human need or purpose.

Timely and adequate provision of clean water to refugees is of special importance given that they have traditionally faced difficulties in exercising their rights fully and are very prone to exploitation.

The evaluation revealed that the 8 wells constructed in the project were subject to water quality tests to confirm that they conform to the standard set by the Ministry of Public Health for a safe water supply. In order to ensure water safety the water source is kept at a sufficient distance from any contamination source and the beneficiaries are advised not to install any contamination sources, (such as toilets or watering animals), near the well after its completion; attention is paid so that no contaminations occurs thereafter.

The evaluation found that SVA contracted DACAAR, which is the Nangarhar Province WASH Cluster Lead to conduct water quality tests and confirm whether the water could be used. The results revealed that 100 percent of all 8 wells tested negative for bacteriological analysis, meaning that the water was safe and no further treatment was recommended. The test results were observed by the TAGHEER evaluation team. Survey results indicate that 100% of students were satisfied (92% with high category and 8% at medium with no student reporting low), while rating the taste of drinking water from the newly constructed wells.

The evaluation found that all water wells were checked and handed over to the WMC that manages water sources for routine maintenance and quality.

### 3.3 Hygiene Awareness and Education

In this component, awareness of hygiene was emphasized in order to ensure that IDPs and the returnees could enjoy safe WASH environments. The purpose of this was to mitigate the risk of the IDPs and returnees contracting infectious diseases at their refugee camps. With respect to hygienic practices, there have been many cases where people contracted waterborne diseases such as diarrhea due to a lack of basic knowledge about hand washing and appropriate water management. Therefore, lectures and awareness for sanitation and hygiene awareness were conducted to promote awareness. Below picture indicates a hygiene education session organized by SVA for female beneficiaries.

Photo 3: Hygiene Awareness Session in Kuz Shikh Mesri



#### 3.3.1 Hygiene awareness and practices at Household level

204 Household survey respondents were asked if they had attended any hygiene education sessions provided by SVA. The results show that 99 percent of the respondents attended the session, while 1 percent did not but another member from their family attended the sessions in their place. The review of secondary data from SVA also revealed that hygiene awareness-raising activities were conducted for 740 households.

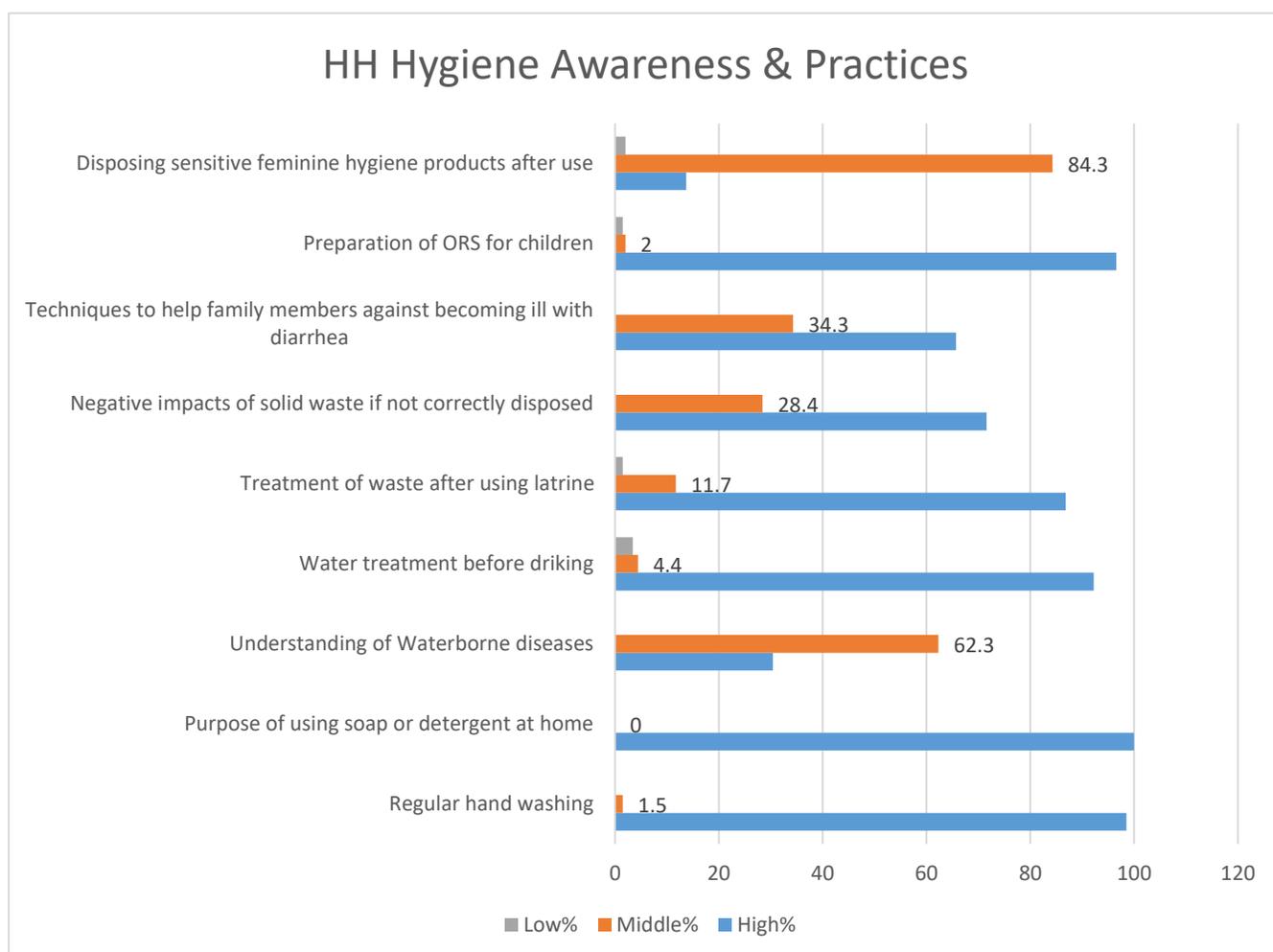
The hygiene awareness activities were famous in the community and more people participated in these awareness sessions than planned.

The household survey by TAGHEER in the evaluation revealed that on average basis, 72.8 percent of the respondents had high knowledge of hygiene, 24.4 percent had medium, and around 1 percent had low knowledge of hygiene. Below table indicates detailed scoring

**Table 3: HH Hygiene Awareness and Practices**

| HH Hygiene Awareness and Practices  | High%        | Middle%      | Low%        |
|---|--------------|--------------|-------------|
| <b>Regular hand washing</b>   | 98.5         | 1.5          | 0           |
| <b>Purpose of using soap or detergent at home</b>                           | 100          | 0            | 0           |
| <b>Understanding of Waterborne diseases</b>                                 | 30.4         | 62.3         | 0           |
| <b>Water treatment before drinking</b>                                      | 92.2         | 4.4          | 3.4         |
| <b>Treatment of waste after using latrine</b>                               | 86.8         | 11.7         | 1.5         |
| <b>Negative impacts of solid waste if not correctly disposed</b>            | 71.6         | 28.4         | 0           |
| <b>Techniques to help family members against becoming ill with diarrhea</b> | 65.7         | 34.3         | 0           |
| <b>Preparation of ORS for children</b>                                      | 96.6         | 2            | 1.5         |
| <b>Disposing sensitive feminine hygiene products after use</b>              | 13.7         | 84.3         | 2           |
| <b>Hygiene Awareness - Aggregate Value</b>                                  | <b>72.83</b> | <b>25.43</b> | <b>0.93</b> |

**Figure 3: HH Hygiene Awareness & Practices**



### 3.3.2 Hygiene education in Schools

The review of secondary data from SVA revealed that hygiene education activities were conducted at one school each at Surkhrod and Deh Bala districts. First, the school management committee consisting of ten members including teachers, government officials, students and community residents was set up at each school. Thereafter, hygiene education training was conducted to 136 teachers and the School Management Committee members. Reports from SVA indicates that the hygienic activities in both schools improved due to the hygiene education provided there.

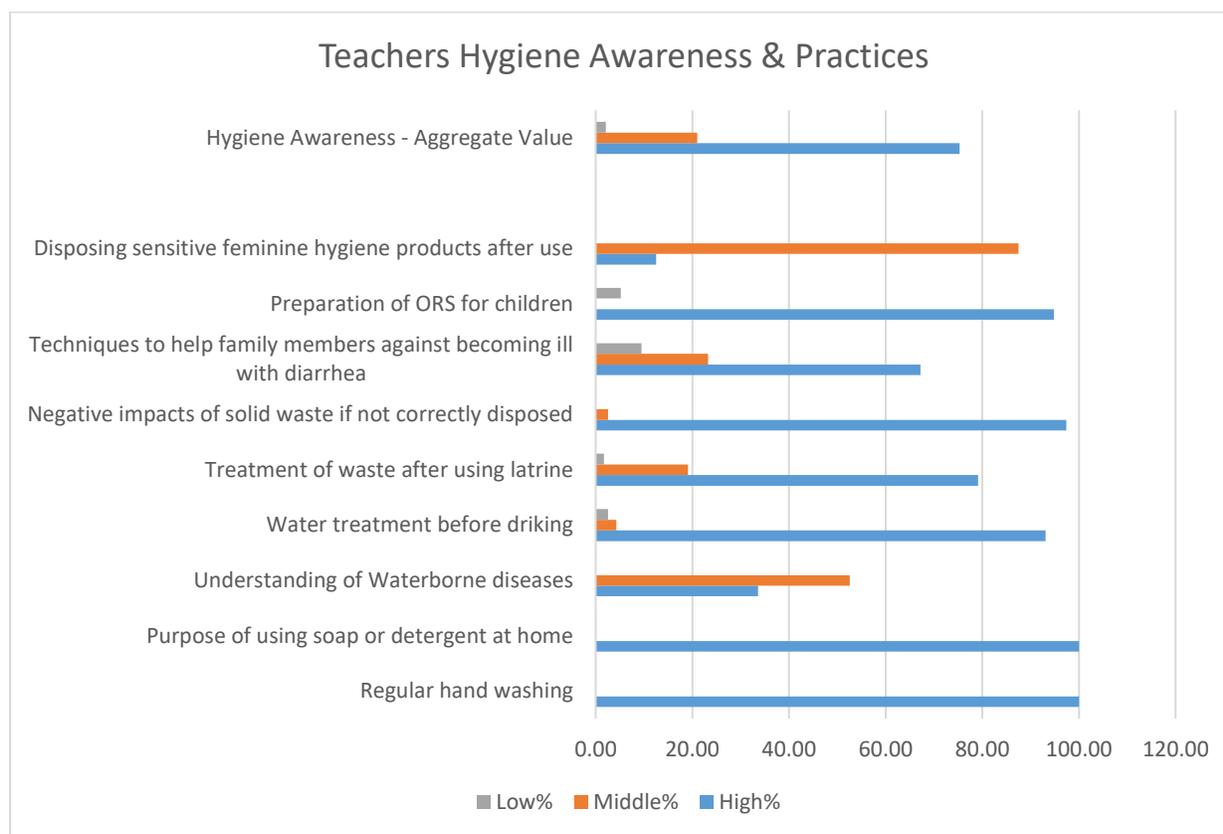
TAGHEER Interviews during the evaluation exercises with the school-teachers and students confirmed that both schools had practices such as using toilets properly, hand washing and beautifying school interiors. In addition to daily hygiene education two events on water hygiene education were held in both schools.

The teachers surveyed by TAGHEER revealed that on average basis, 75 percent of the teachers had high knowledge of hygiene, 21 percent had medium and 2 percent had low knowledge of hygiene. The teachers survey was carried out for 116 teachers who were trained by SVA.

**Table 4: Teachers Hygiene Awareness and Practices**

| <b>Teachers Hygiene Awareness and Practices</b>                      | <b>High%</b> | <b>Middle%</b> | <b>Low%</b> |
|--|--------------|----------------|-------------|
| Regular hand washing   | 100.00       | 0.00           | 0.00        |
| Purpose of using soap or detergent at home                           | 100.00       | 0.00           | 0.00        |
| Understanding of Waterborne diseases                                 | 33.62        | 52.59          | 0.00        |
| Water treatment before drinking                                      | 93.10        | 4.31           | 2.59        |
| Treatment of waste after using latrine                               | 79.13        | 19.13          | 1.74        |
| Negative impacts of solid waste if not correctly disposed            | 97.41        | 2.59           | 0.00        |
| Techniques to help family members against becoming ill with diarrhea | 67.24        | 23.28          | 9.48        |
| Preparation of ORS for children                                      | 94.83        | 0.00           | 5.17        |
| Disposing sensitive feminine hygiene products after use              | 12.50        | 87.50          | 0.00        |
|  |              |                |             |
| <b>Hygiene Awareness - Aggregate Value</b>                           | <b>75.32</b> | <b>21.04</b>   | <b>2.11</b> |

**Figure 4: Teachers Hygiene Awareness & Practices**



As per the SVA reports, during the training for teachers and the school management committee, the teachers at the school in Deh Bala District requested that junior and senior high school students (7th to 12th graders) should also receive hygiene education. After the approval of the Principal and School Management Committee, teachers who received the training by SVA provided hygiene education to junior and senior high school students in both target areas. In order to increase the effectiveness of hygiene education for junior and senior high school students a hygiene kit was distributed to 1,445 students (179 female students in Deh Bala district, 984 male students and 282 female students in Surkhrod district).

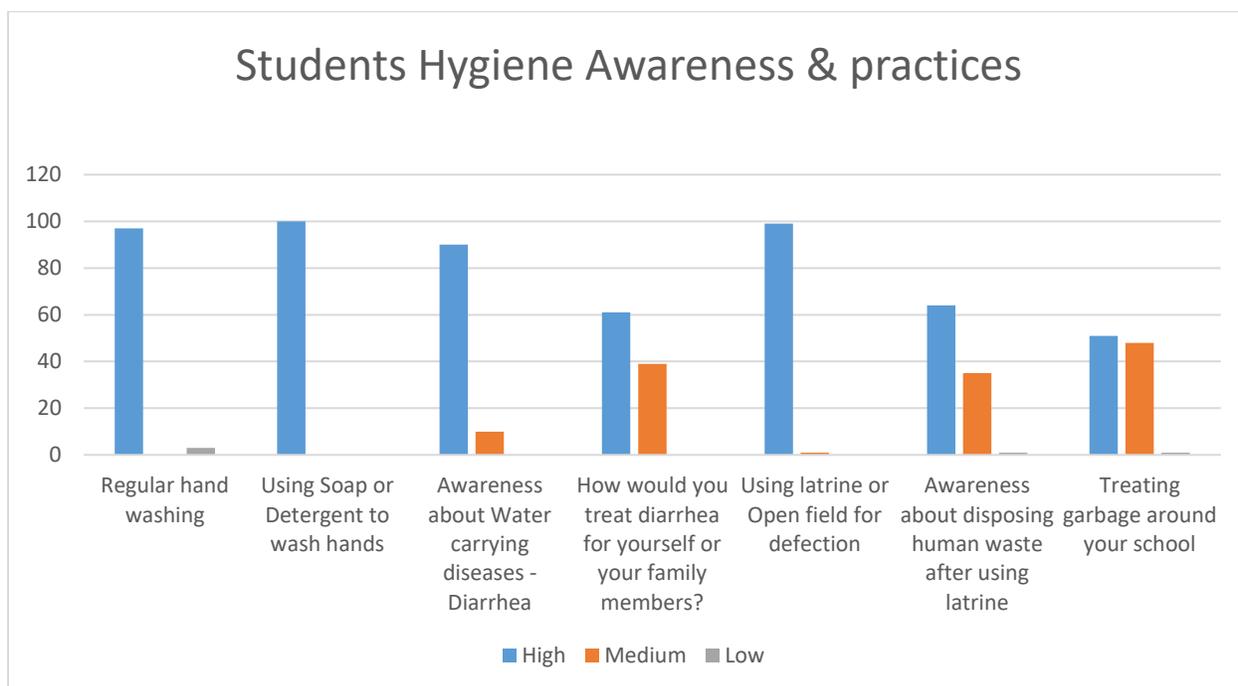
The survey conducted by the evaluation team with around 269 students revealed the below results for the students' knowledge and application of hygiene practices. Around 80% of students have a high level of understanding for knowledge and practice regarding personal and school hygiene. The below table indicates this score.

**Table 5: Students Hygiene Awareness & practices**

| Students Hygiene Awareness & practices                            | High% | Middle% | Low% |
|---|-------|---------|------|
| Regular hand washing  | 97    | 0       | 3    |
| Using Soap or Detergent to wash hands                             | 100   | 0       | 0    |
| Awareness about Water carrying diseases - Diarrhea                | 90    | 10      | 0    |
| How would you treat diarrhea for yourself or your family members? | 61    | 39      | 0    |
| Using latrine or Open field for defecation                        | 99    | 1       | 0    |

|   |              |           |             |
|---|--------------|-----------|-------------|
| Awareness about disposing human waste after using latrine | 64           | 35        | 1           |
| Treating garbage around your school                       | 51           | 48        | 1           |
|   |              |           |             |
| <b>Average</b>  | <b>80.28</b> | <b>19</b> | <b>0.71</b> |

Figure 5: Students Hygiene Awareness & practices



### 3.4 Develop water and learning environments at schools

In line with the project plan

1. 18 temporary classrooms (12 in Surkhrud and 6 in Deh-bala districts),
2. 4 latrine sets (12 latrines in Surkhrud and 4 in Deh-bala districts) for boys and girls and
3. water storage facilities were installed to help improve the existing learning environments accommodate the IDPs and Returnee children in their schools.
4. One water well was constructed in Deh-bala district, Shpoly School

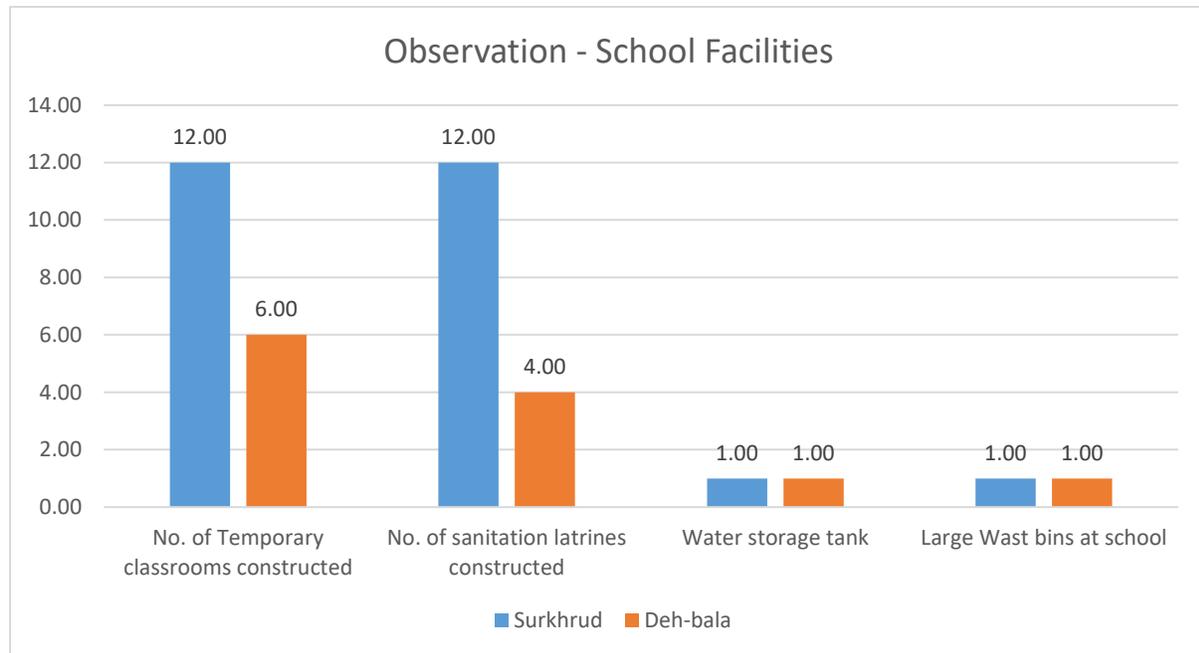
#### 3.4.1 Schools Facilities Observation

TAGHEER observed 18 TLCs of which 12 were in Surkhrud and 6 were Deh bala districts of Nangarhar. 12 out of 18 which were observed TLCs were mixed (boys and girls) and 6 were only for girls.

Key informant interviews conducted by TAGHEER revealed that both targeted schools in Surkhrud and Deh-bala were inspected by DoE, DoRR, and DRRD; after the approval of DoE, the facilities were handed over by SVA to the School Management Committee and the DoE. TAGHEER reviewed and verified the letter of approval/handover of the newly established facilities in both schools.

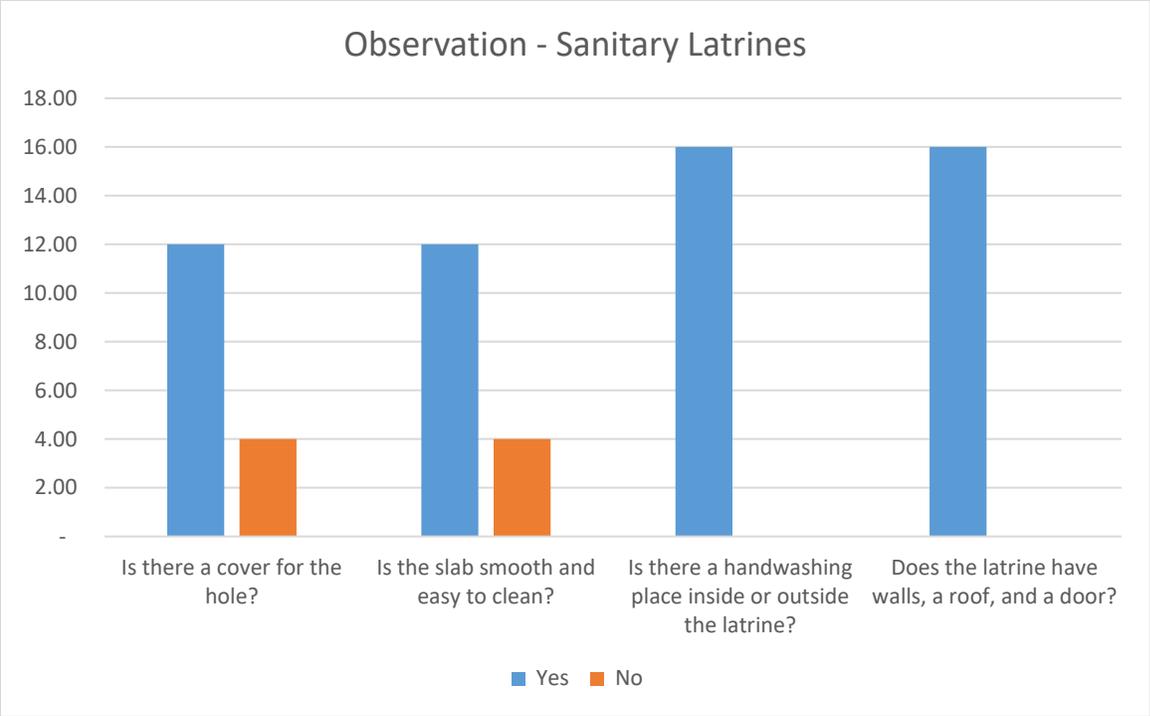
The observation exercise revealed that the school in Surkhrod district was supported by SVA for 12 classrooms, 2 male and 1 female toilet set, a water storage tank and a hand-washing place while the school in Deh-bala was supported for six classrooms, a female toilet set, a well, and a water storage tank. Classroom equipment was provided to the temporary classrooms set up in both schools. There were undulations on the ground of the construction facility which were likely to hinder children's safety management and emergency evacuation in the event of a disaster such as an earthquake. Large recycle bins were also observed at the target schools in Surkhrod and Deh Bala districts to support hygiene and sanitation.

**Figure 6: Observation - School Facilities**



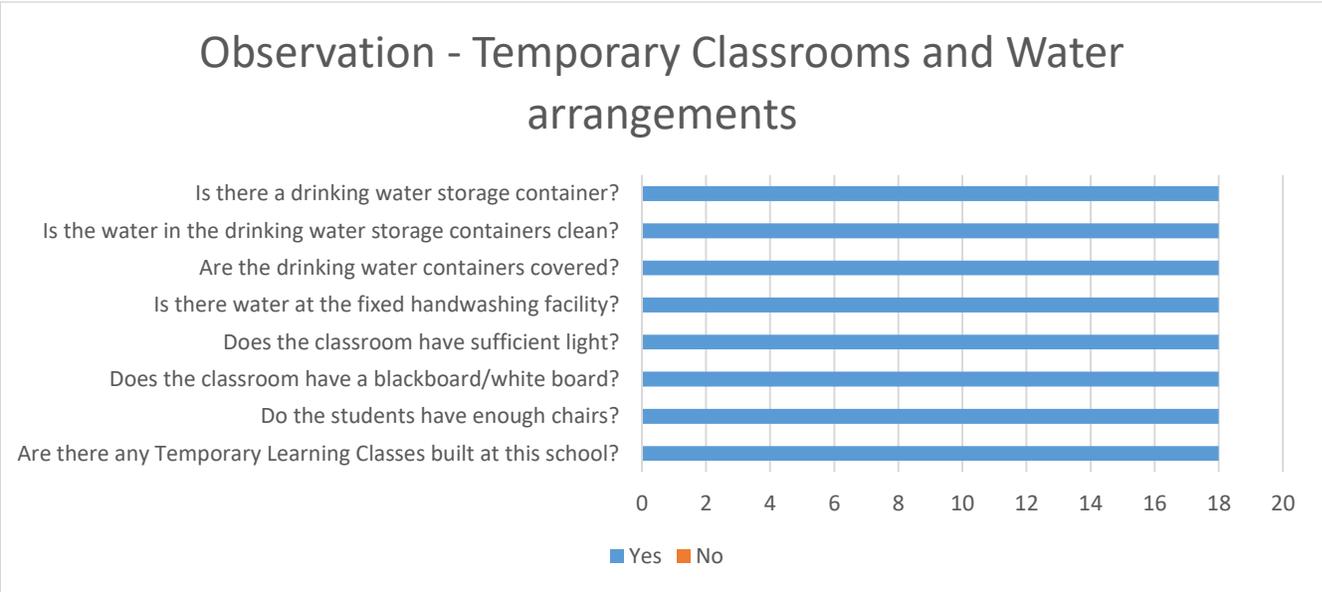
The survey results from the Students survey also indicate that 100% of students were satisfied (95% with high category and 5% at medium with no student reporting low), while rating the newly constructed latrines in their schools; however, the observation of classrooms and latrines indicates a number of issues for improvement. They are explained through the below charts.

**Figure 7: Observation - Sanitary Latrines**



Problems in the latrine hole cover were observed in Deh Bala, all 4 latrines, while 2 slabs in Deh Bala and 2 in Sheikh Misry School were found un-clean. All classrooms and new water arrangements were found meeting the minimum standards.

**Figure 8: Observation - Temporary Classrooms and Water arrangements**



Furthermore, One water well, which was constructed by SVA in Deh-bala Shpoley school was observed by the Evaluation team. The well seems to have improved access to clean/safe water for community people

around. The interviews in Deh-bala revealed that the community is allowed to use the water / well during school hours and they expressed their gratitude both from SVA and the school management.

### 3.4.2 Schools Facilities Management and Maintenance

During the project implementation, SVA carried out facility maintenance tests on a three-point scale of low, medium and high and scored on a scale of 10 out of 10. Nine out of ten members of the School Steering Committee of the targeted school in Surkhrod district had the perfect score, the remaining one member scored 8 points. The results at Shopoly school in Deh Bala district indicated that 8 out of 10 gave the perfect score, the remaining two received nine and eight scores respectively. The results from the evaluation exercise conducted by TAGHEER however differ with the SVA records.

The survey conducted by TAGHEER explored if stakeholders had a good understanding of school facilities maintenance and management. The results indicate that the training for maintenance of school facilities including wells was conducted to the school operation committees of both schools. The training covered not only technical training such as facility management and repair, but also fundraising for future facility management.

The results for 20 SMC members revealed that their knowledge and skills are still not at a high level when they responded to below six questions about the school management and maintenance related tasks. They were provided with multiple choices with the best answers for their role ranked as “High”, while the worst answer was scored as “Low”. The below table indicates that no member scored low; however, around 42% of them still need to improve their knowledge and skills around the SMC job ToR.

**Table 6: SMC Understanding of their role**

| SMC Understanding of their role                                | High         | Middle       | Low      |
|--|--------------|--------------|----------|
| Responsibility for school maintenance                          | 100.00       | 0.00         | 0.00     |
| Maintaining school facilities                                  | 70.00        | 30.00        | 0.00     |
| Hygiene and sanitation assurance in school                     | 100.00       | 0.00         | 0.00     |
| Coordination and cooperation with other schools / stakeholders | 5.00         | 95.00        | 0.00     |
| Fund raising responsibility                                    | 70.00        | 30.00        | 0.00     |
| Transparency in purchasing and record keeping                  | 5.00         | 95.00        | 0.00     |
|  |              |              |          |
| <b>Average</b>   | <b>58.33</b> | <b>41.67</b> | <b>-</b> |

Figure 9: SMC Understanding of their role

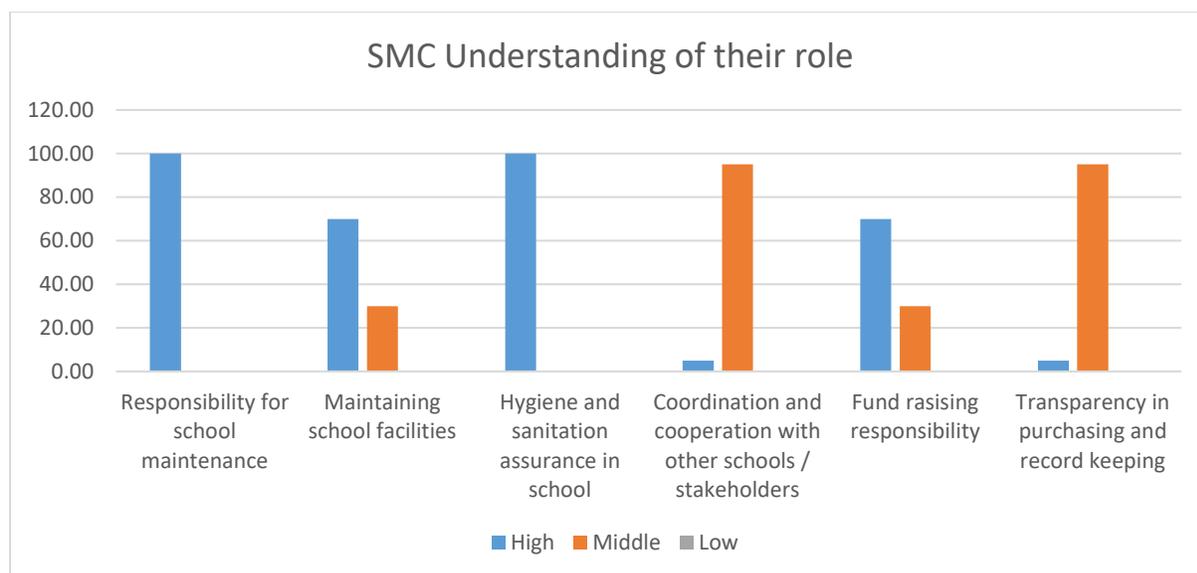


Table 7: Log frame Indicator Achievements against Target

| Project Description     |   | Target                                | Achievement                   | % of Achievement of target | Data Source                             | Notes  |
|-------------------------|---|---------------------------------------|-------------------------------|----------------------------|---|--|
| Digging wells for water | Safe water supply (water with less than 5 NTU (Nephelometric Turbidity Units) based on the Sphere Standard)       | less than 5 NTU                       | less than 5 NTU               | 100%                       | DACAAR test reports verified by TAGHEER | TAGHEER reviewed and verified the water quality tests conducted by DACAAR in Sorghrod and District for all 8 wells with below dates:<br><br><ul style="list-style-type: none"> <li>Sample Collection Date: 26/05/2019</li> <li>Analysis report Date: 28/05/2019</li> </ul> |
|                         | 600 households (approx. 3,600 people) have access to water not more than 500 m away, based on the Sphere Standard | 600 households (approx. 3,600 people) | 644 households (4,229 people) | 107%                       | SVA report And TAGHEER FGDs             | According to the data collected from 6 FGDs conducted with WMCs in Sorghrod; Safe water/well distance from a beneficiary home in Shekh Misri community "Sorghrod" was  |

| Project Description  |   | Target | Achievement | % of Achievement of target | Data Source                                   | Notes  |
|--|---|--------|-------------|----------------------------|---|--|
|  |   |        |             |                            |   | reported at 20 – 120 meters.   |
| Awareness-raising and education for water, sanitation and hygiene (WASH) | The hygiene knowledge and awareness of 85% of the beneficiaries in the 74 households targeted for follow-up KAP surveys will increase.                          | 85%    | 100%        | 107%                       | SVA report And TAGHEE R Survey                | However, TAGHEER survey with HH reveals that on average basis, 72.8 percent of the respondents had high knowledge of hygiene, 24.4 percent had medium, and around 1 percent had low knowledge of hygiene.  |
|  | 90% of students have a “high” (80 or higher) score for knowledge, awareness, and behavior level regarding hygiene, and 10% have a “medium” (50 or higher) score | 90%    | 96.1        | 107%                       | SVA report And TAGHEE R Survey                | TAGHEER’s survey with 269 students indicates that 80% of students scored high for HE, while 19% scored medium  |
|  | More than 70% of related persons show correct understanding regarding ongoing school hygiene education.   | 70%    | 76.14%      | 108.7%                     | TAGHEE R Survey of HH, Teachers, and Students |  |
| Develop water and learning environments at schools.                      | More than 70% of related parties show correct understanding regarding school facilities maintenance and management.   | 70%    | 85%         | 121.4%                     | Field Survey                                  | 85% of the trained SMC members have high understanding of school facilities maintenance and management. However, when we dive deep into other subjects related to school management and maintenance, the high score drops down to 58%, indicating that SVA should work further with 42% of the SMC |

| Project Description |  | Target          | Achievement     | % of Achievement of target | Data Source         | Notes  |
|---------------------|--|-----------------|-----------------|----------------------------|---------------------|--|
|                     |  |                 |                 |                            |                     | members to improve their knowledge and skills from medium to high particularly the management skill of SMCs, such as coordination with stakeholders and Transparency in purchasing and record keeping. |
|                     | Safe water supply (water with less than 5 NTU (Nephelometric Turbidity Units), based on the Sphere Standard) | less than 5 NTU | less than 5 NTU | 100%                       | DACAAR test reports | TAGHEER reviewed and verified the water quality test conducted by DACAAR in Deh Bala District for the well constructed in Shpoley school.  |
|                     | Temporary schoolhouses and latrines are approved by the Directorate of Education (DoE)                       | Approved        | Approved        | 100%                       | TAGHEER Observation | The letters from DOE were reviewed by TAGHEER monitors. The approval letter for TLCs and Latrines were issued by Mr. Hassibullah Shinwari, the Director DOE in Nangarhar provinces on Sep 25, 2019.    |

*Source: Field Survey 2020*

### 3.5 Core Humanitarian Standards (CHS)

#### 3.5.1 Response was appropriate and relevant

The primary purpose of this commitment was to respond to a humanitarian crisis, which is to alleviate distress and suffering, upholding people's rights to assistance and ensuring that their dignity as human beings is sustained. SVA conducted an assessment regarding the respondents' needs and found that people's priorities were education for their children, hygiene and sanitation awareness and safe water facility. One comment from an interview with key informants in discussion was as follows,

*“We conducted an assessment survey to understand the community needs; we saw people lost their family members in the war or left houses in their homeland; they were in bad conditions. And when we asked their needs and a number of people said that their needs are education for their children, safe water facility, and hygiene and sanitation awareness” [KII-SVA-Afghanistan].*

*The above findings were supported with a key informant, who had this to say,*

*“Yes, SVA consulted us before the project started, they sent us an official letter of their program introduction after we held meetings. They explained us the project activities, goals and the implementation plan. Actually during 2017 and 2018 more families returned to Afghanistan and IDPs came from the insecure areas to Nangarhar that's why their priority need was Education, hygiene awareness and safe water, so SVA better decided to implement a project to fulfill their needs”. [KII-DoE-Nangarhar]*

The findings from focus group discuss revealed that, the beneficiaries were consulted before the initiation of the project; one member during FGD had this to say.

*“.....actually, we needed education system, clean water to live healthy life but we had no access to safe and clean water, that's why we faced health problems such as diarrhea, and other stomach and intestinal problems. After SVA came to our villages, they noted down our suggestions and asked us about priority needs for safe water supply, education, and hygiene awareness. SVA in response-built TLCs, drilled wells for us and educated us on its usage, and protection”. [FGD\_3-WMC-Surkhrod-Nangarhar]*

### **3.5.2 Humanitarian response was effective and timely**

The need for effective systems that support timely, evidence-based decision-making, together with both adequate and timely geographical coverage of both assistance and protection needs is essential. The project had three main components; Digging wells for water, Awareness-raising, and education for WASH, and develop water and learning environments at schools for IDPs and returnees and local communities hosting them.

The project was found effective as meeting most of the targets even over-achieving some targets as mentioned in the above indicators table. The project was also timely as large number of IDPs in Nangarhar Province and the returnees mainly from Pakistan were settling down at the time of implementation. The Nangarhar Provincial Government and the local community were supporting returnees but without having sufficient infrastructure to provide daily necessities in the form of emergency relief for an increased number of people. In particular, development of WASH systems was urgently required to help these people in their daily lives. A Key informant had this to say,

*“SVA was able to implement the project in a timely manner; they went through the implementation plan and followed it very strictly, they fulfilled the community needs accordingly. They built TLCs, and drilled wells for us both in Surkhrod and in Deh Bala.” [KII-DoE-Nangarhar]*

This means that digging wells for water increased accessibility and availability of clean drinking water sources. The data showed further that increased availability of the clean drinking water sources led to a decrease in the collection of water from unclean sources. Another key informant had this to add,

*“Our Organisation responded in a timely manner. We identified the communities’ problems and solved them accordingly. We built TLCs, drilled wells, and did hygiene and sanitation awareness. We achieved our project objectives and goals.” [KII-SVA-Afghanistan]*

The evaluation findings, however, reveals that although the infrastructure needs are met for target beneficiaries; Hygiene and Sanitation awareness still need to be performed more robustly as around 2.5% of the surveyed participants “project beneficiaries” are still collecting water from unclean sources and the level of HE is still low for around 28% beneficiaries.

### **3.5.3 Humanitarian response strengthens local capacities and avoids negative effects**

The need to acknowledge and build on local and national capacities when responding to disasters and to forge stronger links with local Organisations is very important for ownership and sustainability of the

projects. In addition, that individuals and communities have greater control over decision-making and more involvement leads to a quicker recovery, higher resilience and a greater capacity to withstand future shocks.

During the execution of the project, the implementation process was adjusted as necessary by taking into account the advice from the local government, autonomous bodies, local community leaders, returnee representatives and other relevant parties.

SVA conducted cluster meetings in coordination with the local government, the United Nations Office for Coordination of Humanitarian Affairs (UNOCHA) and other line Organisations. The project progress was reported and shared with these collaborating partners. SVA liaised with UNOCHA to obtain information and found that UNOCHA rated highly SVA's previous aid record of accomplishment and expected further effective participation in the aid projects.

The community involvement since the beginning helped build local capacity and support to beneficiaries, thus communities and the people affected by crisis were positively affected and were more prepared, resilient and less at-risk because of these humanitarian actions.

#### **3.5.4 Humanitarian response was based on communication, participation, and feedback**

Information and communication are critical forms of aid without which the affected people cannot access services, make the best decisions for themselves and their communities, or hold aid agencies to account. Sharing information, listening carefully to the affected communities and involving them in decision-making contributes to programmes that are more effective and improve the quality of services delivered. When people have the opportunity of voicing their opinions their sense of well-being is enhanced and helps them adapt to the challenges, enabling them to take an active role in their own recovery.

During execution of the project, there was strong communication and coordination with local government, autonomous bodies, clusters, and other relevant Organisations. There was also coordination and liaison with the DoRR for the implementation of this project. Moreover, the dug well sites were decided through the coordination with DRRD and local community. One key informant had this to say,

*“SVA coordinated with us throughout the project implementation period; they shared with us the project plans, activities and goals. They did this in the beginning and reported us on regular basis. Sometimes they called us for any requests, suggestions or any amendment in the project. The project implemented well and fulfilled the community needs” [KII-DoRR-Nangarhar]*

Another informant added,

*“Before our project implementation we visited the project areas to analyse the situation, and to talk to the communities about their needs. Based on this situation analysis, we promised to help them in terms of their children Education, hygiene and sanitation awareness, and wells drilling for safe and clean water facilities” [KII-SVA-Afghanistan].*

SVA had good collaboration and coordination with the local government authorities; reports, information sharing and coordination of the activity contents of this project were carried out through attending coordination meetings with the UNOCHA, IOM and DoRR, DRRD, various cluster players, and PDC.

Thus, the sharing of accurate, timely, and accessible information strengthened trust, increased understanding, deepened the levels of participation, and improved the impact of the project. This helped to reduce the number of formal complaints received and was a key for transparency of the SVA. One informant had this to say,

*“People who are affected by crisis are 90 percent aware of their rights, they want hospital, pave roads, good education system, stationeries for their children, electricity, good jobs to support the family, and safe and clean water facilities. For the first time when we were starting the project, we*

*explained our project to the community and informed them that as per their needs we will support water supply, education, and hygiene / sanitation facilities during our project. This information was shared again with the aforementioned relevant parties to prevent duplications in the assistance and to deliver appropriate support to the targeted beneficiaries by receiving information on their latest needs". [KII-SVA-Afghanistan]*

### **3.5.5 Complaints were welcomed and addressed**

Beneficiaries have the right to complain to an agency and to receive an appropriate and timely response. Formal mechanisms for complaints and redress are essential components of an agency's accountability. They provide the affected communities with some element of control over their lives. A complaint contains a specific grievance, which can alert an Organisation of the existence of a serious misconduct or failures in the response, allowing them to take timely action to improve quality of the programme.

During the interview with key informants, it was reported that most people have already been receiving aid assistance from other humanitarian players including SVA; they therefore understand their needs and rights. They were also aware of the complaint's mechanisms, which were established for their use by SVA. A Key informant from SVA mentioned below:

*"During the implementation period, we established a feedback/complaint box in each TLC's center. We understood the community on the feedback/complaint mechanism if they have a feedback or complain they can share with us through that box. They can write their feedback or complaint in a piece of paper, put that letter into the box and after that we will do our follow up." [KII-SVA-Afghanistan]*

During the implementation of the project, returnees and other stakeholders were consulted on various issues and specifically on how they viewed the complaints mechanisms; how complaints were dealt; the ways in which they would like to submit complaints to the Organisation(s), what might potentially prevent them from complaining; and how they wished to receive feedback about their complaints. The procedures were designed to fit the requirements of the community; and the feasibility of joint complaints mechanisms with other agencies was explored.

The project beneficiaries reported that the complaints mechanisms were accessible, effective, confidential, and safe. The complaints were investigated, resolved and results were given to the complainant within a fairly quick time.

### **3.5.6 Humanitarian response was coordinated and complementary**

Adequate programme coverage and timeliness, and effective humanitarian responses require collective action. Coordination mechanisms are required to establish a clear division of labour and responsibilities and to identify gaps in the coverage and quality. It is important to prevent the duplication of efforts and the waste of resources. The sharing of information and knowledge between stakeholders, joint planning, and integrated activities can also ensure that Organisations manage risks better and improve the outcomes of a response due to coordination with the local government, autonomous bodies, clusters and other Organisations.

A Key informant from SVA added that, "The coordination was maintained with the local government, and with the community through the Community Development Council (CDC)". The evaluation found that monthly progress reports were shared with the stakeholders by email and at meetings by SVA. SVA further requested the stakeholders to visit their field activities and to share their feedback.

### 3.5.7 Humanitarian actors continuously learn and improve

Learning from success and failure and applying these insights to modify and adapt current and future work are cornerstones of accountability and quality management during the implementation of projects. There was a culture of learning and continual improvement which was at the heart of a professional and committed action from SVA as an Organisation, this was fundamental in ensuring effectiveness and efficiency. There was a constant interaction between SVA and other stakeholders. This ensured that changes and adaptations to the project were implemented quickly when appropriate.

SVA ensured that there was transparency in the program effectiveness; information from monitoring was regularly shared with the affected communities and Government officials. Monitoring was carried out by the people themselves which enhanced transparency, quality and encouraged ownership of the project activities. An interview with an informant revealed that the project was implemented very well due to the experience and hard work of the staff. The interviewee had this to say,

*“The project goals and objectives are achieved; we assisted people according to our project plans. The TLCs are built with the standard and with high quality. The wells are drilled in a high quality the water tastes good. The hygiene and sanitation awareness were appreciated by people. Children are encouraged to attend the TLCs regularly and people are encouraged and aware to take care of their health and follow cleanliness.” [KII-SVA-Afghanistan]*

In particular, the implementation of project respected the culture and values of the beneficiaries fully, collected feedback from them as necessary when the project was in progress, and responded to their complaints and requests. One informant had this to say,

*“It is our responsibility to monitor the project activities and we regularly monitored the SVA programs. All the activities worked well because they fulfilled the community needs.” [KII-DRRD-Nangarhar]*

From the evidence above, the project was appropriate and acceptable to the stakeholders within the community and the project upheld the rights of all community members by meeting their basic needs. The returnees and IDPs had access to clean water they need for daily life and acquired hygiene-related knowledge to protect themselves. The educational environment was improved through temporary classrooms which were equipped with necessary hard and soft facilities/technology.

## CHAPTER FOUR

### LESSONS LEARNED

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#### 4.1 Core Humanitarian Standards (CHS)

The beneficiaries' perceptions of the project activities were positive; the evaluation describes the level of satisfaction of the project's main beneficiaries with the quality and the usefulness of the activities in terms of their participation and knowledge assimilation. DoE and the local community believe that they need more assistance and a follow up phase to continue Hygiene education and Sanitary latrines would be appropriate.

#### 4.2 Project Log frame indicators

The project log frame misses outcome level indicators which will be important for JPF and SVA to gauge the value for money and return on investment. Some of these outcome level indicators could engage the local government and local community to stay more responsible and ensure they act as per the HE provided by SVA, continue their children education and work on the sustainability of the infrastructure developed through the project funds.

## CHAPTER FIVE

### CONCLUSION AND RECOMMENDATION

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#### 5.1 Conclusion

Overall, the Project' accomplishments were significant. The Project achieved considerable gains in terms of its purpose of

1. Getting access to clean water
2. Acquiring hygiene management knowledge
3. Developing learning environments including wash facilities for students

for Households of returnees from Pakistan and internally displaced persons (IDPs) who were forced to evacuate due to the effects of conflicts.

The purpose of the project was achieved through three objectives. The first objective aimed at making sure that Returnees and IDPs have access to the water they need for their daily livelihood. Nine wells were dug, meeting 100 percent of the set target. All nine wells were tested for water quality inspection to ascertain conformity with the standard of the Ministry of Public Health. Safe water is supplied. Eight of the above nine wells were dug with the purpose of clean / safe water supply in Surkhrod districts while one well in Shpoly school, Deh-bala district was dug with the aim to develop learning environment including WASH facilities for students. The number of households that gained better access to clean water was improved because of the new wells construction, while the distance to a water well was heavily decreased to under 200 meters. However, the survey in Surkhrod district revealed that there are still a number of HH who are using water from unclean sources; i.e. river, stream, and open wells at their own houses.

The second objective aimed at making Returnees and IDPs acquire hygiene-related knowledge and adapt hygienic behaviour to protect themselves. The pre KAP survey and post-KAP survey were done by 74 households (148 persons) by SVA and the results revealed that the households had higher percentages of correct answers in the post-KAP survey than in the pre KAP survey. The average correct answer rate for all 148 respondents increased from 28 percent in the pre-KAP survey to 98 percent in the post-KAP survey. This implies that the hygiene knowledge and awareness of 85 percent of the beneficiaries in the 74 households targeted for follow-up KAP surveys increased, and the target was met 100 percent. A similar

achievement was observed in SVA reports for teachers and student's knowledge on hygiene. The evaluation results from TAGHEER indicate that this objective can be further strengthened as the score for the household survey by TAGHEER reveals that on average basis, 72.8 percent of the respondents had high knowledge of hygiene, 24.4 percent had medium and around 1 percent had a low knowledge of hygiene. The teachers survey by TAGHEER revealed that 75 percent of them had high knowledge, 21 percent had medium and 2 percent had a low knowledge. The results from 269 students surveyed shows that around 80% of them have a high level of understanding for knowledge and practice regarding personal and school hygiene. Some of the beneficiary HH in Surkhrod district are still using water from unclean sources, which could be a reason for their limited understanding of hygienic behavior.

The third objective aimed at making sure that the minimum level of educational and WASH environments was available to the increased number of pupils and this environment is continuously maintained by the School Management Committees (SMC). Reports from SVA indicate that 20 members of the SMC were surveyed and 17 members (85%) showed a correct understanding of school facility maintenance which fulfilled the target of more than 70 percent of the related. However, the results for 20 SMC members surveyed by TAGHEER revealed that their knowledge and skills are still not at a high level when they responded to questions about the school management and maintenance related tasks. Around 42% of the SMC members still need to improve their knowledge and skills around coordination with stakeholders and Transparency in purchasing and record keeping.

Further to achieve this objective, SVA constructed 18 TLCs in two schools of Surkhrod and Deh bala districts as well as 4 toilet sets, 2 male and 1 female toilet sets Surkhrod schools as well as 1 female toilet set in Shpoley school of Deh-bala district (Each toilet set had 4 individual toilets), water storage tank and a other washing facilities were established in both schools including a water well in Shpoley school at Deh-bala. The field survey and schools observations conducted by TAGHEER indicated that 100% of students were satisfied (95% with high category and 5% at medium with no student reporting low), while rating the newly constructed latrines in their schools; with some small fixes still needed for some of the toilets in both schools for latrine slabs, hole covers and cleanliness of the latrine floors.

During the implementation of this evaluation exercise, it was found that SVA adhered to the seven Core Humanitarian Standards on Quality and Accountability (CHS) agreed during the inception meeting. SVA used these commitments to improve the quality and effectiveness of the assistance they provided. These commitments facilitated greater accountability to communities and to the people affected by the crisis. The project however did not set indicators and targets at the outcome level which are essential in measuring the project value and the returns on the investment after the evaluation is completed. The findings and the review of the performance data from the field indicate the SVA activities well-thought-out and run to respond to the Humanitarian Crisis in Surkhrod and Deh-bala districts.

## **5.2 Recommendation**

From the findings of this evaluation, in order to address the challenges and improve the performance of Emergency wash and education assistance to returnees, IDPs, and host communities in the community and both schools in Nangarhar Province, the study recommends the following:

1. Hygiene awareness and education should be carried out in a more robust ways by engaging Mullahs and Mosque gatherings as some of benefited HH in Surkhrod district are still using water from unclean sources. The results from the survey conducted by TAGHEER demonstrated high HE knowledge possessed by the HH. However, the actual application of the education and skills for HH were observed low as the practice of using water from unhygienic sources in Surkhrod is not completely abandoned.

2. A post-project reporting mechanism between SVA and the community should be established to ensure the community pays attention to the project infrastructure built by SVA particularly of latrines in schools at Deh-bala and Surkhrod.
3. SMC members should be further trained on their roles for school management and maintenance particularly the management skill of SMCs, such as coordination with stakeholders and Transparency in purchasing and record keeping. They should be given school management and maintenance responsibility followed by a signed TOR agreed with the school management.
4. It is recommended to add the number of Qualitative Indicators as measures of success, more qualitative performance indicators at the outcome level should be included in the project design to measure lasting changes as a return on investment.
5. We recommend to set the HE and awareness target at a minimum 90%; so, the project team and community give ample time achieving this.

## CHAPTER SIX

### ANNEXES

## Data Collection Tools

### Student Survey – WASH

|                                 |  |          |                      |        |      |
|---------------------------------|--|----------|----------------------|--------|------|
| Province:                       |  | NGO: SVA |                      |        |      |
| District:                       |  |          | Name of interviewer: |        |      |
| Village:                        |  |          | Date of Interview:   |        |      |
| Gender:<br>a. Male<br>b. Female |  |          | Time of Interview:   | Start: | End: |

Greetings! My name is \_\_\_\_\_, and I am working for the Survey Team of TAGHEER, which is an Afghan research firm. We are here on behalf of (NGO name) surveying households to find out about the knowledge, attitudes, and practices of communities with Sanitation and Hygiene. The information you provide will help an organization design and monitor projects that will improve the existing sanitation conditions in your area. Please rest assured that any information you provide us will remain confidential. We would only like you to give us your honest opinion. It will probably take you about 30 minutes to complete the questionnaire.

Are you willing to participate?

A. Yes -----> proceed

B. No ---→ stop the interview

**Demographic Data**

Please tell us about yourself and the composition of your household, starting with the head of the household?

**Education codes**

|  |  |  |
|--|--|--|
| <b>Primary = 1</b><br>01=GRADE 1<br>02=GRADE 2<br>03=GRADE 3<br>04=GRADE 4<br>05=GRADE 5<br>06=GRADE 6 | <b>Lower Secondary = 2</b><br>07=GRADE 7<br>08=GRADE 8<br>09=GRADE 9 | <b>Upper Secondary =3</b><br>10=GRADE 10<br>11=GRADE 11<br>12=GRADE 12 |
|--|--|--|

1) What is the source of water for the school? (select all the apply)

| SOURCE               | CURRENT AVAILABLE | USED FOR DRINKING |
|----------------------|-------------------|-------------------|
| COVERED WELL/SPRING  | 1. YES 2. NO      | 1. YES 2. NO      |
| OPEN WELL/SPRING     | 1. YES 2. NO      | 1. YES 2. NO      |
| RAINWATER            | 1. YES 2. NO      | 1. YES 2. NO      |
| BOTTLED WATER        | 1. YES 2. NO      | 1. YES 2. NO      |
| TANKER-TRUCK OR CART | 1. YES 2. NO      | 1. YES 2. NO      |
| LAKE/RIVER/STREAM    | 1. YES 2. NO      | 1. YES 2. NO      |
| NO WATER SOURCE      | 1. YES 2. NO      |                   |

2) How would you rate the taste of your drinking water from the main source at school?

- a. Good
- b. Fair
- c. Bad

3) Do you cover your food and drinking water?

- a. Yes, we always cover
- b. Yes, we sometimes cover
- c. No, we don't
- d. I don't know

4) How satisfied are you with the school's latrines?

- a. Very satisfied
- b. Somewhat satisfied
- c. dissatisfied

5) Are there separate latrines for boys and girls?

- a. Yes
- b. No
- c. I don't know

6) Do you use latrine or go to open field for defecation?

- a. Using the latrine properly

- b. Sometime latrine and sometime Open defecation.
  - c. No usage of latrine, Open defecation
  - d. I don't know
  - e. refused to respond
- 7) Is there hand washing facilities at your school?
- a. Yes
  - b. No
  - c. I don't know

**Personal hygiene**

**Washing Hands**

- 8) Did you attend the hygiene education sessions provided by SVA?
- a. Yes
  - b. No -----→ Skip to Q10
  - c. I don't know
- 9) Were you given hygiene education kit?
- a. Yes
  - b. No
  - c. I don't know
  - d. Refused
- 10) Do you regularly wash your hands?
- a) Yes
  - b) Occasionally
  - c) No (Skip to question 12)
- 11) When do you wash your hands? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|  |     |    |
|--|-----|----|
| a) After using the toilet                  | Yes | No |
| b) Before eating                           | Yes | No |
| c) After eating                            | Yes | No |
| d) Before cooking                          | Yes | No |
| e) After washing/cleaning tables           | Yes | No |
| f) After cleaning baby diapers/baby stools | Yes | No |
| g) After cleaning the home                 | Yes | No |
| h) Other, specify: -----                   | Yes | No |

- 12) Do you use soap or detergent to wash your hands?
- i) Yes
  - j) No (Skip to question Q 13)
  - k) Don't know (Skip to question 13)

4) For which purposes do you use the soap/detergent? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|                              |     |    |
|------------------------------|-----|----|
| a) Washing hands             | Yes | No |
| b) Washing clothes           | Yes | No |
| c) Cleaning utensils/vessels | Yes | No |
| d) Bathing                   | Yes | No |
| e) For cleaning the home     | Yes | No |
| f) Other specify: -----      | Yes | No |

## Water-Related Diseases

- 13) Do you think water can carry diseases?
- a. Yes
  - b. Maybe
  - c. No -----→ Q15
- 14) How do you treat water before using/drinking it?
- a. Boiling
  - b. Chlorination
  - c. Filter
  - d. Don't treat water
  - e. Don't know

## Public Hygiene and Waste Management

- 15) Where should the human waste be put when you use the latrine?
- a. Far away from residential houses
  - b. Far away from water source about (25m)
  - c. burry under soil
  - d. burry under soil and after few months, use it in Agriculture
  - e. burry it right outside the latrine
  - f. leave it in the latrine
  - g. put it on the ground outside the latrine
  - h. Other specify
- 16) How do you feel about the cleanliness in your school environment?
- a. Good
  - b. Fair
  - c. Bad
- 17) What do you do if there is garbage accumulated around your school?
- g) I transport garbage from my household to the communal bins
  - h) I wait for the municipality team to come
  - i) I burn the garbage
  - j) I burry the garbage
  - k) There is no garbage accumulation in my area
  - l) Nothing
  - m) Other
- 18) What will happen if solid waste is not correctly (i.e., timely, thrown in designated bins, etc.) disposed of?

- a) Health risks/Disease spread increase
- b) Adverse environmental impact
- c) Bad smell
- d) Increase of insects
- e) Other

## Diarrhea and Hydration

### DIARRHEA INFORMATION

19) What causes diarrhea? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|                                   |     |    |
|-----------------------------------|-----|----|
| A. Drinking bad water             | Yes | No |
| B. Eating bad food                | Yes | No |
| C. Unwashed fruits/vegetables     | Yes | No |
| D. Flies/insects                  | Yes | No |
| E. Poor hygiene/not washing hands | Yes | No |
| F. Other, specify: -----          | Yes | No |
| G. Don't know                     | Yes | No |

20) How can you prevent you or your family members from becoming ill with diarrhea? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|                                       |     |    |
|---------------------------------------|-----|----|
| H. Wash hands with soap and water     | Yes | No |
| I. Cook food thoroughly               | Yes | No |
| J. Wash vegetables/fruits             | Yes | No |
| K. Dispose of human waste properly    | Yes | No |
| L. Boil water                         | Yes | No |
| M. Clean cooking utensils/vessels     | Yes | No |
| N. Treat water with chlorine products | Yes | No |
| O. Cover food to keep away from flies | Yes | No |
| P. Cholera vaccine                    | Yes | No |
| Q. Cannot prevent                     | Yes | No |
| R. Other, specify: -----              | Yes | No |
| S. Don't know                         | Yes | No |

21) How would you treat diarrhea for yourself or your family members?

- a) Go to clinic/hospital
- b) Use oral rehydration solution/
- c) Use homemade sugar-salt solution
- d) Go to a traditional healer
- e) Home remedy: Specify \_\_\_\_\_
- f) Do not treat
- g) Other: Specify \_\_\_\_\_
- h) Don't know

21. Did you have diarrhea in the last three months?

- a) No, I didn't

- b) Yes, once
- c) Yes, more than once
- d) I don't know

## Household Survey – WASH

|   |  |      |                      |        |      |
|---|--|------|----------------------|--------|------|
| Province:   |  | NGO: | Questionnaire code:  |        |      |
| District:   |  |      | Name of interviewer: |        |      |
| Village:  |  |      | Date of Interview:   |        |      |
|   |  |      | Time of Interview:   | Start: | End: |
| Beneficiary type:<br>A. Household<br>B. Teachers<br>C. SMC member |  |      |                      |        |      |

*The respondent should be the Household Head or the Spouse of the Household Head*

Greetings! My name is \_\_\_\_\_, and I am working for the Survey Team of TAGHEER, which is an Afghan research firm. We are here on behalf of (NGO name) surveying households to find out about the knowledge, attitudes, and practices of communities with Sanitation and Hygiene. The information you provide will help an organization design and monitor projects that will improve the existing sanitation conditions in your area. Please rest assured that any information you provide us will remain confidential. We would only like you to give us your honest opinion. It will probably take you about 30 minutes to complete the questionnaire.

Are you willing to participate?

- C. Yes -----> proceed
- D. No ---> stop the interview

### Demographic Data (Household Information)

Please tell us about yourself and the composition of your household, starting with the head of the household?

| Household members (no names to be written down) | Gender (M, F) | Age | Education [USE CODE] | Marital status [USE CODE] | Primary Occupation [USE CODE] | Disability/ Physical Impairment | Still, living in the house? |
|---|---------------|-----|----------------------|---------------------------|-------------------------------|---------------------------------|-----------------------------|
| 1.Head of household                             |               |     |                      |                           |                               |                                 | ( )Yes<br>( )No             |

### Education codes

|                        |  |  |  |   |                                 |
|------------------------|--|--|--|---|---------------------------------|
| <b>Pre-Primary = 0</b> | <b>Primary = 1</b><br>01=GRADE 1<br>02=GRADE 2<br>03=GRADE 3<br>04=GRADE 4 | <b>Lower Secondary = 2</b><br>07=GRADE 7<br>08=GRADE 8<br>09=GRADE 9 | <b>Upper Secondary =3</b><br>10=GRADE 10 | <b>Higher = 4</b><br>01=YEAR 1<br>02=YEAR 2<br>03=YEAR 3<br>04=YEAR 4 | <b>DK =8</b><br>98 = DON'T KNOW |
|------------------------|--|--|--|---|---------------------------------|

|  |                          |  |                                  |  |  |
|--|--------------------------|--|----------------------------------|--|--|
|  | 05=GRADE 5<br>06=GRADE 6 |  | 11=GRADE<br>11<br>12=GRADE<br>12 |  |  |
|--|--------------------------|--|----------------------------------|--|--|

| Marital Status Code   | Primary Occupation Code  | Disability Code                |
|---|--|--------------------------------|
| 01= Married<br>02= Single<br>03= Divorced<br>04= Stay together<br>05= Separate<br>06= Widow/widower | 01 = Selling labour<br>02 = Farmer<br>03 = Self-employed<br>04 = Unpaid family worker<br>05= Housewife<br>06=Student/too young to work<br>07=Retired/ too old to work<br>08 = Unemployed<br>09= Other specify..... | 01= disable<br>02= not disable |

**Personal hygiene**

**Washing Hands**

22) Did you attend the hygiene education sessions provided by SVA?

- a. Yes
- b. No
- c. I don't know

23) Do you regularly wash your hands?

- d) Yes
- e) Occasionally
- f) No (Skip to question 8)

24) When do you wash your hands? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|  |     |    |
|--|-----|----|
| l) After using the toilet                  | Yes | No |
| m) Before eating                           | Yes | No |
| n) After eating                            | Yes | No |
| o) Before cooking                          | Yes | No |
| p) After washing/cleaning tables           | Yes | No |
| q) After cleaning baby diapers/baby stools | Yes | No |
| r) After cleaning the home                 | Yes | No |
| s) Other, specify: -----                   | Yes | No |

25) Do you have soap or detergent in the house?

- t) Yes
- u) No (Skip to question 8)
- v) Don't know (Skip to question 28)

26) For which purposes do you use the soap/detergent? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|                  |     |    |
|------------------|-----|----|
| n) Washing hands | Yes | No |
|------------------|-----|----|

|                              |     |    |
|------------------------------|-----|----|
| o) Washing clothes           | Yes | No |
| p) Cleaning utensils/vessels | Yes | No |
| q) Bathing                   | Yes | No |
| r) For cleaning the home     | Yes | No |
| s) Other specify: -----      | Yes | No |

**Water-Related Diseases**

27) Do you think water can carry diseases?

- d. Yes
- e. Maybe
- f. No

28) If yes, please name the various water borne diseases:

- a. Diarrhea
- b. Malaria
- c. Dysentery
- d. Jaundices
- e. Cholera
- f. Typhoid
- g. Polio
- h. Skeleton
- i. Dental fluorosis
- j. Gastro enteritis
- k. other(specify) .....

29) What is the source of your water?

- a. Well
- b. spring
- c. river
- d. stream
- e. pond/lake
- f. other (specify) .....

30) How do you treat water before using/drinking it?

- a. Boiling
- b. Chlorination
- c. Filter
- d. Don't treat water
- e. Don't know

**Public Hygiene and Waste Management**

31) Where should the human waste be put when you use the latrine?

- a. Far away from residential houses
- b. Far away from water source about (25m)
- c. burry under soil
- d. burry under soil and after few months, use it in Afgriculture
- e. burry it right outside the latrine
- f. leave it in the latrine

- g. put it on the ground outside the latrine
  - h. Other specify
- 32) How do you feel that the cleanliness in your local environment?
- a. Good
  - b. Fair
  - c. Bad
- 33) What do you do if there is garbage accumulated around your household?
- t) I transport garbage from my household to the communal bins
  - u) I wait for the municipality team to come
  - v) I burn the garbage
  - w) I burry the garbage
  - x) There is no garbage accumulation in my area
  - y) Nothing
  - z) Other
- 34) What will happen if solid waste is not correctly (i.e., timely, thrown in designated bins, etc.) disposed of?
- f) Health risks/Disease spread increase
  - g) Adverse environmental impact
  - h) Bad smell
  - i) Increase of insects
  - j) Other

**Diarrhea and Hydration**

**DIARRHEA INFORMATION**

35) What causes diarrhea? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|                                   |     |    |
|-----------------------------------|-----|----|
| T. Drinking bad water             | Yes | No |
| U. Eating bad food                | Yes | No |
| V. Unwashed fruits/vegetables     | Yes | No |
| W. Flies/insects                  | Yes | No |
| X. Poor hygiene/not washing hands | Yes | No |
| Y. Other, specify: -----          | Yes | No |
| Z. Don't know                     | Yes | No |

36) How can you prevent you or your family members from becoming ill with diarrhea? (Do not read. Circle yes for all that is mentioned and circle no for those that are not mentioned)

|  |     |    |
|--|-----|----|
| AA. Wash hands with soap and water     | Yes | No |
| BB. Cook food thoroughly               | Yes | No |
| CC. Wash vegetables/fruits             | Yes | No |
| DD. Dispose of human waste properly    | Yes | No |
| EE. Boil water                         | Yes | No |
| FF. Clean cooking utensils/vessels     | Yes | No |
| GG. Treat water with chlorine products | Yes | No |
| HH. Cover food to keep away from flies | Yes | No |
| II. Cholera vaccine                    | Yes | No |

|                           |     |    |
|---------------------------|-----|----|
| JJ. Cannot prevent        | Yes | No |
| KK. Other, specify: ----- | Yes | No |
| LL. Don't know            | Yes | No |

37) How would you treat diarrhea for yourself or your family members?

- i) Go to clinic/hospital
- j) Use oral rehydration solution/
- k) Use homemade sugar-salt solution
- l) Go to a traditional healer
- m) Home remedy: Specify \_\_\_\_\_
- n) Do not treat
- o) Other: Specify \_\_\_\_\_
- p) Don't know

38) How do you prepare ORS for your child?

- a. With boiled water
- b. With freshwater
- c. With cold water
- d. Don't know

39) Did you have diarrhea in the last three months?

- a) No, I didn't
- b) Yes, once
- c) Yes, more than once
- d) I don't know

**Food Hygiene**

40) What is the first thing you do when you enter food premises?

- A) Comb your hair
- B) Go to the toilet before starting work
- C) Wash your hands

41) How many times can you reheat leftovers?

- A) As many times as you like
- B) Twice
- C) Four times
- D) You should only reheat leftovers once

42) Do you cover your food and drinking water?

- a. Yes, we always cover
- b. Yes, we sometimes cover
- c. No, we don't
- d. I don't know

**(For Women only) Menstruation and Hygiene**

43) Have you started your period?

- a. Yes
- b. No

44) Which feminine hygiene products do you use during your period?

- a) Sanitary towels

- b) Reusable cloth
- c) Tissue
- d) I don't use anything
- e) I don't know
- f) I don't want to answer

45) Once used, how do you dispose of your feminine hygiene products?

- a) Regular household waste
- b) Toilet
- c) Main garbage bin
- d) Wash and re-use
- e) I don't know
- f) I don't want to answer
- g) Other

46) Would you prefer disposing of your feminine hygiene products in another way?

- a) Regular household waste
- b) Toilet
- c) Main garbage bin
- d) Wash and re-use
- e) I don't know
- f) I don't want to answer
- g) Other

**(Only with SMCs) SMC's Test on Facility Maintenance**

47) Who is responsible for maintenance? *(Select as many as applicable)*

- a. Students
- b. Teachers
- c. Community members
- d. SMCs only
- e. Government only

48) How will you maintain the facilities in your school? *(Select as many as applicable)*

- a. SMC will maintain the facilities in our school according to plan
- b. SMCs should have enough fund for maintenance and do it accordingly when needed
- c. We will ask government to take the responsibility of school's maintenance
- d. We will cooperate those who do maintenance of the school
- e. We will force students to take the responsibility

49) How will you keep hygiene and sanitation in your school? *(Select as many as applicable)*

- a. According to School's development plan which includes School's sanitation and continuation of Hygiene Education
- b. Meeting with teachers to continue teaching HE to their students
- c. encourage students to follow Hygiene Education messages
- d. instructing school's cleaners to keep the environment clean.
- e. We will ask teachers to take care of the hygiene and sanitation in school
- f. students should take care of it
- g. Its not responsibility the responsibility of SMC

50) How will you keep coordination and cooperation with other formal and informal stakeholders?

- a. By conducting SMC's meetings properly and regularly (weekly, biweekly and monthly bases and when needed ) with presence of representatives of DOE
  - b. conduct meeting when needed
  - c. coordination is not needed
- 51) who will be responsible for fund raising?
- a. SMC members
  - b. SMC members and school management staff are responsible.
  - c. Government is responsible. Or I don't know
- 52) How will you maintain transparency in collecting expenditure, purchasing and record keeping?
- a. All SMC members are responsible for keeping transparency in all administration, logistic and financial process
  - b. SMC members are responsible for specifying methods for maintaining transparency in collecting, purchasing and record keeping
  - c. I don't know

## School Observation Guide

|   |                     |
|---|---------------------|
| <b>Province:</b>  | <b>District:</b>    |
| <b>Village:</b>   | <b>School name:</b> |
| <b>Type of School:</b><br>A. Boys<br>B. Girls<br>C. Mixed |                     |

### TLC observation

| Questions   | Options   | Remark |
|---|---|--------|
| 1. Are there any Temporary Learning Classes built at this school?   | <input type="checkbox"/> Yes <input type="checkbox"/><br>No |        |
| 2. Were the TLC constructed by SVA? (look for a signboard or any other signs showing that the TLC was constructed by SVA) | <input type="checkbox"/> Yes <input type="checkbox"/><br>No |        |
| 3. How many students are there at this classroom? (count the students)  | <input type="checkbox"/> #_____                             |        |
| 4. Do the students have enough chairs?  | <input type="checkbox"/> Yes <input type="checkbox"/><br>No |        |
| 5. Does the classroom have a blackboard/white board?  | <input type="checkbox"/> Yes <input type="checkbox"/><br>No |        |
| 6. Does the classroom have sufficient light?  | <input type="checkbox"/> Yes <input type="checkbox"/><br>No |        |

### Latrines

| Observation   | Yes | No | Observation Notes |
|---|-----|----|-------------------|
| 1. Is there a cover for the hole?                                   |     |    |                   |
| 2. Is the slab smooth and easy to clean?                            |     |    |                   |
| 3. Does the latrine have walls, a roof, and a door?                 |     |    |                   |
| 4. Are human faces visible on the floor or slab of latrine?         |     |    |                   |
| 5. Is there a handwashing place inside or just outside the latrine? |     |    |                   |
| a) If yes, please note down what types of handwashing materials     |     |    |                   |
| Jar and Water   |     |    |                   |
| Soap  |     |    |                   |

### Hand washing facility

| Observation   | Yes | No | Observation Notes |
|---|-----|----|-------------------|
| 1. Is there water at the fixed handwashing facility?        |     |    |                   |
| 2.  |     |    |                   |
| 3. Is there a tap on the water container (water reservoir)? |     |    |                   |

### Drinking water storage

| Observation   | Yes | No | Observation Notes |
|---|-----|----|-------------------|
| 1. Is there a drinking water storage container?                 |     |    |                   |
| 2. Are the drinking water containers covered?                   |     |    |                   |
| 3. Is the water in the drinking water storage containers clean? |     |    |                   |

## Key Informant Interview Guide – Stakeholders

Name of the interviewer:

Name of the note taker:

|                     |  |
|---------------------|--|
| Province:           |  |
| Date KII conducted: | Time KII started:  |
| Time KII ended:     | Method used for recording the answers:<br>a) Audio Recording    b) Note taking |

Please ask the following questions and note the answers on one blank sheet provided

Please number the blank sheets before you start

Please write down the question numbers at the beginning of answers to each question

---

I would like to read the consent form which explains the aim of this study, how we use this data and confidentiality of the information you provide us with.

Oral consent obtained

- a) Yes      b) No

### **Introductory Questions**

*SVA implemented a project of WASH and Education assistance to Returnees, IDPs and Host Communities in Nangarhar (Surkhrud and Deh Bala districts) where they dig wells for water, awareness-raising and education for water, sanitation and hygiene and developed water and learning environments at schools from September 2018 till September 2019.*

- 1) Could you tell us about your roles and how long have you been in this position?

### **Response is appropriate and relevant**

- 1) How did SVA decide to implement a project of WASH/Education in Nangarhar? What was the situation like?
- a. Did they consult you before they started the project?

### **Humanitarian response is effective and timely**

- 1) To what extent was SVA able to respond on timely manner?

### **Humanitarian response strengthens local capacities and avoids negative effects**

- 1) To what extent communities and people affected by crisis are less at risk of diseases as a result of poor hygiene and nutrition?

- 2) What has SVA done in order to increase the capacity of local authorities and communities in terms of water, sanitation and Hygiene?

**Complaints are welcomed and addressed**

- 1) As a stakeholder, did you receive any complaints from the affected people and communities about the responses that SVA provided? What kind of complaints have you received?
- 2) What did you do?

**Humanitarian response is coordinated and complementary**

- 1) Has SVA coordinated their activities with you?
  - a. What information was shared with you?
  - b. To what extent was the coordination complementary?

**Humanitarian actors continuously learn and improve**

- 1) (Only Government) Did you monitor the responses provided by SVA?
- 2) (Only Government) What were your findings? What worked and what didn't?

**Recommendations**

- 1) What are your recommendations for SVA?

## Key Informant Interview Guide – School Principal

Name of the interviewer:

Name of the note taker:

|                     |  |
|---------------------|--|
| Province:           |  |
| Date KII conducted: | Time KII started:  |
| Time KII ended:     | Method used for recording the answers:<br>b) Audio Recording    b) Note taking |

Please ask the following questions and note the answers on one blank sheet provided

Please number the blank sheets before you start

Please write down the question numbers at the beginning of answers to each question

---

I would like to read the consent form which explains the aim of this study, how we use this data and confidentiality of the information you provide us with.

Oral consent obtained

- b) Yes      b) No

### **Introductory Questions**

*SVA implemented a project of WASH and Education assistance to Returnees, IDPs and Host Communities in Nangarhar (Surkhrud and Deh Bala districts) where they dig wells for water, awareness-raising and education for water, sanitation and hygiene and developed water and learning environments at schools from September 2018 till September 2019.*

- 2) Could you tell us about your roles and how long have you been in this position?

### **Response is appropriate and relevant**

- 2) How did SVA decide to implement a project of hygiene education and developing water and learning environment in Nangarhar? What was the situation like?
- a. Did they consult you before they started the project?

### **Humanitarian response is effective and timely**

- 2) To what extent was SVA able to respond on timely manner?
- 3) How do you assess the effectiveness of developing water and learning environment?
- a. Construction of classrooms
- b. Construction of hand-washing areas
- c. Construction of latrines
- d. Hygiene education

### **Humanitarian response strengthens local capacities and avoids negative effects**

- 3) To what extent students are less at risk of diseases as a result of poor hygiene and nutrition?
- 4) What has SVA done in order to increase the capacity of local authorities and communities in terms of water, sanitation and Hygiene?

**Recommendations**

- 2) What are your recommendations for SVA?

## Key Informant Interview Guide SVA staff

Name of the interviewer:

Name of the note taker:

|                     |  |
|---------------------|--|
| Province:           |  |
| Date KII conducted: | Time KII started:  |
| Time KII ended:     | Method used for recording the answers:<br>c) Audio Recording    b) Note taking |

Please ask the following questions and note the answers on one blank sheet provided

Please number the blank sheets before you start

Please write down the question numbers at the beginning of answers to each question

---

I would like to read the consent form which explains the aim of this study, how we use this data and confidentiality of the information you provide us with.

Oral consent obtained

- c) Yes      b) No

### Introductory Questions

- 3) Please tell us about your roles in the project? How long have you been in this position?

### Response is appropriate and relevant

- 3) How did you decide to implement a project for WASH in community and schools in Nangarhar?
- a. What made you think this was the priority need?
  - b. Did you conduct any assessment of risks vulnerabilities and needs?
  - c. Did you consult local communities before you start the project?

### Humanitarian response is effective and timely

- 4) To what extent has your organization been able to respond on timely manner?
- a. What have been some important barriers or challenges?
  - b. How did you tackle those challenges?

### Humanitarian response strengthens local capacities and avoids negative effects

- 5) To what extent communities and people affected by crisis are less at risk of diseases as a result of poor hygiene and nutrition?
- 6) What have you done in order to increase the capacity of local authorities and communities in terms of water, sanitation and Hygiene?

### Humanitarian response is based on communication, participation and feedback

- 1) To what extent communities and people affected by crisis are aware of their rights and entitlements?
  - a. How did you inform them of their rights?
  - b. Was there any feedback and response mechanism in place so that affected people can share their feedback safely?
  - c. How do you use the data coming through feedback mechanism?

#### **Complaints are welcomed and addressed**

- 3) Have you consulted affected by about the design of complaint mechanism? If yes, how?
- 4) What kind of complaints have you received?
- 5) How did you respond to those complaints?
- 6) What have you done if the complaints do not fall under your project's scope of work?

#### **Humanitarian response is coordinated and complementary**

- 2) How and with whom have you coordinated your activities?
  - a. What information were sharing with them?
  - b. Have you utilized information you received from other organizations working in humanitarian context?
  - c. To what extent was the coordination complementary?

#### **Humanitarian actors continuously learn and improve**

- 3) Please tell us about how you review/evaluate your responses?
- 4) Please tell us about your lessons learnt from this project? What worked and what didn't?
- 5) Have you documented your learning? Have you shared them with relevant stakeholders?

## Focus Group Discussion Guide – WMC

Name of the interviewer:

Name of the note taker:

|                     |  |
|---------------------|--|
| Province:           |  |
| Date FGD conducted: | Time FGD started:  |
| Time FGD ended:     | Method used for recording the answers:<br>d) Audio Recording    b) Note taking |

Please ask the following questions and note the answers on one blank sheet provided

Please number the blank sheets before you start

Please write down the question numbers at the beginning of answers to each question

---

I would like to read the consent form which explains the aim of this study, how we use this data and confidentiality of the information you provide us with.

Oral consent obtained

- d) Yes      b) No

### Introductory Questions

- 4) Please tell us about the Water, Sanitation and Hygiene/Education project implemented by SVA where they dug wells in the communities.

### Response is appropriate and relevant

- 4) Were you consulted about the wells?
  - a. Your need to wells
  - b. Where to dig the wells
  - c. How and who to maintain them

### Humanitarian response is effective and timely

- 5) To what extent were the wells dug on timely manner?
  - a. What have been some critical barriers or challenges?
- 6) How do you assess the effectiveness of the project?
  - a. Digging well – “Location and Structure”
  - b. Quality of water
  - c. Depth of wells
- 7) How man families are benefiting from the well dug by SVA?
- 8) How far (in meters) is the well from the houses?

### **Humanitarian response strengthens local capacities and avoids negative effects**

- 7) Were you trained on how to maintain the wells?
  - a. Who trained you?
  - b. How many days did the training last?
  - c. What were the topics of the training?
  - d. How effective was the training?

### **Humanitarian response is based on communication, participation and feedback**

- 2) To what extent your communities and people affected by crisis are aware of their rights and entitlements?
  - a. How were you informed about your rights?
  - b. Was there any feedback and response mechanism in place so that can safely share your feedback about the response provided to you?
  - c. If you shared a feedback, what was the response?

### **Complaints are welcomed and addressed**

- 7) Were you consulted about the design of complaint mechanism? If yes, how?
- 8) What kind of complaints have you shared?
- 9) How was the response to your complaints? How timely was the response?

### **Humanitarian actors continuously learn and improve**

- 6) What in the project activities worked well and what didn't?
- 7) Did the NGO change / revise any of their plans based on your suggestions? What changes?

### **Recommendation**

- 1) What are your recommendations for SVA?