



**MONITORING REPORT OF**  
INTEGRATED WASH RESPONSE TO MASS DISPLACEMENT  
REDUCING CHILD MORBIDITY AND MALNUTRITION  
INCIDENCE, URUZGAN

# Afghan Development Association

Taking Pride in Development & Rebuilding of  
Afghanistan; Where We Put People First”



Monitoring Mission Conducted By:  
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**Introduction:**

The Afghan Development Association (ADA), Monitoring and Evaluation Unit (M&EU) planned to monitor all ongoing projects across the target provinces during 2015 on regular bases. As a part of this annual plan, a mission had been carried out to monitor the NCA funded project "Integrated WASH Response to Mass Displacement Reducing Child Morbidity and Malnutrition Incidence in Uruzgan province of Afghanistan".

**Monitoring Team:**

The monitoring team consisted of the following staff:

- Mr. A. Malik Rahmani, Monitoring and Evaluation Unit Head

**Objectives of the Mission:**

The main objective of the mission was:

1. To monitor the progress of Integrated WASH Response to Mass Displacement Reducing Child Morbidity and Malnutrition Incidence in Uruzgan province of Afghanistan

**Methodology of Monitoring:**

The following steps were followed during the monitoring mission:

1. Individual meetings/interviews with officials and beneficiaries
2. Site visit

**Summary of the Mission:**

The mission started from Kabul on 06<sup>th</sup> September 2015 to Uruzgan province (Tirinkot) by air and completed on 11<sup>th</sup> September 2015. According to the plan, at 10:00 am of the first day of the mission a joint meeting was held with NCA team and its partners (NPO and CCA). Also at 2:00pm a meeting was held with ADA provincial and WASH project staff to share the monitoring objective with them and finalize the action plan for the site visit.

On 07<sup>th</sup> September 2015, the monitoring team had conducted a site visit to Siabini and Ghulaman villages where IDPs have been located. Meetings were held with representatives of WASH committee both in Siabini and Ghulaman villages. Three WASH committees were established in Siabini and four were established in Ghulaman village, the monitoring team had a meeting with representatives of all seven WASH committees in the mentioned villages. MoUs between ADA and all WASH committees were signed for the identification of their responsibilities during the project implementation and after completion; however, the copy of the signed MoU was not handed over to them. The awareness of WASH committee members about their responsibilities was raised, but still more work is needed with them to be fully active during the project implementation.

It is worth to mentioned that the progress of project and some problems have been discussed, for instance, in most cases female even the male beneficiaries were not willing to sign or give their finger-print on the attendance sheets of hygiene promotion sessions. The monitoring team recommended that a copy of the MoUs, which were signed with WASH committees, should be given to them for the purpose of official use and record. Also during the site visit some selected locations for latrine and bathing space were observed together with WASH committee members.

**Project Background:**

Afghan Development Association (ADA) has been implementing different projects funded by NCA in Uruzgan province. The current "integrated WASH response to mass displacement reducing child morbidity and malnutrition incidence" project is being implemented for IDPs in Tirinkot district, the main components of this project are: provision of clean drinking water, sanitation and hygiene education to IDPs and affected malnutrition children.

The overall objective of the project is “**to reduce the risk of avoidable morbidity and mortality of refugees, IDPs and host communities through provision of WASH services in coordination with health and nutrition interventions in the targeted area of Uruzgan province**”. The current trend of the project implementation and observations show that the project will have maximum contribution to the overall objective by the end of project.

#### **Activities during the monitoring mission:**

According to the action plan, a mission has been carried out for the following two main activities:

##### **1- Meetings held**

- Meeting with project staff: discussion about the progress of project and challenges against the project’s achievements

##### **2- Site visit** and discussion with WASH committee members in Siabini and Ghulaman village

#### **Progress of the project:**

Based on our observation, meetings and discussion with WASH committees, the overall project was going on smooth as planned, but there were some gaps in the filling system and progress of hygiene promotion sessions, which need more focus and attention. The filling system was in place, but in some cases the files were not prepared correctly as well as the hygiene sessions’ attendance sheets were not filled as they are required. For example, in some attendance sheets only names of the attendees were written without additional information about the sessions. Some forms were filled, but incomplete because of dates, locations and finger-prints.

#### **Coordination meetings:**

Based on the meetings minutes, coordination meetings were conducted with provincial department of economy, PDoRRD, AHDS and Director of Hospital. Also meetings were held with WASH committees in four villages of the project location in Tirinkot.

#### **Initial household survey:**

A survey was conducted in all four IDP villages by project staff with the support of WASH committee members. Full information about the HHs was existed, however, still the ID no. Of 24% IDPs (360) was missed, in some cases the serial no. of election ID’s or telephones were written instead of national ID numbers due to unavailability of national IDs with project beneficiaries.

#### **WASH committees:**

At all four villages, 15 WASH committees have been established (4 WASH committees in Ghulaman Kalacha, 6 in Nawbahar villages, 3 in Siabini village and 2 in Shahidan villages); there were no female members in WASH committees due to cultural restriction. MoU was signed with each WASH committee for understanding its responsibilities during the project implementation.

#### **Location for Latrine and bathing space:**

Selection of locations for latrine and bathrooms were completed approximately 82% through consultation of WASH committees. The remaining (18%) was incomplete due to the assassination of WASH committee chairman in Shahidan village, while, the selection of location for both latrine and bathrooms were completed in three villages such as, Siabini, Nawbahar and Ghulaman. It is noticeable that MoUs were signed with the owner of latrines and bathrooms at target locations.

#### **Boreholes:**

Locations for boreholes were identified in consultation with WASH committee and PDoRRD one in Nawbahar and another in Ghulaman village; so far the actual work was not yet started.

**Water testing:** This activity was not yet started due to unavailability of water testing kit (Del-Agua kit), which is under procurement by central office.

**Chlorination:**

24 wells (2 in Siabini, 10 in Nawbahar and 12 in Ghulaman) for chlorination were identified and the actual chlorination process will start next month as planned.

**Hygiene Promotion:**

Hygiene awareness raising sessions for IDPs (male and female) were going on in all four villages. In Siabini village the hygiene training for female was not yet started. A total of 2,019 (1,438 male and 581 female) beneficiaries were trained in the targeted locations. 1,438 male were trained "552 in Shahidan, 562 in Nawbahar, 62 in Siabini and 232 in Ghulaman" and 581 female were trained "105 in Shahidan, 119 in Nowbahar, 73 in hospital, 62 in Ghulaman, 45 in Gul Kalacha, 30 in Poti Kalacha, 92 in Bazar Kalacha, 20 in Khairo Kariz and 35 other were also trained whose location of sessions were unspecified.

**Hygiene kits:**

Hygiene kits for malnutrition program were purchased, but still were not transported to the ADA warehouse and were not distributed to the project beneficiaries as well.

**Challenges:**

- The unavailability of hygiene promoter at the project site affected the progress of hygiene promotion sessions. Both female and male hygiene promoters were out of office. The female hygiene promoter was not present at her work regularly, whilst, the male hygiene promoter has gone to Hajj pilgrimage.
- The slow procurement process of hygiene kits affected the progress of project activities, especially, the trainings.
- Due to the unavailability of Del-Agua kit, water-testing activity has been delayed.
- Unavailability of women representative in WASH committees is considered as a shortage of project implementation.

**Recommendations:**

- New ones should replace both male and female hygiene promoters as soon as possible.
- Purchasing of all necessary materials and kits including Del-Agua kit, female hygiene kits, cleaning kits and WASH kits should be purchased as well as the distribution of WASH and cleaning kits should be started in health centers ASAP.
- If it is possible a separate women WASH committee (one per village) should be established
- Close follow up of the project progress from the main office, especially, by the sector head are highly recommended.

## 1. Project information:

Project Name	Integrated WASH Response to Mass Displacement Reducing Child Morbidity and Malnutrition Incidence
Project Location	Tirinkot district of Uruzgan province
Project Sector	Agriculture and Livestock (WASH)
Source of Funding	Norwegian Church Aid (NCA)
Approved Budget	US\$ 291,173
Start Date	01 <sup>st</sup> May 2015
End Date	30 <sup>th</sup> April 2016

### Overall goal:

To reduce the risk of avoidable morbidity and mortality of refugees, IDPs and host communities through provision of WASH services in coordination with health and nutrition interventions in the targeted area of Uruzgan province.

### Expected Outcome 1:

Refugees living in spontaneous settlements, IDPs and host communities have improved access to adequate sanitation facilities

Outputs	Indicators	Achievement
19,400 (6,100 men, 7,800 women and 5,900 children) refugees, IDPs and host families have been provided with appropriate and functioning latrines and bathing facilities that meet Sphere standards	<ul style="list-style-type: none"> <li>Number of households provided access to a functioning sanitation facility</li> <li>Number of individuals having access to a bathing facility</li> <li>Number of WASH committees established and trained</li> </ul>	15 WASH committees established (2 in Shahidan village, 3 in Siabini village, 4 in Ghulaman Kalacha and 6 in Nawbahar village). The committees were trained in WASH components and MoUs were signed with them to know their responsibilities.
Activities	Achievement	Remarks
Identification of locations for construction of latrines (MRRD design)	<ul style="list-style-type: none"> <li>Location of latrine at all four villages identified for <b>84%</b> latrine</li> </ul>	The identification of 80 locations of latrines will be completed at the end of September 2015
Construction of 500 safe emergency latrines (1 x 20) Individuals (in Tirinkot, Uruzgan)		Construction activity was not yet started

Construction of 250 safe and appropriate bathing facilities (1 x 40 users per day) (Tirinkot, Uruzgan)	Locations for bathing space in all four villages were identified for <b>80%</b> bathing space.	Based on the project recovery plan, this activity will be completed at the end of September 2015
Provision of 100 latrine cleaning kits in health and nutrition centers (Tirinkot, Uruzgan)	The kits were purchased, but the distribution was not started.	As planned the kits will be distributed in October 2015
Formation of 15 WASH committees with the participation of women, men and children	15 WASH committees established (2 in Shahidan village, 3 in Siabini village, 4 in Ghulaman Kalacha and 6 in Nawbahar village) all with male members.	Due to cultural restriction, all members of the WASH committees were male
<b>Outcome 2</b>		
Refugees living in spontaneous settlements, IDPs and host communities have improved access to safe water supply		
<b>Outputs</b>	<b>Indicators</b>	<b>Achievement</b>
20,300 (6,389 men, 8,460 women and 5451 children) refugees living in spontaneous settlements, IDPs and host communities have been provided with water of appropriate quality and sufficient quantity for drinking, cooking and maintaining personal hygiene	<ul style="list-style-type: none"> <li>Number of people in intervention areas provided with access to at least 15 LPCD of drinking water</li> <li>% Of drinking water samples with faecal contamination (taken at water collection and/or use points)</li> <li>Number and type of water facilities constructed and rehabilitated</li> <li>Number of individuals reached through awareness raising sessions</li> </ul>	Awareness raising sessions were started for beneficiaries.
<b>Activities</b>	<b>Achievements</b>	<b>Remarks</b>
Installation of 1 hand pumps (Kawsar) (Uruzgan)	Location for borehole was identified in consultation with WASH committee and PDoRRD in Ghulaman village	
Installation of 1 hand pump (Afridev/Pamir) Uruzgan	Location for borehole was identified in consultation with WASH committee and PDoRRD in Nawbahar village	

Provision of water storage containers at health centers and at household level		Based on the project recovery plan, this activity will be completed in October 2015
Water quality testing and treatment		Due to unavailability of Del-Agua kit, this activity is planned to be started in October 2015
WASH 60 staff training on water quality testing and monitoring	4 staff of ADA were trained in water testing by NCA	
Chlorination of 48 wells and water reservoirs (24 in Uruzgan)	24 wells were identified for chlorination, but the chlorination activity was not started	Based on the project recovery plan, this activity will be completed in October 2015
300 awareness raising sessions on water management and treatment for 7,500 men and women in communities and health centers		Based on the project recovery plan, this activity in progress

### Expected Outcome 3:

27,800 (6,389 men, 15,960 women and 5451 children) refugees living in spontaneous settlements, IDPs and host communities have an increased understanding of key health risks related to WASH and adopt positive hygiene practices to prevent these.

Implementation of hygiene promotion component will be done in cooperation with WASH committees, JUH, AADA and AHDS staff at health and nutrition centers and the community members themselves. Hygiene promotion will be linked to the water and sanitation components of the program, ensuring participation of beneficiaries in all stages and sectors of the WASH activities. Special attention will be given to awareness raising of communities on symptoms, prevention and treatment of Malaria and Diarrhea. Hygiene promotion staff will use relevant IEC materials and tools of the PHAST and CHAST approaches to help communities identify and analyze their problems and then find suitable solutions for responding and mitigating.

Using the PHAST and CHAST approaches, communities will be educated on handling of sanitation facilities and its maintenance, solid waste disposal, disadvantages of open defecation, disease transmission and to cover vector breeding sites with mud filling in order to avoid adverse environmental impacts.

Outputs	Indicators	Achievement
20.300 (6,389 men, 8,460 women and 5451 children) refugees living in spontaneous settlements, IDPs and host communities are able to take action to prevent WASH related diseases through participation in Hygiene promotion activities. NCA will use Participatory Hygiene and Sanitation Transformation (PHAST and CHAST) approach aiming at improving hygiene behaviors to reduce diarrheal diseases and	<ul style="list-style-type: none"> <li>Number of people reached through Hygiene Promotion</li> <li>Number of women recipient of WASH package</li> <li>% of people who can recite at least three methods to avoid diarrhea (in a sample of 20%)</li> <li>Number of families with access to hygiene items at</li> </ul>	Total of 2,019 IDPs were trained in hygiene promotion including <b>1,420</b> male, <b>540</b> female and <b>59</b> children in four IDPs villages of Tirinkot.

encouraging effective management of water and sanitation services. Hygiene awareness sessions focusing on the linkage between WASH and malnutrition will be carried out in health and nutrition clinics, focusing on prevention of diarrhea and safe infant and young child feeding practices. Suitable communication techniques and culturally appropriate Information, Education and Communication (IEC) material will be utilized to ensure the participation and impact. NCA will distribute female hygiene kits to women and girls for resilient bodies and minds by enabling them to maintain their personal hygiene, privacy and dignity	household level  <ul style="list-style-type: none"> <li>Number of health and WASH staff trained in Hygiene promotion using PHAST and CHAST approaches and hygiene promotion messages to mothers</li> </ul>	
<b>Activities</b>	<b>Achievements</b>	<b>Remarks</b>
Conduct knowledge, Attitude and Practices (KAP) baseline survey in Uruzgan	N/A	KAP survey will be conducted by NCA
2 trainings of 60 WASH staff of partners on PHAST and CHAST approaches for hygiene promotion	4 ADA staff were trained in PHAST and CHAST approach by NCA	
Provision of 1,150 minimum WASH packages in health facilities and mobile health and nutrition centers	700 WASH packages were purchased in Tirinkot, but not yet distributed.	The activity was planned for the month of June, but not yet started. However, based on the project recovery plan, this activity was completed in the month of September 2015
NCA will organize a ToT (training of trainers) on Hygiene promotion in emergencies that will be facilitated by NCA's Hygiene Adviser based in head office in Oslo.	4 ADA staff have been trained in ToT on hygiene promotion by NCA	
2,900 hygiene kits provided to the households of refugees and IDPs living in the target areas.( 1500 for Uruzgan)		The activity was planned for the month of June, but not yet started. However, based on the project recovery plan, this activity will be completed in October 2015
1,000 hygiene promotion sessions using PHAST and CHAST approaches in communities, health and nutrition centers.	95 hygiene promotion sessions were conducted in communities and four session were conducted in health center	A total of 2,019 individuals were trained (73 in health center and 1,946 in four IDPs villages).



30 people trained (WASH, health and nutrition staff) for in order to pass on key messages related to hygiene and nutrition, targeting mothers with children under- five years in health facilities.	Four ADA staff members were trained by NCA and the trainings of beneficiaries have been in progress at field level.	
300 hygiene promotion sessions in health and nutrition centers with a focus on the prevention, transmission and treatment of diarrhea, especially focusing on children under five.	Four sessions were conducted in health center	
Development of IEC material for hygiene promotion	The material were developed and were distributed in public places and communities	

**General Checklist:**

Project staff hired?	Project staff was hired and were present on their duties, the project hired staff are “project supervisor, WASH engineer, logistics officer, two foremen, two hygiene educators (male and female) and field monitor.
Project staff present in the site?	The hygiene promoters both male and female were not present at the site: The male promoter has gone to Haj, while, the female was not present due to her personal problems.
Equipment/Material available?	Necessary office equipment and materials, were available
Working relationship between community and the project staff	Relation between ADA project staff and target community was good and the community members looked cooperative in identification of locations for latrines and bathing space.
Community participation and contribution	Community representative participated in the most of project activities as survey, selection of beneficiaries, identification and selection of location for bathing space and latrines.
Working relationship with other stakeholders (Local Government, UN Agencies and NGOs)	Work relation with local government related departments were good.

## Monitoring Mission Pictures



A view of meeting with WASH committee members in Siabini IDPs village of Tirinkot



Selection of location for latrine in Siabini village in the presence of WASH committee members

Integrated WASH response to mass displacement reducing child mortality and malnutrition through WASH in Tirinkot/IDP camps

S/R	Name	Father Name	Age	Village	Sex	Date of Training	Signature
1	راول	آغا جان	22				
2	تول	سید محمد	16				
3	ایمان	عاشق	30				
4	سید محمد	عاشق	25				
5	محمد	محمد جان	31				
6	محمد	محمد	25				
7							
8							
9							
10							
11							
12							
13							
14							

Sample of incomplete training attendance sheet



A view of meeting with WASH committee members in Ghulaman IDPs village of Tirinkot