



Afghanistan Joint Response (AFJR)

Project -Post-Assessment Report

May, 2017

Table of Contents

1. Purpose.....	4
2. Methodology	4
3. Respondents profile	4
3.1 Respondent sex	4
3.2 Family size	5
4. Assessment Findings.....	5
4.1 Health and Hygiene section:	5
4.1.1 B1: What was the nature of toilet that was in usage in past?.....	5
4.1.2 B2: What is the current nature of toilet in usage?.....	6
4.1.3 B5: What is previous practice for disposal of solid waste?.....	6
4.1.4 B6: What is current practice for disposal of solid waste?.....	7
4.1.5 B7: Did you receive health and hygiene training provided by organization?	7
4.1.5 B8: Could you point out when someone should wash hands with soap?.....	7
4.1.6 B10: Did you receive hygiene kit from CARE Organization?.....	8
4.1.7 B11: Can you tell us what percentage the cleanliness in the neighborhood increase?	8
4.1.8 B12: Can you tell us what percentage the diarrhea incident decreased in your family?.....	9
4.1.9 B13: How many meters latrines is far from water source?	10
4.1.10 B14: Have you hear anything related health and hygiene from media (Radio & TV)?.....	11
4.1.11 B16: which kind of water sources you used?.....	11
4.1.12 B18: Do you have information about water disease? If yes, which kind of disease you know?.....	12
4.1.13 B19: What is current practice for disposal of garbage?	13
4.1.14 B20: What method you used for prevention of disease?.....	13
5. CASH FOR WORK (CFW).....	14
5.1 Type of CFW activities:.....	14
5.2 Days of CFW attended.....	15
5.3 Amount of wage received in CFW	15
5.4 CFW wages consumption	15
5.5 Responsibility of Cash utilization	16
5.6 Change in price of food in market	16
6. Unconditional Cash Grant (UCG).....	17
6.1 Amount received in UCG	17
6.2 How did they spent received cash.....	18
6.3 Cash utilization in families	18
6.4 How long the cash support your family.	19

7. Winterization.....	19
7.1 Winterization item ranking	19
8. Conclusion	20
9. Recommendations.....	21
10. Annexes.....	21

1. Purpose

The Afghanistan Joint Response “AFJR” project Post-Assessment report is declared to analyze, measure and understand that, how beneficiaries care for their health and have they received any hygiene message from CARE and From which tactics they use to hide the waste from their environment. This assessment revealed the project beneficiaries have benefited from Cash for Work, Unconditional Cash & Winterization Package intervention received from CARE. In addition, the assessment will elaborated the assistance causes positive changes and have impact in lives of the affected people, to know that have they taken any step take care of diseases or not, do they have information about health related issues or not?

The aim of conducting post-assessment is to evaluate the impacts of project in increasing capacity of beneficiaries in hygiene section according to intended objective and impact of project. Also, assessment aims to identify whether beneficiaries have access to their basic needs after distribution of winterization packages. Another goal of assessment is to verify if the most vulnerable beneficiaries were involved in intervention and benefited from project and also to have lessons learned for future programming.

2. Methodology

The Enhancement Resilience Program (ERP), Monitoring and Evaluation (M&E) Unit decided to consider individual interview for assessment. At the start, M&E team developed the questionnaire corresponding to the objective of project were developed in English. Then project team reviewed, approved and finalized the developed questionnaire. After that, it was translated to local language Dari. The plan was developed to track the post assessment process effectively. CARE’s male & female staffs who were assigned to conduct the assessment were oriented. Totally, 319 individual beneficiaries for health and hygiene, CFW, UCG and winterization intervention. Finally, the data collected and entered into the data-sheet, cleaned, analyzed and interpreted in report.

3. Respondents profile

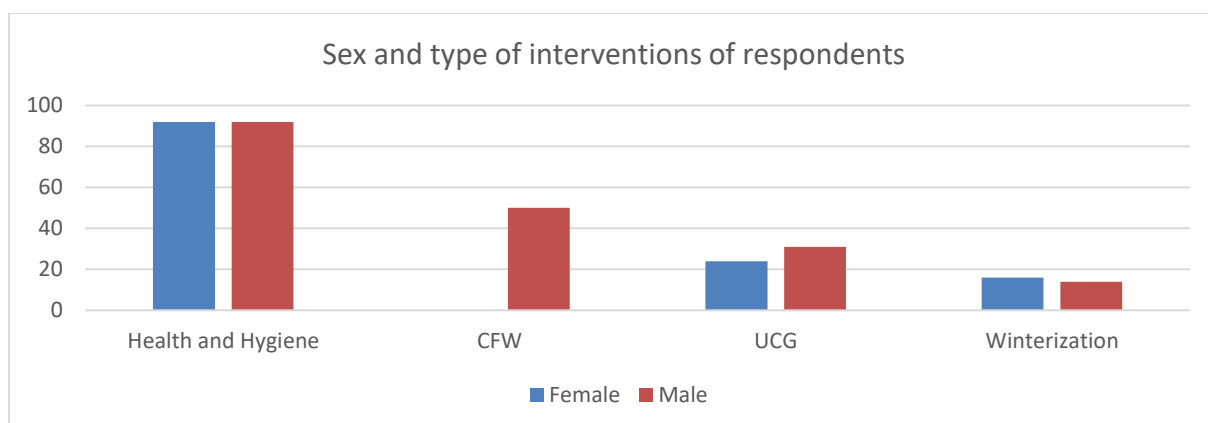
3.1 Respondent sex

According to the project plan 10% of total planned beneficiaries (184 hygiene, 50 CFW, 30 winterization & 55 UCG) of project beneficiaries were selected for this assessment. The respondents were equally selected among four main interventions of the project and with consideration of their gender. The table and graph below illustrates the summary of respondents across all interventions which are divided based on their sex.

Summary of respondent across all interventions

Gender	Health and Hygiene	CFW	UCG	Winterization	Grand Total
Female	92	0	24	16	132
Male	92	50	31	14	187
Total	184	50	55	30	319

This graph shows Summary of respondent across all interventions divided based on sex



3.2 Family size

Based on information of post assessment average size of beneficiaries’ family in Paktia and Ningarhar is 5-7. The minimum size of a beneficiary’s family is 2 persons and the maximum size is 9-14. Table below represents the beneficiaries’ family size in Paktia.

Respondents Family Size

Calculation	Beneficiaries’ Family Size
Average	5-7
Max	9-14
Min	2

4. Assessment Findings

4.1 Health and Hygiene section:

4.1.1 B1: What was the nature of toilet that was in usage in past?

Respondents were asked about their practices of toilet usage before the project intervention. A total of 120 respondents answered this question and 100% of respondents have indicated using their own toilet. The below table shows the respondents’ toilet usage practices in the past disaggregated by their sex.

Toilet usage practice in the past

Gender	Open defecation	Own toilet	Grand Total
Female	0	92	92
Male	0	92	92
Grand Total	0	184	184

4.1.2 B2: What is the current nature of toilet in usage?

Following the respondents were asked about toilet usage practice after intervention of project. All the 184 respondents who answered this question indicated they are using their own toilet. The beneficiaries didn't need to use open defecation because the open defecation was not healthy and safe regarding the hygiene practices. The below table and graph shows the respondents' toilet usage practices in the current disaggregated by their sex.

Toilet usage after intervention:

Gender	Own Toilet
Female	92
Male	92
Grand Total	184

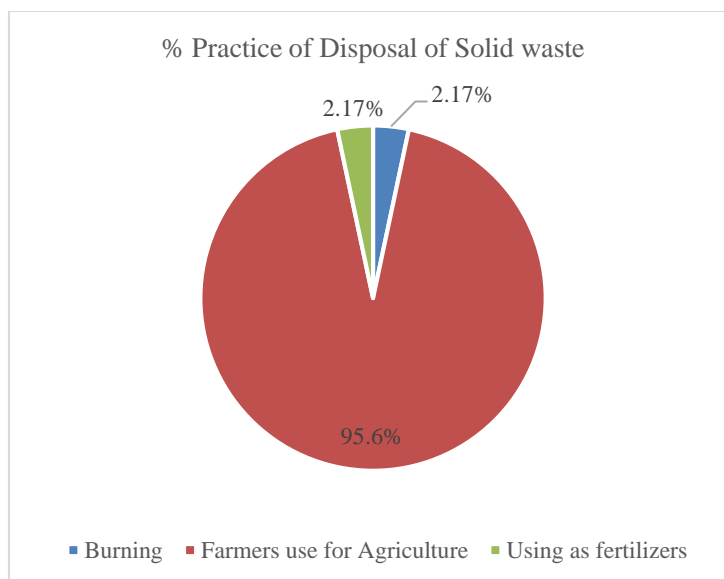
4.1.3 B5: What is previous practice for disposal of solid waste?

The interviewees were asked to state their previous practice for disposal of solid waste. 2.17% beneficiaries replied that they burnt their solid waste, while majority of beneficiaries (95.6 %) use it for agriculture purposes and 2.17% beneficiaries used the solid waste as fertilizer. Table below represents the current practice of beneficiaries for disposal of solid waste.

Disposal of solid waste before intervention

Practices	No. Beneficiaries
Burning the waste	4
Farmers use for Agriculture	176
Using as fertilizers	4
Grand Total	120

Percentage of Practices of Disposal of Solid Waste



4.1.4 B6: What is current practice for disposal of solid waste?

The interviewees were asked about their current practice for disposal of solid waste. 100 % beneficiaries replied that they use their solid waste for agriculture purposes. After health and hygiene training beneficiaries learned that burning solid waste harms the environment so instead they are using solid waste for agriculture purpose which is a healthier practice than burning of solid waste.

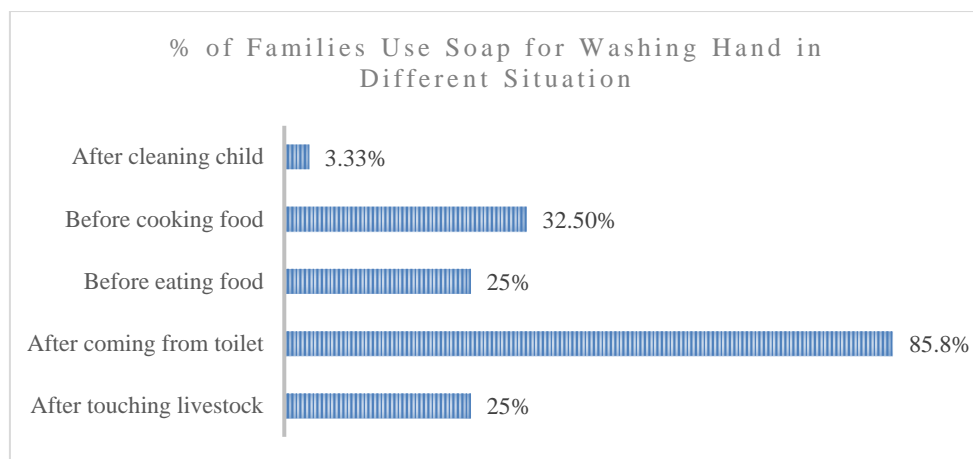
4.1.5 B7: Did you receive health and hygiene training provided by organization?

All of 184 interviewees respond to this question and all of them have confirm that project staff have established hygiene training and providing them practical training for using of the health hygiene kit.

4.1.5 B8: Could you point out when someone should wash hands with soap?

As the nature of the question was multiple choice question so respondents selected different answers. As the result, it declared that 85.8% people are using soap after the coming from toilet, 25% people are washing their hand before eating the food, 32.5% people are using soap before cooking food, 3.33% people are using soap after cleaning child and 25% people answered that they are using soap after touching livestock. This result shows that majority of respondents have informed about health and hygiene practices and use these practices in their daily life as well. Consequently, sickness and other diseases reduced in their household. This below Graph shows the % of Families who wash and don't wash their hands on proper times.

% of Families who wash and don't wash their hands on proper times.



4.1.6 B10: Did you receive hygiene kit from CARE Organization?

Based on the individual interview, all respondents declared that they have received the health and hygiene kits and also they received practical training for usage of the kite from the hygiene educator. The hygiene awareness beneficiaries illustrated that all item of the hygiene kit was so useful. The below table illustrated the beneficiaries number who receive the hygiene kits.

No. beneficiaries who receive the hygiene kits.

Gender	No. respondents	Percentage
Female	92	50%
Male	92	50%
Grand Total	184	100

4.1.7 B11: Can you tell us what percentage the cleanliness in the neighborhood increase?

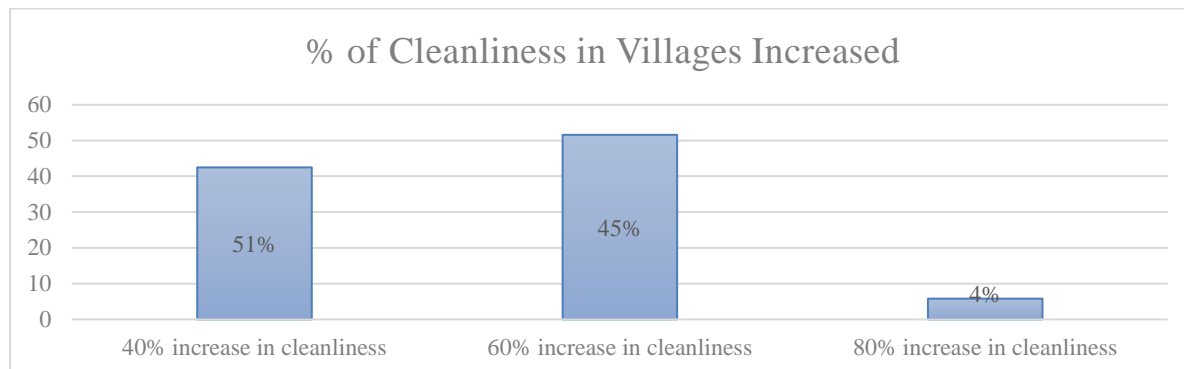
In response to the above question regarding the cleanliness after the health and hygiene awareness training and receiving of hygiene kits from the CARE, 51% of beneficiaries illustrated that 40% cleanliness increase after the training, 45% of beneficiary stated the 60% cleanliness increase, and 4% of beneficiaries demonstrated 80% cleanliness occurred after the awareness training. At overall the assessment result shows that the cleanliness increase in villages and positive changes came in environment through this project health and hygiene section. The below table and graph illustrated the respondents number and % of cleanliness in villages.

Rate of cleanliness of environment

Percentage	No. Respondents
40% increase in cleanliness	94

60% increase in cleanliness	84
80% increase in cleanliness	6
Grand Total	184

The percentage of cleanliness in villages increased.



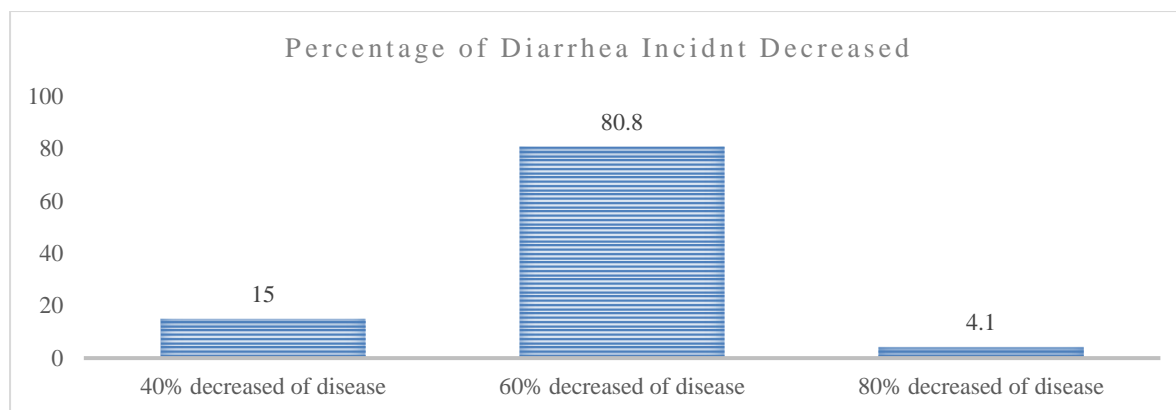
4.1.8 B12: Can you tell us what percentage the diarrhea incident decreased in your family?

The interviewees were asked about percentage of diarrhea incident decreased in their family. 15% of respondents (28 individuals) illustrated that the diarrhea sickness decreased 40% in their family, 80.8% (149 interviewees) declared the diarrhea sickness decreased 60% and 4.1% of respondent (7 respondents) approved diarrhea sickness 80% decreased in their households. They said their capacity raised and learned different things about hygiene and health after attending in health and hygiene training which conducted by CARE. Women have changed their behaviors and started using soap after touching animals, after cleaning their children and before cooking. So based on records of post assessment the incidents of diarrhea is increased about 60% in the targeted communities compare to past years. The below table and table illustrated the respondent number at provincial level.

The respondent number at provincial level.

Percentage	No. Beneficiaries
40% decreased of disease	28
60% decreased of disease	149
80% decreased of disease	7
Grand Total	184

The percentage of diarrhea incident decreased in villages.



4.1.9 B13: How many meters latrines is far from water source?

The above question was asked and 37% of respondents (69 individuals) confirmed that the distance between water source and latrine is 10 meters and 28% of interviewees (51 persons) illustrated the water source are 20 meters far from latrine and 35% of interviewee (64 person) illustrated the water source are 30 meters for from latrine. Therefore, the assessment shows that the health and hygiene training had a positive changes on targeted beneficiaries. The beneficiaries have access to clean and safe water source as the beneficiaries have considered the distance between water source and latrine during construction of their toilet. The below table illustrated the respondent number at provincial level. This below Graph shows the % of beneficiaries build latrines for from water resource.

The respondent number at provincial level.

Distance	No. Respondents
10 - Meter	69
20 -Meter	51
30-Meter	64
Grand Total	184

4.1.10 B14: Have you hear anything related health and hygiene from media (Radio & TV)?

A total of 92 respondents (50 %) beneficiaries clarified that they have not hear anything about health and hygiene from media, but they have learnt from the project health and hygiene educators hygiene awareness trainings. (50%) have received information about the health and hygiene from the both side from the media and also from the project intervention. As overall the assessment result show that the project hygiene section awareness was useful for the beneficiaries. The below table illustrates the respondent number.

The respondent number regarding receiving hygiene message from media.

Location	Perception		Total
	No	Yes	
Paktia	92	92	184

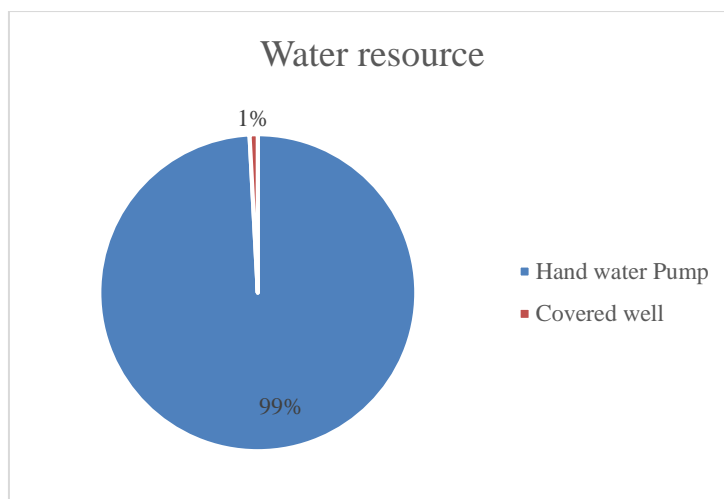
4.1.11 B16: which kind of water sources you used?

Following the question asked from the respondents regarding the potable water resource, the 99% respondents declared that they have used the Hand water pump, while the 1% respondent confirmed they have used the covered well water for drinking. The assessment result show that the targeted beneficiaries have used the clean and healthy water.

The type of water resource which beneficiaries use

Water Sources	No. Respondent
Hand water Pump	182
Covered well	2
Total	184

The percentage of beneficiaries used healthy water resource.



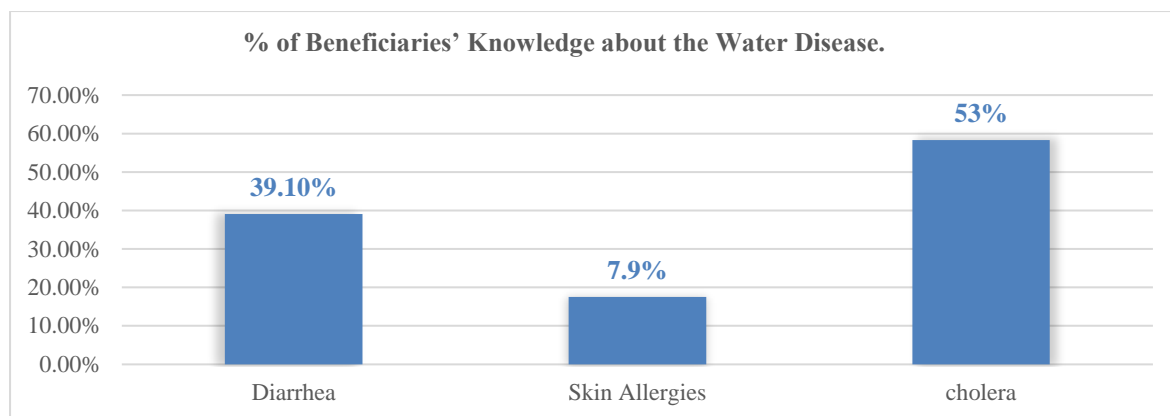
4.1.12 B18: Do you have information about water disease? If yes, which kind of disease you know?

In the hygiene awareness sessions there were topics to improve awareness of the project beneficiaries in introduction of the disease. In assessment 72 of respondents (39.1% of respondents in total) were familiar Diarrhea disease, 15 of respondents (7.9% of respondents in total) become conversant regarding the Skin allergies different types and 97 respondent (53% of respondents in total) well-understand about the cholera disease and also they have received hygiene awareness training from the hygiene educator how to decrease and keep away them self from the above mentioned sickness. This question by its nature was a multiple choice question so beneficiaries can tick more than one option. The below table and graph illustrated the respondent number and the disease which they are familiar with.

The respondent number who aware of diseases

Disease	No. Respondents
Diarrhea	72
Skin Allergies	15
cholera	97

The percentage of beneficiaries’ knowledge about the water disease.



4.1.13 B19: What is current practice for disposal of garbage?

Among the 184 respondents, all of respondents (100 % of respondents) confirmed that, they give the garbage to farmer for agricultural purposes. Based on this information it emphasizes a good practice of disposal of garbage rather than burying of garbage or throwing out which are harmful to the environment and can be a cause for diseases. The below table illustrates the respondent number at provincial level.

Number of farmer and their practice for disposal of garbage

Practice for disposal of garbage	No. Respondent
Farmers take for agriculture	184
Burying on the ground	0
Used as fertilizer	0
I don't know	0
Total	184

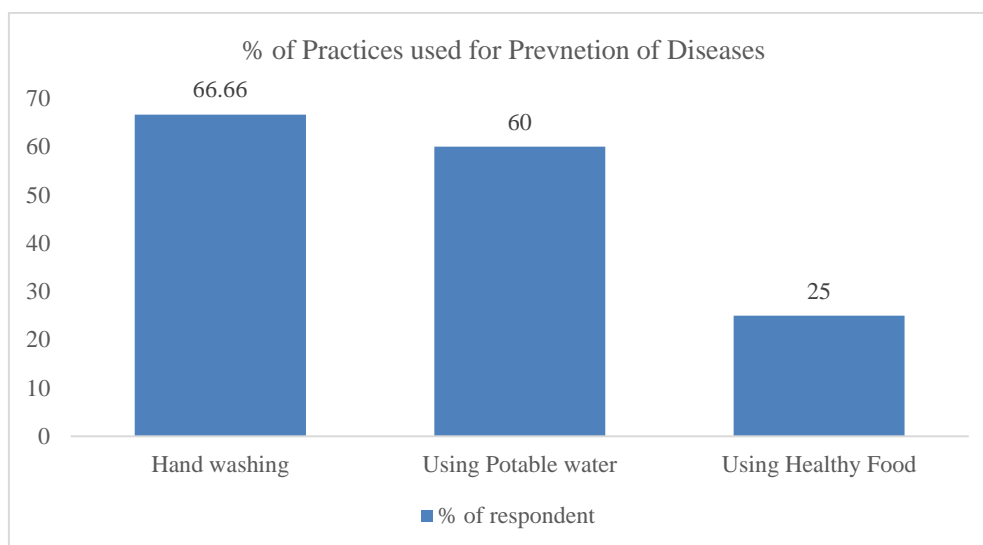
4.1.14 B20: What method you used for prevention of disease?

The respondents were asked to share with us the methods they used to prevent disease. As a result of the assessment we found that 66.66% of respondents (122 respondents out of 184 respondents) prevent diseases through using hand washing with soap method, 60% of respondents (110 respondents) declared that they use potable water and 25% of respondents (46 respondents) said they are using healthy food. This data shows that the project intervention could change the practice of the community in terms of disease prevention positively. Table and graph below show the disaggregated data for those responses declared the practices used for prevention of diseases as the result of project intervention.

Respondent's perception on Prevention of Disease.

Gender	Hand washing	Using Potable water	Using Healthy Food	Grand Total
Female	28	60	12	100
Male	94	50	34	178
Total	122	110	46	278

The percentage of practices used for prevention of diseases



5. CASH FOR WORK (CFW)

Post assessment declared that 50 respondents of beneficiaries who (only male, because of the context and custom in targeted area women can't work outside) participated in CFW activities and benefited from project were interviewed. According to responses it declared that beneficiaries used the received amount from CFW activities for purchasing of food item, nonfood items, health care, loan payment and other basic need. The result of assessment confirmed that providing the opportunity most vulnerable and conflict IDP beneficiaries and also fulfil their basic need.

5.1 Type of CFW activities:

50 respondents of interviewees in post assessment confirmed their participation in CFW activities and answer our interview questions. Due to context and culture of provinces women can't participated in CFW activities so all of this 16 respondents are men and it is notable that they are head of their families. 100% of these respondent participated in Canal cleaning, Road

repairing and Garbage collection, activities. The table below illustrates sex disaggregated data of respondents in CfW activities.

Type of Cash for Work Activity Respondents Were Involved

Activity	Female	Male
Canal cleaning and Road repairing	0	34
Garbage collection	0	16

5.2 Days of CFW attended

A totally 50 assessment respondent illustrated, they have work for 40 days as CFW labor during the project implementation process and participated in micro project activities and obtain 40 days wages per day 350 AFN from the project staff completely.

Days Worked in CFW Activities

Gender	40 days' work
Male	50

5.3 Amount of wage received in CfW

50 respondent clearly confirmed they have received the 14000 AFN in result of the 40 days' work as cash for work in Paktia and Ningarhar provinces. They have were illustrated their happiness from the project activities to provide the job opportunity and also they have receive some amount for basic need. The below table describes by sex disaggregated data of respondents

Wages Receipt Total Amount

Gender	Amount received 14000 AFN
Male	50

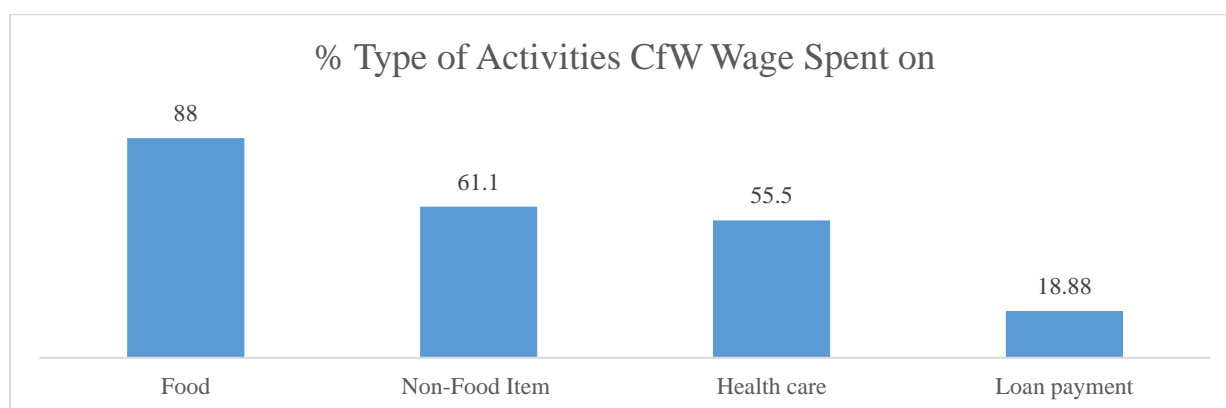
5.4 CFW wages consumption

50 interviewees who participated in CfW activities stated they spent the received amount in different ways. Based on information of post assessment 88% of respondents used the earned amount to purchase food, 61.1% stated they purchased nonfood item, 55.5% spent money for health care and 18.88% paid their loan. This question by its nature was a multiple choice question so the respondents can choose different options. The table and graph below illustrate on which type of activity beneficiaries have spent the CfW wages.

CfW wages consumption

Gender	Food	Non-Food Item	Health care	Loan payment
Male	44	30	28	9

The percentage of type of activities CfW wage spent on



5.5 Responsibility of Cash utilization

As a part of assessment the respondents were asked to indicate who is responsible for utilization of earned money in household. 100% of respondents replied that male headed of family is responsible for utilizing of money in household. Accordingly, it declares that still women authority and responsibility is limited and they are not involved in decision making process of family in village and communities due to Afghanistan costume and culture. The table below illustrates cash utilization in families of CfW.

Cash utilization in families

Gender	Female	Male	Grand Total
Male headed of family	0	50	50
Women headed of family	0	0	0

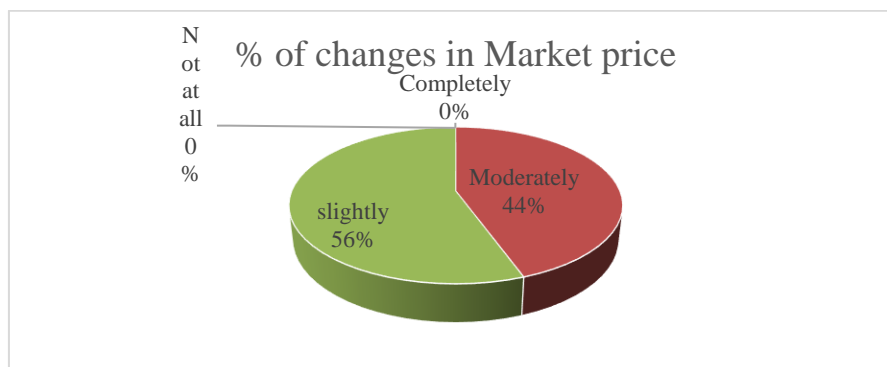
5.6 Change in price of food in market

The interviewees were asked to rate changes in price of food after CfW intervention. 22 of 50 respondents stated price of food changed moderately while 28 of 50 believed that prices changes slightly. Data of post assessment shows that CfW intervention did not affect market and food security of beneficiaries and host communities of targeted communities negatively. The table and graph below show price changes in market in result of CfW.

Market Price Changes

	Completely	Moderately	slightly	Not at all
No. Respondents	0	22	28	0

The percentage of changes in Market Price



6. Unconditional Cash Grant (UCG)

Among 55 interviewees (31 male and 24 female) have been confirmed that they benefited from UCG assistance. Based on the project and impact the most vulnerable conflict, natural disaster and undocumented IDP and those household headed who couldn't able to participate in CfW activities targeted. Based on records of assessment UCG beneficiaries spent the received money for food, nonfood item and health care.

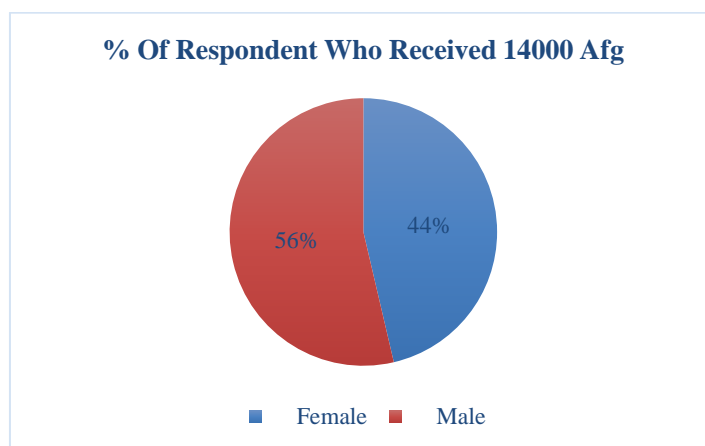
6.1 Amount received in UCG

According the post assessment, 55 respondent confirmed they have received UCG assistance from CARE, all of total respondent declared that, they have received the 14000 AFN. The table and graph below describe by gender disaggregated data of respondents.

No. beneficiaries who received UCG cash

Gender	No. Respondent who received 14000 Afg
Female	24
Male	31
Total	55

The presentage of respondent who receive UCG wage



6.2 How did they spent received cash

The respondents were asked to share us how they spent the received amount. This question in its nature was multiple choice question so the respondents selected different options. Based on data of post assessment 24 beneficiaries out of 55 spent a portion of UCG wages on food & nonfood item, 31 beneficiaries stated they spent money for health care and pay back loan. The table and graph below describe by gender disaggregated data of respondent.

Type of activities which beneficiaries spent UCG wage on

Row Labels	Food & NFI	Health Care & Loan payment
Female	12	16
Male	12	15
Total	24	31

6.3 Cash utilization in families

The result of the post assessment shows that, 29 out of 55 respondents confirmed that the received amount is utilized by Male head of family, while the 26 respondent illustrated women head of family members spend the received amount. The table below describe by gender and location disaggregated data of respondent.

Responsible person for utilization of assistance in household

Gender	Male head of family	Women head of family	Grand Total
Female		26	26
Male	29		29
Grand Total	29	26	55

6.4 How long the cash support your family.

As a part of assessment respondents were asked to indicate how long the received amount fulfill their basic needs. 2 respondents indicated that the received amount is enough for 15 days, 14 interviewees said the received amount is enough for 30 days, 24 respondents confirmed it can be enough for 45 days, 1 person said it is enough for 75 days, 4 interviewees said it is enough for 120 days and 10 others said this amount is enough for 60 days. Accordingly, most of interviewees said it can be enough for one month. The table below describe by gender disaggregated data of respondent.

No. days the cash supports needs of family

Gender	15 Days	30 Days	45 Days	60 Days	75 Days	120 Days	Grand Total
Female	2	10	12	2	0	0	26
Male	0	4	12	8	1	4	29
Grand Total	2	14	24	10	1	4	55

7. Winterization

Total of 30 interviewees out of 120 respondents (16 female and 14 male) confirmed that they received winterization assistance. The post assessment revealed that the project winterization assistance distributed to most vulnerable families, who have been displaced by natural and conflict disaster in targeted province. The winterization package was included items such as (Blanket” double size”, Plastic sheet, child cold package for different ages, adult cold package and Cash about 6000 AFN).

7.1 Winterization item ranking

30 respondents confirmed that they receive winterization assistance. Most of respondents revealed that all items in the received winterization were most useful, but some of respondent declared that, some items such as warm cloths, warm boots and gloves and hat were less useful, because of inequitable size of cloth and boot.

Beneficiaries’ idea related to usefulness of winterization package

Gender	No. beneficiary who found that Most of items are useful	No. Beneficiaries who found some item is less useful items	Items not used yet
Female	16	9	0
Male	14	0	0
Grand Total	30	9	0

In respond of the question which item should be added or removed from the package, all of the respondents were satisfied and they stated no need to change or remove items from the package and it is fulfill their basic needs. In addition, all of respondents were satisfied and they didn't have any recommendation regarding adding new item to package. Based on their words they don't need anything else and this package could fulfilled their basic needs.

8. Conclusion

The post assessment findings reveals that the project interventions had positive outcome on both the project beneficiaries and the targets areas. Overall, 10% of the project beneficiaries were interviewed during the assessment covering all interventions (CfW, UCG, Winterization and Health and Hygiene) of the project. As the result of the project intervention, 100% of total respondent beneficiaries confirmed receipt of hygiene awareness training and hygiene kits from the projects staff. 100% of the respondent indicated that after the project implementation they have use the their own toilet , in case 65% respondent indicated that they have use open defecation in pre-assessment in Ningarhar province, 85.8% of the respondents indicated they are using soap after the coming toilet, after cleaning child & before food eating. Etc. While 100% of respondents answered the question and about environment cleaning, 94 respondents (51% of total) indicated that 40% cleanliness increase, while 84 respondents (45% of total) declared that 60% of cleanliness increase in targeted area and 4% respondent declared that 80% cleanliness increase and also most of interviewees (80.8% of respondents) illustrated that the diarrhea incident 60% decreased compare of past time. The assessment respondent show that they have dig potable water well about 20 to 30 meters far from the water sources , before the hygiene awareness the people didn't care about the distances of potable water sources and toilet. Nowadays the targeted beneficiaries use the clean and healthy potable water. The health and hygiene awareness beneficiaries confirmed that 53% of respondents have received informed about cholera disease, 39.1% respondent informed about diarrhea disease. In summary, after receiving health and hygiene training target beneficiaries have started using the healthier practices in their daily life and this intervention helps them to improve health and hygiene level in their community and families. A total of 50 CfW beneficiaries were interviewed, according to them the wages received from the project were consumed mainly on purchasing of food, non-food, or loan payment. All of beneficiaries were busy in canal cleaning, Garbage collection and road repairing. 88% beneficiaries utilized their received amount on procurement of food items, the rest of money was used for procurement of NFI and loan payment.

Through this post assessment 55 respondent confirmed their participation and receipt of the UCG assistance, and they have declared that they used received amount in food, NFI, loan payment and health care. All of respondents utilized a portion of their receive amount on purchasing food item and 58% of the beneficiaries utilized their receive amount in health care and loan payment. Therefore, based on finding and records of post assessment CfW & UCG interventions had a positive impact on lives of beneficiaries by improving food security and level of health care of benefited families.

In the post assessment find out that from the winterization 30 respondent revealed their participation and confirmed receipt of assistance of winterization. In respond to the question about the usefulness of the received items, 70% of the respondents gave respond to question and declared that all item was useful, but some of the respondents illustrated that a few items such as

warm cloth & coat, gloves and boot was used less than other items because some of items were inequitable size for beneficiaries

9. Recommendations

- 1- Most of beneficiaries' recommended for long term support for conflict and natural disaster IDP and continuing the project activities in targeting area.
- 2- Providing long term job opportunities to IDPs.
- 3- Conducted literacy and vocational training to women.

10. Annexes

- 1- Post assessment hygiene questionnaire
- 2- Post assessment CFW,UCG & Winterization questionnaire