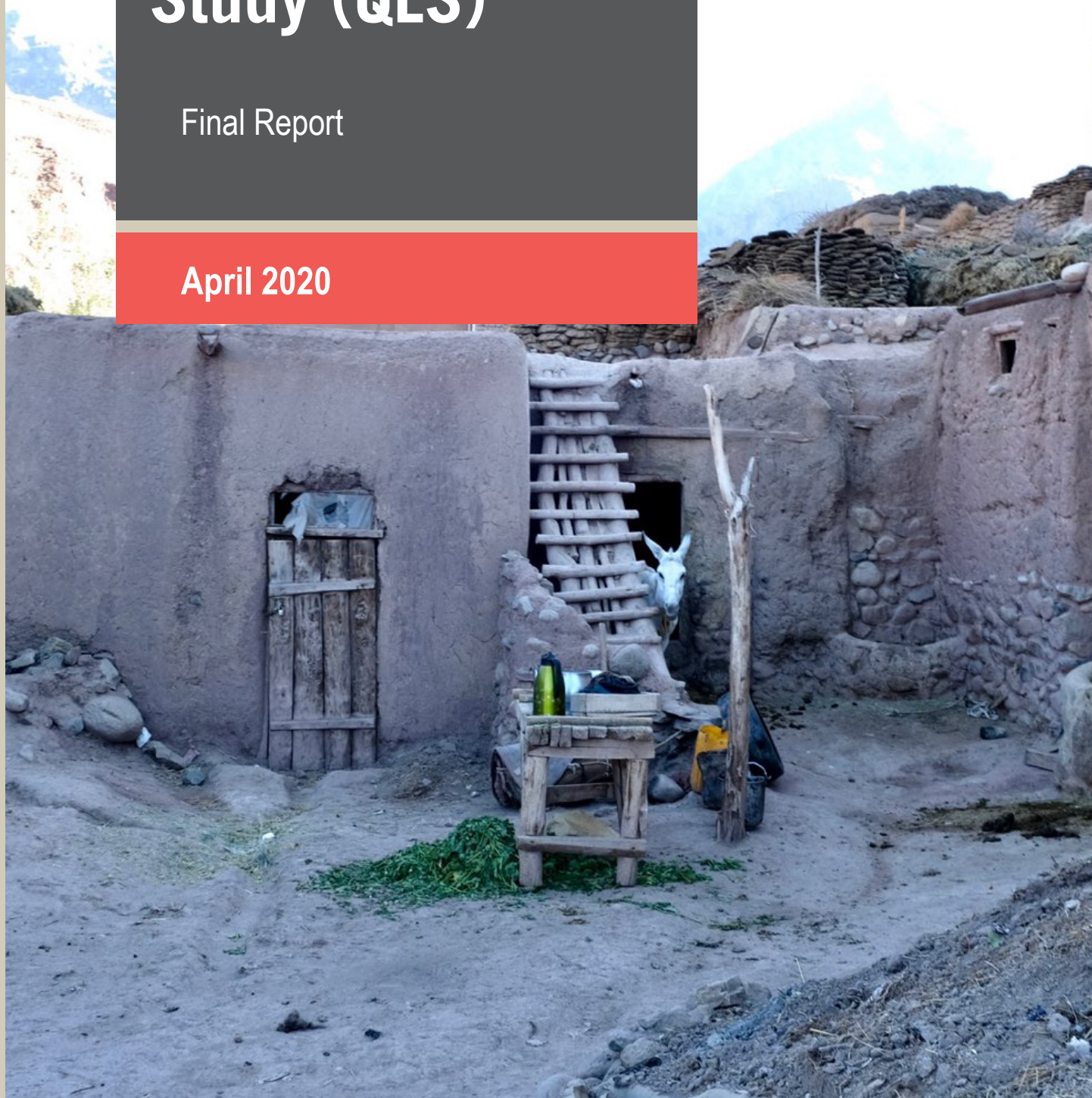


AFGHANISTAN

ERM Qualitative Longitudinal Study (QLS)

Final Report

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About REACH

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SUMMARY

In 2020, Afghanistan enters the fifth decade of protracted conflict, alongside recurrent and severe natural disasters that have affected the population. The United Nations High Commissioner for Refugees (UNHCR) registered a total of two million Afghans displaced inside Afghanistan, and bringing the total number of displaced people to almost 4.1 million¹. Afghans were also identified as the longest displaced and the longest dispossessed population globally². The Emergency Response Mechanism (ERM) is a rapid response facility funded by the Directorate-General of the European Civil Protection and Humanitarian Aid Operations (DG-ECHO) to provide immediate, life-saving assistance to shock-affected populations in Afghanistan since 2011. Between May 2019 and April 2020, ERM round nine was implemented through a coordinated alliance of seven humanitarian organizations delivering multi-purpose cash assistance (MPCA), protection, and water, sanitation and hygiene (WASH) assistance nationwide.³ Whilst there are multiple activities assessing the quality and short-term outcomes of MPCA there is limited data on the longer-term impacts of one time multi-purpose cash on vulnerable shock-affected communities.

In light of this information gap, REACH, in coordination with ERM partners launched a **qualitative longitudinal study (QLS)** in Ghor, Herat, Nangahar and Faryab. The QLS is aimed to track the continued impact of assistance on basic needs of a sample of MPCA recipients over time, and where needs persist and/or remain unmet. Following on from the preliminary report that outlined findings from the first round of data collection, this report summarizes the key findings from the total five rounds of the assessment.

The caseload selected for the study included 266 households with whom household-level interviews and 40 focus group discussions (FGDs) (10 per province) were conducted during the first round. The five QLS data collection rounds were conducted over a nine-month period between August 2019 and April 2020. Data from the five rounds were then compiled and analysed in R, while the FGDs were analysed through the facilitators' notes. Thus, over the rounds, it is possible to have a clear indication of the extent to which the one-time cash affected this sample group, and how their humanitarian needs changed over a prolonged period after assistance. It should be considered that the findings proposed represent the assessed households' perspectives and self-assessments perceptions. It also needs to be considered that the sample group received the assistance in July and August 2019, and the monitoring period covered winter months (rounds three and four), and thus reported challenges and needs over time may be related to seasonality. Given the sampling methods used, household-level findings should be considered representative of the specific population group assessed only, and when reading the graphs and interpreting the findings, it should be considered that the number of households varied across rounds.

The vast majority of assessed households remained in their area of displacement (86%) up to the fifth and final round of data collection, nine months after having received their ERM multi-purpose cash assistance. This is important to note, as whilst ERM MPCA is not designed to support household needs beyond the first two months, the continued displacement status of so many beneficiary households likely affected needs. The 2019 Whole of Afghanistan Assessment (WoAA) found that those displaced for more than six months ('prolonged internally displaced persons (IDPs)') often had greater needs than those that were newly displaced (within the first six months of displacement).⁴

The priority needs of the majority of QLS-assessed beneficiary households were food, shelter, non-food items (NFIs), healthcare, and WASH. Whilst there was some variation across sectors of need, there was a general trend in levels of humanitarian need improving in the short term, following receipt of assistance, but then remaining the same or worsening over time. For example, the analysis of the reduced coping strategy index (rCSI), a measure of the severity of coping mechanisms used by the household to meet needs, showed an improvement in the initial months but then plateaued after the second round in December.

¹ ECHO, Afghanistan Factsheet (2020) https://ec.europa.eu/echo/where/asia-and-pacific/afghanistan_en

² UNHCR, Afghanistan Situation Overview (2020) <https://data2.unhcr.org/en/situations/afghanistan>

³ The ERM is currently being implemented across 33 of Afghanistan's 34 provinces by the following operational partners: Action Against Hunger (AAH), ACTED, Danish Committee for Aid to Afghan Refugees (DACAAR), Danish Refugee Council (DRC), International Rescue committee (IRC), Première Urgence Internationale (PUI), Relief International (RI), and REACH initiative to support in the information management systems of the ERM.

⁴ REACH, 2019 Whole of Afghanistan Assessment (WoAA), [Province Level Factsheet Booklet](#).

In terms of capacity to cope with shock and displacement, this trend suggests that whilst many beneficiary households may not necessarily show signs of severe humanitarian need following receipt of MPCA, they at minimum showed a reduced capacity to cope with their immediate situation, that persisted over time. This indicates a need for short-term emergency assistance to be coupled with longer-term resilience and recovery, and livelihoods, focused programming for shock-affected households. The need for livelihoods interventions was further evidenced by findings on socio-economic status.

These findings were further supported by the analysis on debt, showing that the proportion of households in debt increased over time, likely due to negative net-income ratio leading to households that had not been in debt prior, exhausting other coping mechanisms and needing to borrow or purchase on credit to meet their household needs.

In addition, non-financial barriers to meeting needs were frequently reported, even in the shorter term. Two key issues, namely safety and security concerns and socio-cultural barriers constituted the most significant barriers, together with lack of facilities and infrastructure, limited physical accessibility, and ethnic difference/tensions, particularly for displaced households. This has several implications that should be considered when designing response strategies to similar caseloads. Whilst an effective and adaptable modality, multi-purpose cash cannot address all needs, and should be utilized in tandem with in-kind and service-based assistance to address specific sectoral needs. Furthermore, socio-cultural barriers reported indicated strongly gendered access to services and therefore needs, emphasizing that interventions should be modulated to ensure the needs of all population groups are met.

Overall, from monitoring the needs over time of a select caseload of ERM MPCA beneficiary households, findings showed that one-time cash assistance, although impactful in the short-term, was not able to address all needs, and key humanitarian needs persisted in the longer-term. By the fifth round, the QLS-assessed households, whilst no longer immediately shock-affected, possibly qualify as vulnerable households either currently or potentially in need of humanitarian assistance, as identified in the Afghanistan 2020 Humanitarian Needs Overview (HNO).⁵

The implications of this are two-fold. Firstly, that whatever capacity these households have may be continually eroded over time, leading them into more severe need, or potentially even re-displacement. Secondly, that these households are unlikely to be able to withstand any additional shocks, such as conflict, natural disaster, or displacement as a consequence of either. Consequently, there is a need to follow up on the emergency assistance delivered to mitigate the initial shock in the short-term, and ensure durable and more sustainable solutions for affected population through an integrated humanitarian and development response.

Key Findings

MPCA beneficiary displacement profiles:

- › **All beneficiary households were displaced at the time of the first Humanitarian Emergency Assessment Tool (HEAT) assessment; 98% reported this to be due to conflict or armed groups.** Following the first round of data collection, almost two-thirds (64%) of households remained in displacement and almost all reported wanting to remain in their current location (82%).
- › By the fifth round, the **vast majority (86%) of households reported being in displacement**. This indicates that some of the households that reported having returned in the first round had since displaced again, and therefore that **any returns had been temporary**.
- › This is further evidenced by two findings:
 - › First, that **the proportion of the assessed households in displacement increased in the second round (from 64% to 86%)**, suggesting that a considerable proportion of those that had reported having already returned in the first round, had displaced again several months later.
 - › Secondly, during each round, households still in displacement were asked if they had returned to their area of origin (AoO) since the last interview. Between rounds two and four, at least **83% of**

⁵ United Nations Office for the Coordination of Humanitarian Assistance (UN-OCHA). [Afghanistan: Humanitarian Needs Overview 2020](#).

households reported to have returned and since displaced again, indicating that households had potentially made multiple, unsuccessful, attempts at returning. Reported push and pull factors for displacement consistently highlighted persistent conflict as the primary barrier to durable returns.

Beneficiary household socio-economic profile and use of MPCA:

- › Quantitative indicators on household income, as well as discussions from focus groups, indicated that even **where beneficiary households were earning income, it was insufficient to meet their needs**. In the first round, the average amount earned per month by adults was 3,200 AFN (40 USD) for the whole household, whilst average household reported expenditure was 18,700 AFN (245 USD).⁶ Average adult income increased slightly in later rounds, but still remained considerably lower than the average monthly household expenditure (taken from other REACH ERM 9 assessment),⁷ ranging from 4,800 AFN to 5,500 AFN per month (between 60 and 70 USD).⁸
- › The highest amount of ERM MPCA provided is 18,000 AFN, intended to be used over two months. However, expenditure and income findings indicate that:
 - › Firstly, **MPCA is unlikely to cover needs beyond the first month given standard measures of minimum monthly expenditure**.
 - › Secondly, that **the proportion of households in debt increased due to negative net-income ratio leading to continually accruing debt**. Indeed, the 81% of households that reported being in debt during the first round of data collection increased to 96% by the fifth round.
 - › Despite data concerning income and expenditures were collected in Afghani, for reporting purposes the results are here presented both in AFN and USD. Conversions were conducted in May, 2020.
- › Interestingly, the average amount of debt per household did reduce over time, even by the second round: from 66,000 AFN to 60,000 AFN, and down to 38,000 AFN by the fifth round (840 USD, 775 USD, and 490 USD respectively).⁹ This is likely due to the proportion of newly indebted households having lower overall amounts of debt, but still **highlights a heavy reliance on credit, that is at least seven times the average monthly household income**.
- › In terms of impact, the majority of households (80%) reported debt to affect their mental health through the psychological distress caused, and for a notable minority (14%), to lead to threats and harassment, **indicating severe protection needs as a consequence of debt and limited employment and income-generating opportunities**.
- › Whilst socio-economic challenges were reported by beneficiary households to be largely due to limited livelihoods opportunities, by the fifth round, 60% of households reported that their livelihoods situation had at least slightly improved. **That being said, livelihoods-based needs and socio-economic barriers faced by the assessed shock-affected households were found to remain consistently high**.
- › **This underscores a demand for livelihoods related interventions and programming to build resilience, and therefore a combined humanitarian and development focused response**. However, it is possible that over time, displaced communities become better integrated into their host communities and thus improve their economic opportunities. Consequently, **both livelihoods, community engagement and cohesion programming could be considered**.

Impact of MPCA on beneficiary household needs over nine months and change over time:

- › QLS-assessed households **consistently reported the same priority needs across all rounds**. This included food (99% to 100%), shelter (74% to 81%), NFIs (69% to 80%), healthcare (18% to 32%), and WASH (13% to 24%). This was in line with their reported areas of expenditure in the first round, where

⁶ XE currency converter, accessed [here](#). (May, 2020)

⁷ Reported total household expenditure from the Nationwide post-distribution monitoring (PDM) conducted in January 2020 was 13,000 AFN. See Factsheet [here](#).

⁸ XE currency converter, accessed [here](#). (May, 2020)

⁹ XE currency converter, accessed [here](#). (May, 2020)

households most frequently reported spending cash assistance on food (97%), followed by shelter (83%), healthcare (63%) and utilities and basic household NFIs (21%)¹⁰.

- › Whilst beneficiary households did report that assistance was able to support these priority household needs in the short term, **findings suggest that there were persistent sectoral needs across the full term of the assessment, with MPCA showing varying degrees of longer term impact.** For example:
 - › Although food was one of the primary expenditures for almost all assessed households, over half had poor food consumption scores (FCS)¹¹ (58%) in the first round. Over the rounds, the proportion of households with a poor FCS did reduce, but was still over a third of households (37%) by the fifth round. At the same time, the proportion of households with an acceptable FCS also reduced, from 25% in the first round to 9% in the fifth.¹² Overall, this **suggests that MPCA was able to support households in addressing severe food insecurity, but from approximately three to five months after receiving the assistance, at least half remained in a precarious situation of borderline food insecurity and potential humanitarian need.**
 - › **Findings indicate a similar trend regarding shelter needs.** Across the rounds, there was a clear conversion of households from transitional shelters (from 63% to 7%) to permanent shelters (from 17% to 90%). **Whilst this does indicate a positive development towards more durable shelter solutions, this creates an additional financial burden on households,** as by the fifth round, 74% of the assessed caseloads were paying rent at an average of 1,900 AFN per month (25 USD). Of those renting shelter from the first round, it was flagged in 26 out of 40 FGDs that payment of rent was a primary and ongoing concern.
 - › **Healthcare needs remained consistently high across all rounds,** in that between 74% and 85% of households reported having needed to access health services or treatment (including medicines) between interviews, but between 76% and 87% reporting that they did not have sufficient resources to pay for health services.
- › In the first round, beneficiary households also reported needs relating to education, WASH, and protection, but that the assistance they received was not enough to meet them. **Participants in FGDs frequently reported that by the time of the first round of QLS assessment, they had continuing needs, and in many cases, that their needs had returned to pre-assistance levels.**
- › Whilst many of these needs (food, shelter, and health) were found to have been addressed by cash to some extent during the first round, **the continued prioritization of these needs validated preliminary conclusions. Namely, that households have ongoing needs, sometimes worsening due to poor socio-economic circumstances, that require longer-term solutions to ensure households are able to self-sustain.** In addition, this reiterates the need of coupling in-kind or service-based assistance with MPCA in order to address both financial and non-financial challenges.

Remaining challenges to meeting household needs and change over time:

- › Whilst MPCA was found to support households in addressing financial barriers to meeting needs, FGD findings shed light on **multiple, and persistent, challenges and barriers to accessing services that could not necessarily be addressed through cash-based assistance.**
- › When asked about additional non-financial barriers to meet household needs, QLS-assessed beneficiary households frequently mentioned two key issues, namely safety and security concerns and socio-cultural barriers. Additional barriers, however, included a lack of facilities and infrastructure, limited physical accessibility, and ethnic difference/tensions, particularly for displaced households.
- › **Cultural barriers and societal constraints were reported to play a pivotal role when it came to accessing public facilities such as schools and healthcare, specifically for women.** FGD participants reported that

¹⁰ Multiple options could be selected and findings may therefore exceed 100%.

¹¹ The FCS is a composite score based on dietary diversity, food frequency, and relative nutritional importance of different food groups.

¹² It should be considered that reaching an “acceptable” score in FSC requires a significant diversity and variety in nutrients intake, which is difficult to achieve in Afghanistan. Consequently, it is expected that only a small proportion of the assessed population would be able to achieve this, and thus findings relating to change in the proportion of households with poor or borderline scores are of greater interest.

women or girls might be unable to leave the house without a male relative, or face discrimination if alone. Additionally, where MPCA was used to cover transportation costs, additional concerns should be raised regarding remote access to or distance from basic services, and availability of functioning ones.

- › This highlights a **need also for sector-specific and in-kind or service-centred interventions in order to ensure consistent access to basic services and resources for shock-affected populations.**

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List of Acronyms

ANSF	Afghan National Security Forces
AoO	Area of Origin
DG-ECHO	Directorate-General of the European Civil Protection and Humanitarian Aid Operations
ERM	Emergency Response Mechanism
ERW	Explosive Remnants of War
FCS	Food Consumption Score
FGD	Focus Group Discussion
HH	Household
HEAT	Humanitarian Emergency Assessment Tool
IDP	Internally Displaced Person
KII	Key Informant Interview
MPCA	Multi-Purpose Cash Assistance
NFI	Non-Food Item
ODK	Open Data Kit
PDM	Post Distribution Monitoring
QLS	Qualitative Longitudinal Study
rCSI	reduced Coping Strategies Index
WASH	Water, Sanitation, and Hygiene
WoAA	Whole of Afghanistan Assessment

Geographical Classifications

Province The highest formal geographic boundary in Afghanistan below the national level

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INTRODUCTION

In 2020, Afghanistan continues to face protracted conflict, alongside recurrent and severe natural disasters that have affected the population. As a result, the humanitarian needs of the population remain some of the most concerning and complex across the world, with regular and prevalent displacement of populations occurring across the country. Indeed, from 14 January to 6 November 2019 an estimated 363,414 individuals displaced from their homes.¹³

The Emergency Response Mechanism (ERM) is a rapid response facility funded by the Directorate-General of the European Civil Protection and Humanitarian Aid Operations (DG-ECHO) to provide immediate, life-saving assistance to shock-affected populations since 2011, where shocks can refer to either conflict or rapid onset natural disasters. In 2019, through a coordinated alliance of seven humanitarian organizations,¹⁴ the ERM continued to support newly shock-affected displaced or non-displaced populations (within 90 days of alert of shock) by delivering multi-purpose cash, protection, and water, sanitation and hygiene (WASH) assistance nationwide.

Whilst all implementing partners, and REACH Initiative (REACH) as a third party, have conducted post distribution monitoring (PDM) activities to assess the quality and short-term outcomes of multi-purpose cash assistance (MPCA), there is limited data on its longer term impacts on vulnerable shock-affected communities. In light of this gap, REACH, in coordination with ERM partners, launched a qualitative longitudinal study (QLS) to provide more in-depth, contextual understanding of the longer term outcomes of MPCA. The primary objective is to inform ERM strategy with regards to the suitability and sufficiency of the ERM response, and potential need for recalibration of programming or to advocate for follow-up assistance. This study tracked the basic needs, vulnerability, movement intentions, and protection risks of a sample of 266 MPCA beneficiary households over time.

In July 2019, 266 households were sampled for the QLS assessment. However, the number of households did decrease over the rounds (to 219 households in round five), mainly due to respondents availability and phone coverage when conducting remote data collection. The households were sampled from Ghor, Herat, Nangahar and Faryab, after all these four provinces had been affected by armed clashes, exposing population to considerable security risks and leading to the displacement of a high number of households seeking refuge in more secure areas. In July, Faryab province was also affected by heavy rainfalls and severe flooding destroying houses, livestock, and cultivated land, which led to further displacement.

This report presents the key findings from the five rounds of data collection, conducted between August 2019 and April 2020, starting up to three months following the MPCA distribution. The first section outlines the characteristics of the sampled household, then, the findings are broken down into the following sections:

- › Evaluation of household socio-economic profile and activity in relation to cash assistance, including livelihoods, income and debt.
- › Use of MPCA.
- › Overview of priority needs and observed changes over time.
- › Impact of MPCA on beneficiary household needs over nine months, and change over time.
- › Remaining challenges to meeting households needs and change over time.

¹³ OCHA, 2019. Humanitarian Snapshot. Available [here](#).

¹⁴ The ERM is currently being implemented across 33 of Afghanistan's 34 provinces by the following operational partners: ACTED, Danish Committee for Aid to Afghan Refugees (DACAAR), Danish Refugee Council (DRC), International Rescue committee (IRC), Première Urgence Internationale (PUI), Relief International (RI), and REACH initiative to support in the information management systems of the ERM.

METHODOLOGY

The QLS assessment used a mixed-methods approach to assess a purposively sampled group of ERM MPCA beneficiary households over time. The caseload originally selected for the study received their assistance in July and early August 2019. The selected households included beneficiaries in Ghor, Herat, Nangahar and Faryab. Between August 2019 and April 2020, a total of five rounds of data collection were conducted over a period of nine months after the selected beneficiaries received their assistance. The same households were interviewed during each round to gather longitudinal data on household needs and circumstances in the long-term.

Data collection activities for this assessment included:

- › A total of 266 household-level interviews (with a total population of 2,458 household members), conducted face-to-face, during the first round.
- › A total of 40 focus group discussions (FGDs) (10 FGDs within each province), during the first round, with representatives from all beneficiary households assessed.
- › After the first round of data collection, four additional rounds of household level interviews were conducted, remotely. However, not all sampled beneficiary households were reachable across the rounds (see table 1 for sample size per round).

Table 1: Number of households assessed in the QLS household survey, by round and month

	Round 1	Round 2	Round 3	Round 4	Round 5
Sample size	266	230	247	213	219
Start date of data collection	August 21 st 2019	December 3 rd 2019	February 4 th 2020	March 2 nd 2020	April 7 th 2020

Geographical Scope and Population of Interest

The QLS was designed to assess a sample of shock-affected (conflict or natural disaster), displaced and non-displaced beneficiary households of ERM MPCA. The population of interest included all beneficiary households of ERM MPCA from July in the provinces of Herat, Nangahar, and Faryab, and a sample of beneficiary households from August in Ghor.¹⁵

Sampling Strategy

For the household survey the samples from Herat, Ghor, and Nangahar included all beneficiary households of ERM MPCA in the month of July (26, 72, and 71 households respectively). The sample for Faryab included a purposively selected number of beneficiary households from August (97 households).

Given the sampling methods used, household-level findings should be considered representative of the specific population group assessed only i.e. per province and month of distribution, and not of the broader ERM MPCA beneficiary household population. For the FGDs, participants were self-appointed representatives of the purposively sampled beneficiary households; findings from FGDs are indicative only.

Secondary Data Sources

To receive MPCA, households are identified and pre-assessed by ERM partners using a household-level rapid needs assessment, the multi-sector Humanitarian Emergency Assessment Tool (HEAT). The HEAT tool serves to determine eligibility of households for assistance according to certain vulnerability criteria; eligible households then receive cash and/or in-kind assistance from the partner, depending on the type and level of need. Following receipt of assistance, partners select a random sample of beneficiaries for PDM assessments.¹⁶

¹⁵ These were the only distributions that occurred during these months, which was the determined recipient group based on the total project duration and the planned stages of the QLS.

¹⁶ In addition to the QLS, REACH provides information management to the ERM partners, including technical support in the design of these tools, as well as consolidation of data and monthly analysis of HEAT data. Factsheets presenting key findings of monthly HEAT data analysis are publicly available on the REACH Resource Centre [here](#).

In order to consider changes in household needs over time, the QLS analysis draws on the HEAT and PDM data collected by partners for ERM MPCA beneficiaries. These findings do not represent the specific population of the QLS sampled households but the wider population of shock-affected households that received assistance, and were later interviewed for monitoring and evaluation purposes. Where used, this was clearly identified.

Primary Data Collection

Household survey

The sample of households was interviewed a total of five times over a nine month period. In the first round, interviews were conducted in-person with the head of household or next available adult. Following the first round of the QLS, REACH amended the tool and conducted an additional four 'follow-up' rounds of household surveys to assess changes in the beneficiary households' needs and perceptions over time. Where possible, the same person was interviewed for each round. From round 2, interviews were conducted remotely through a call-centre, to ensure efficient use of resources and in anticipation of potential movements of the selected households from the original area of assessment.¹⁷

The data was collected using the KoBo platform. Before the beginning of each round, all enumerators were trained (or re-trained) to use KoBo for mobile data collection, as well as interviewing techniques within the context of asking sensitive protection-related questions to vulnerable populations. Forms were uploaded at the end of each day and, during primary data collection, the REACH assessment officer reviewed the data daily to ensure the designed sample size was met and to flag any outliers in the data for immediate follow-up.

Focus Group Discussions (FGDs)

During the first round of data collection, qualitative data was collected through FGDs. An additional and integral purpose of the FGDs was to engage communities in the process of the study and gain households' consent to continue assessing their needs over time. When conducting the FGDs, there were two enumerators: one to facilitate and one to take notes. All FGD enumerators then completed de-brief forms to gather more in-depth information on their general observations of the FGDs.

Data Analysis

For each round, data cleaning was conducted daily for any outliers and to check interview length (with all interviews under 30 minutes deleted), with more comprehensive cleaning conducted following the end of data collection with all changes logged. For the household-level survey, the clean data was analysed using R studio to produce descriptive statistics. All findings were aggregated to the level of the total sampled population to give an overview of initial key findings.

Challenges and Limitations

- › FGD participants and round 1 household survey respondents were not selected based on their sex. However, as they were selected to be representatives of households and due to cultural norms, all KIs selected were male, meaning there will likely be a gender bias in the reporting of household and community needs and an underrepresentation of female perspectives.
- › The FGDs were included in the research design to increase participant engagement and gain consent for continuous follow-up over five months. In order to achieve this, assessed households were also asked to share their contact information, including phone numbers for further interview.¹⁸
- › From the second round of data collection, household surveys were conducted remotely. Despite steps taken to engage participants in the whole QLS process, a number of households 'dropped out' during the rounds (known as 'attrition rate'). This was often due to poor phone connection, lack of time and attention paid, and/or external causes. Consequently, the sample size reduced over the rounds.

¹⁷ The study was designed to have five rounds of household surveys.

¹⁸ In line with REACH global data protection guidelines, steps have been taken to ensure that findings are anonymous and that any sensitive data, such as contact information, remains password protected with limited access rights. At the end of the assessment, all sensitive data will be removed.

FINDINGS

Demographics and Household Composition

During the first round of data collection, specifics about the household composition were included in the initial questionnaire to identify characteristics of the assessed population group. Initially, **almost all beneficiary households assessed in the QLS were male-headed (92%), with only 8% reported to be female-headed**. This percentage then increased gradually across the rounds, reaching 11% in round four, and then decreasing again to 9% in round five¹⁹. This corresponds to the national average of 8% of female-headed households found in the Whole of Afghanistan (WoA) assessment conducted by REACH from July to September 2019.²⁰ Overall, the average age of the head of household was 42 years old.

In terms of the marital status of the heads of household, during the first round of data collection, the majority were reportedly married (95%) with 3% widowed and 2% single. However, **female heads of household were more likely to be widowed (35%) or single (10%). Because of the context, and the cultural barriers further analysed in this report, such differences may highlight potentially greater levels of vulnerability for female headed households, both socio-economically and with regards to protection concerns**. The impact of MPCA on household needs over time may consequently have a gendered dimension, as women are more likely to face restrictions in accessing services, particularly education and healthcare, because of cultural and societal constraints.

Regarding household size, assessed beneficiary households across the four provinces had an average of nine members during the first round of data collection. However, over the rounds two and three, a significant proportion of the households (6% and 9% respectively) reported a change in household size, corresponding to an increase in number of reported children (male and female) below six years old. Nevertheless, in spite of the changes reported and the newborns, the average household size remained at 9. When disaggregating the data by head of household gender, however, the average household size was slightly higher for the male-headed households (10) compared to the female-headed households (7).²¹

Displacement and Movement Intentions

During the HEAT assessment phase of the intervention, **all households assessed were reported as displaced when they received assistance in July and August 2019. The majority of displaced households reported that their main reason for displacement was due to conflict (82%), followed by forced displacement by armed groups (16%). Less than 3% of households reported displacement due to natural disasters (drought or flood), out of which, the majority were based in Faryab. Consequently, findings from the QLS assessment refer primarily to the experience of households displaced as a result of conflict and not natural disasters**.²²

While REACH nationwide PDM findings found that 90% or more of ERM MPCA beneficiary households were still reported to be in displacement when interviewed 30 days after receiving assistance, the QLS findings from the first round were quite different.²³ Indeed, **QLS findings showed displacement status to change over time for the assessed households**. Following the first round of data collection in August, almost two-thirds (64%) of households remained in displacement and the remaining 36% of beneficiary households sampled reported living in their area of origin (AoO) at the time of interview. By the second round in December, the proportion of households in displacement rose from 64% to 86%, which then remained consistent through to the fifth round. This suggests that **a considerable proportion of those that had reported having already returned in the first round, had displaced again two months later. Consequently, we can consider the returns registered in the first round**

¹⁹ Yet, it is unclear whether there was a shift in households' heads, or if, because of the reduced number of respondents in the round four and five, the percentage might have been slightly altered.

²⁰ REACH, 2019 Whole of Afghanistan Assessment (WoAA), [Province Level Factsheet Booklet](#).

²¹ For more information on household composition and demographics of the assessed households, such as age and gender breakdown of the household, see the [REACH QLS Preliminary Report, September 2019](#).

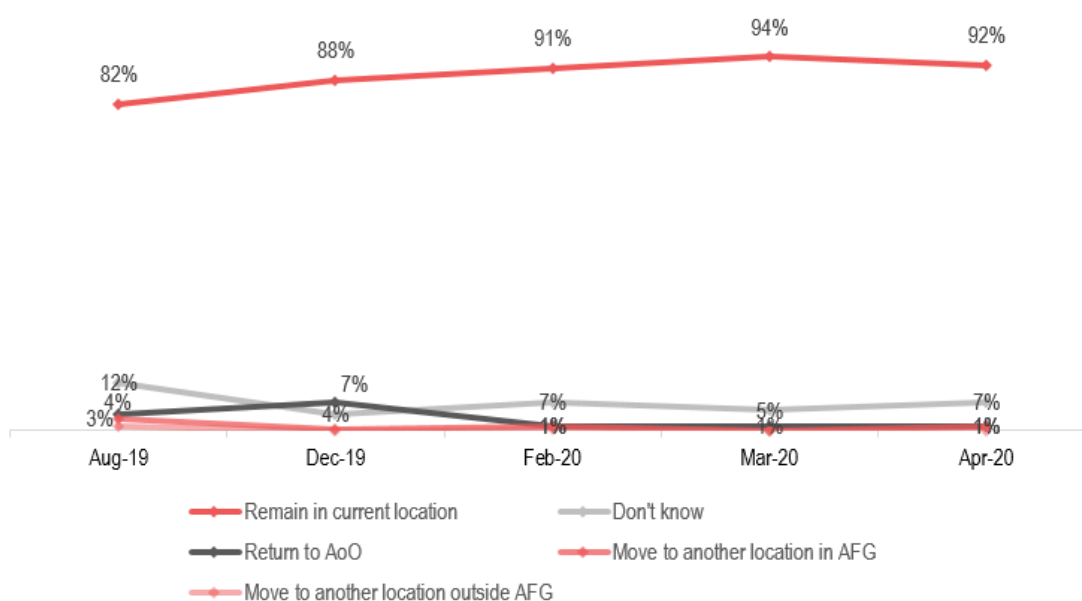
²² For more details on the drivers of displacement for the assessed households, see the [REACH QLS Preliminary Report, September 2019](#).

²³ REACH, ERM 9 Nationwide Post-Distribution Monitoring Factsheet, [Round 2](#) and [Round 3](#).

as either temporary or irregular (i.e. commuting during the daytime, or to collect belongings), and as such it was not indicative of stable or durable return.²⁴

Interestingly, during the first round, 82% of households reported wanting to remain in their current location. These findings were then reinforced during the FGDs, where a number of participants reported the intention to remain in their current area of displacement indefinitely, in 21 out of 40 FGDs. Furthermore, during the FGDs phase, participants highlighted additional reasons for not intending to return, including limited access to basic services (highlighted in 4 out of 40 FGDs), as well as damage to their housing in their AoO and lack of financial means to make restorations (highlighted in 17 FGDs out of 40).

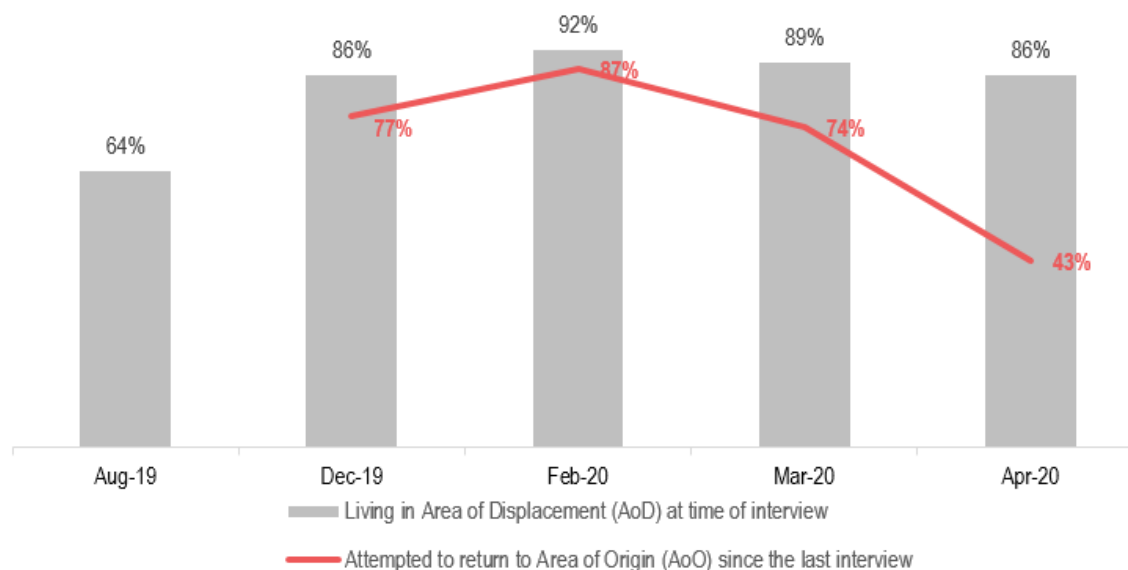
Figure 1: Proportion of QLS-assessed beneficiary households by reported movement intentions for the three months following data collection, for rounds 1 to 5 (August 2019 to April 2020)



In addition to asking about movement intentions, during each round of assessment, households still in displacement were asked if they had returned to their area of origin (AoO) since the last interview. For each of the four rounds between December and March, at least 83% of households reported to have returned and since displaced again, **indicating that households had potentially made multiple, unsuccessful, attempts at returning**, which may have affected their reported movement intentions. Reported push and pull factors for displacement consistently highlighted persistent **conflict as the primary barrier to durable returns**.

²⁴ It should be considered that during the first round, the 36% reporting to have returned to their AoO were primarily beneficiary households from Faryab, who had been originally displaced for the flash floods. It indicates that this particular caseload had returned, but that likely was again further displaced for either conflict, insecurity, or additional natural hazards.

Figure 2: Proportion of QLS-assessed beneficiary households that remained in displacement and had attempted to return to their AoO since the last interview, for rounds 1 to 5 (August 2019 to April 2020)



Amongst the 14% of households who had returned by the fifth round, 89% reported doing so because the security situation improved, 7% for livelihood opportunities they left behind at time of displacement, and 4% for family and friends. **Ongoing conflict is therefore a major driver of displacement, and security and stability is a key determinant of durable and lasting returns. Furthermore, amongst those who did not return, the vast majority (86%) reported that they would base their decision on information regarding the security situation, followed by a third (32%) interested in knowing the condition of their houses, and a small proportion (7%) interested in knowing about food security in the area, and livelihood opportunities available.**

Overall, findings from the QLS-assessed beneficiary households indicate that **households displaced by conflict are likely to remain so as long as conflict in their AoO persists**. Whilst the majority reported an intention to remain in their current location at the time of interview, this may be strongly influenced by the security situation in their AoO, often informed by in-person visits and attempted returns. Consequently, **responses to displacement need to consider both meeting immediate and emergency needs, as ERM programming does, as well as longer term interventions and resilience building, considering that the newly displaced populations, as well as those already displaced, could be exposed to potentially protracted-displacement, which often leads to the establishment of informal settlements, and to further vulnerability.**

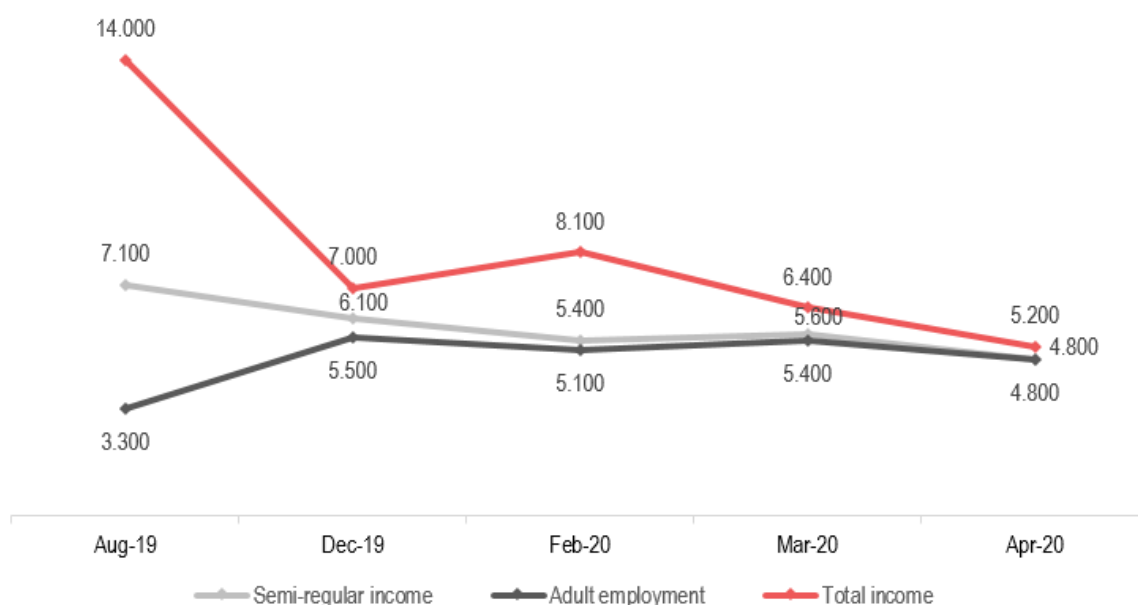
Household Socio-Economic Profile

In order to understand more comprehensively how MPCA did support vulnerable shock-affected households, the **QLS assessment explored basic key indicators concerning the household socio-economic profile (such as livelihood, income, debt, savings, and coping strategies)**, to gain a fuller pictures of beneficiary households' conditions after the shock, and over time after being provided with the cash assistance. This is especially useful to understand the resilience capacity of beneficiary households, their ability to support their primary needs in the longer term, and consequently the level and type of needs for further intervention.

Livelihoods and income

For each round, households were asked about their income in the 30 days prior to data collection from multiple sources. During the first round, the reported average income from semi-regular sources was 7,100 AFN (90 USD).²⁵ This was primarily made up of adult employment (average 3,300 AFN or 40 USD) and selling goods made for sale (average 3,800 AFN or 50 USD).²⁶

Figure 3: Average income of QLS-assessed beneficiary households in the 30 days prior to interview [AFN] from adult employment, semi-regular income (including adult employment) and overall, for rounds 1 to 5 (August 2019 to April 2020)²⁷



Across the rounds of data collection, amongst those who reported being employed, or having a source of income, the majority reported working in either construction, agriculture (including livestock and farming), service industry, or home-based jobs. During FGDs conducted in Ghor and Nangahar, some participants reported investing their MPCA in new employment opportunities, including starting small businesses (e.g. small shops, fruit stall, purchasing materials, etc.). Thus, from round 2, 2% of the QLS-assessed households reported owning and earning income from a small business.

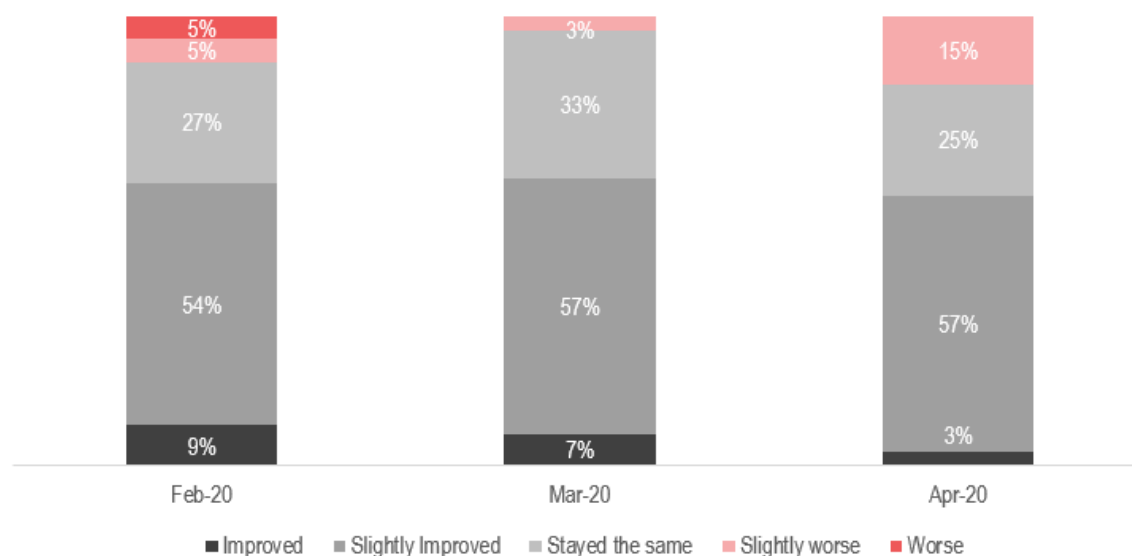
In general, the proportion of households reporting employment in each of these different sectors changed over time, likely due to the seasonality of the labour market in Afghanistan. As shown in figure 3, however, across the rounds, there was an increase in average income earned through adult employment in the 30 days prior to interview, particularly when considering August 2019 and April 2020 reported information. This was reflected in more than half of the assessed households reporting at least a slight improvement when comparing their livelihoods status at the time of interview to prior to receiving assistance, from rounds three to five.

²⁵ Semi-regular income refers to the following: adult employment, pension, selling goods (made for sale), and small business. XE currency converter, accessed [here](#).

²⁶ XE currency converter, accessed [here](#), (May, 2020)

²⁷ Overall includes the following: adult employment, child employment, government cash assistance, humanitarian cash assistance, pension selling goods (made for sale), selling assets, and small business.

Figure 4: Proportion of QLS-assessed beneficiary households comparing their livelihoods status at the time of interview to prior to receiving ERM MPCA, for rounds 3 to 5 (February 2020 to April 2020)



During the first round, participants in 22 out of 40 FGDs reported that barriers to employment were mainly due to displaced households living in new communities and employers lacking trust and preferring to give jobs to host community members. However, participants also highlighted that employment opportunities were limited anyway. Particularly affected were the displaced households coming from rural areas, whose previous experience was mainly in farming, and who also reportedly had limited education or necessary skills for employment in urban contexts. However, that approximately 60% of households reported at least a slight improvement in their livelihoods status compared to prior to receiving assistance, may suggest that over time displaced communities become better integrated into their host communities and thus improve their access to economic opportunities.

However, whilst in later rounds the average income earned through adult employment increased, the total for semi-regular income actually decreased. This was primarily due to a considerable drop in income reported from selling goods, from 3,800 AFN (49 USD) in August, to between 50 AFN and 900 AFN (1 USD and 12 USD) from rounds two to five, across December and April. This trend suggests that selling goods may have been either seasonal income from small scale agricultural activity, or earned through home-based production through land or assets in their area of origin that was no longer available in the area of displacement.

In addition, the total reported income in the first round was considerably higher than in later rounds, approximately 14,000 AFN (180 USD) compared to between 5,200 AFN and 8,100 AFN (67 USD and 108 USD) from rounds two to five. This was primarily due to the reported cash-based humanitarian assistance received in the 30 days prior to the first round of assessment; an average 6,900 AFN (89 USD).²⁸

Overall, even in the rounds where total income from both semi-regular and non-sustainable sources was highest, it was insufficient to cover household needs on a monthly basis.²⁹ According to the REACH Nationwide PDMs, average household monthly expenditure was 13,000 AFN or more (167 USD).³⁰ Furthermore, the Minimum Expenditure Basket (MEB) established by the Cash and Voucher Working Group (CVWG) calculates

²⁸ It is important to note that whilst this likely includes ERM MPCA, the cash-assistance received from the ERM response may not have been captured for all households if they received it more than 30 days prior.

²⁹ Non-sustainable refers to income sources that can be considered as negative coping strategies and therefore a depletion of household resources. This includes: child employment and selling assets, as well as reliance on assistance (government cash assistance and/or humanitarian cash assistance).

³⁰ REACH, ERM 9 Nationwide Post-Distribution Monitoring Factsheet, [Round 2](#) and [Round 3](#). XE currency converter, accessed [here](#).

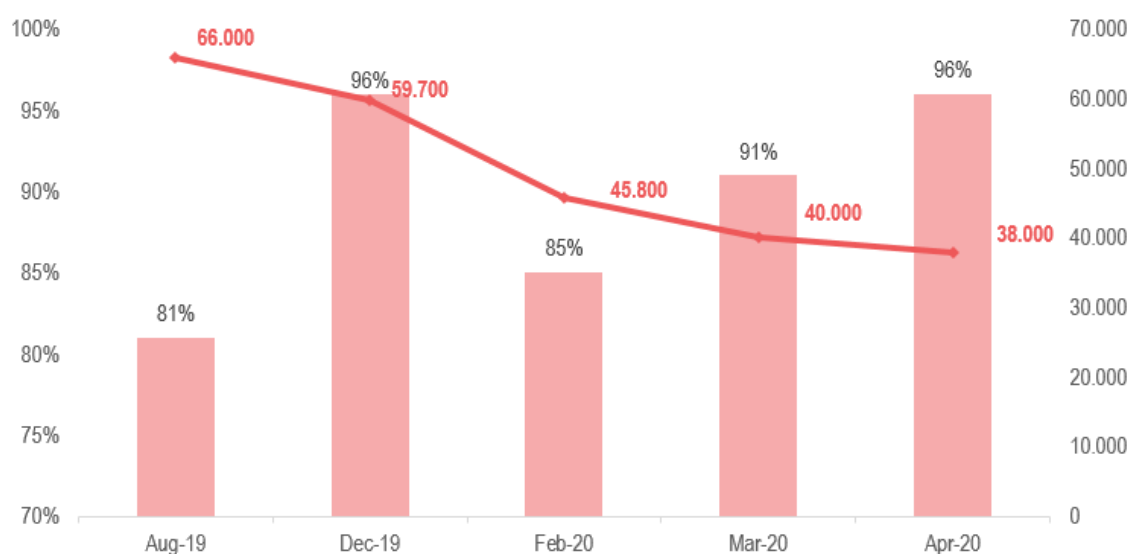
the minimum amount to meet household needs as 15,000 AFN (193 USD) per month.³¹ **Accounting for semi-regular income only, and assuming average monthly expenditure of 15,000 AFN, the average net income of households across the rounds ranged from -7,900 AFN to -10,200 AFN (-102 USD to -131 USD).**

Even when using total income, including non-sustainable sources such as child labour, the average net income was negative across all rounds (ranging from -1,000 AFN to -9,800 AFN, or 13 USD to 126 USD). These results were further supported through the FGDs conducted during the first round in August, with participants from 35 out of 40 FGDs reporting that their own sources of income were insufficient to meet their household's needs. **The likely consequence of this discrepancy is both an increase in the proportion of households in debt, and increase in amounts of debt overall.**

Debt

In exploring the socio-economic profiles of QLS-assessed beneficiary households, **debt emerged as a prevalent coping strategy to meet household needs, indicating a further depletion of capacity to recover from shocks.** In the first round, 81% of assessed households reported being in debt, with the average amount reported to be 66,000 AFN (840 USD); this was over 20 times the average monthly income from adult labour in the first round (3,300 AFN or 40 USD).³² Whilst this did fluctuate across the rounds, by the fifth round in April 2020, the proportion of households in debt further increased to 96%.

Figure 5: Proportion of QLS-assessed beneficiary households reporting to be in debt and average amount of debt [AFN], for rounds 1 to 5 (August 2019 to April 2020)



In almost all FGDs (36 out of 40), participants reported that borrowing money or taking loans from relatives, family members, neighbours or shopkeepers were the main coping strategies employed to address the lack of livelihoods opportunities and regular income. It follows that the use of MPCA to reduce debt further hinders the capacity of shock-affected households to meet priority needs, and in turn increases reliance on assistance or negative coping strategies. The impact of shock and circumstances of consequent displacement likely exacerbate this, and indeed, during 10 out of 40 FGDs, participants reported that displaced households often remained in debt for extended periods of time and faced difficulties in re-paying loans. Concurrently, 97% of assessed households reported having no savings to rely on, even by the first round, and by the second round of assessment in December 2019, up to five months after distribution, 70% of households reported that they had acquired new debt since receiving their cash assistance.

³¹ For information on current market monitoring and MEB calculations, see the CVWG and REACH co-led Joint Market Monitoring Initiative (JMIMI) Situation Overview [here](#).

³² XE currency converter, accessed [here](#). (May, 2020)

Interestingly, however, the average amount of debt per household did reduce over time, even by the second round: from 66,000 AFN to almost 60,000 AFN, and down to 38,000 AFN by the fifth round (840 USD, 775 USD, and 490 USD respectively).³³ This is likely due to the proportion of newly indebted households having lower overall amounts of debt, but still **highlights a heavy reliance on credit, that is at least seven times the average monthly household income in round five**. The most frequently reported reasons for acquiring debt reported by QLS-assessed households reflected reported priority household needs, including buying food (95%) and paying for sudden medical expenses (65%), followed by buying basic household items after displacement (64%), to pay rent (46%), as well as paying off previous debt (20%).³⁴

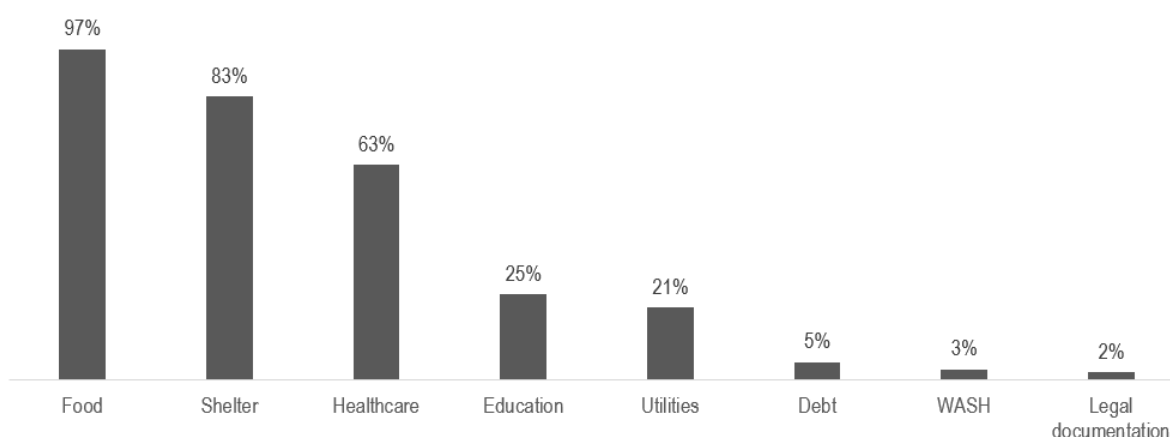
Whilst ERM MPCA is not designed to address longer-term chronic household socio-economic challenges such as debt reliance, the prevalence and extent of the use of debt as a coping mechanism has implications for humanitarian needs both in the short-term, and over time. For example, the majority households (80%) reported debt to affect their mental health through the psychological distress caused, and for a notable minority (14%), to lead to threats and harassment, indicating severe protection needs as a consequence of debt and limited employment and income-generating opportunities. These findings **highlight the interrelation between such chronic social protection issues and more immediate humanitarian needs, and a consequent need for a combined development and emergency response to shock-affected populations.**

Use of Multi-Purpose Cash Assistance (MPCA)

Understanding assessed beneficiary households' main areas of expenditure of the cash assistance provides an indication of beneficiary households' immediate and priority needs. Before exploring the type of expenditures reported, it is important to note that **the vast majority of beneficiary households (97%) reported spending all the assistance within the first 30 days after receiving it.**

During the first round of assessment in August, participating households were asked to report the three main items and/or needs that they spent their assistance on, to understand how beneficiary households used their assistance, and then monitor impact on overall need. **QLS-assessed households most frequently reported spending cash assistance on food (97%), followed by shelter (83%) and healthcare (63%).**³⁵

Figure 6: Proportion of QLS-assessed beneficiary households reporting the three main needs that they spent their cash assistance on, for round 1 (August 2019)³⁶



³³ XE currency converter, accessed [here](#).

³⁴ Multiple options could be selected and findings may therefore exceed 100%.

³⁵ Multiple options could be selected and findings may therefore exceed 100%.

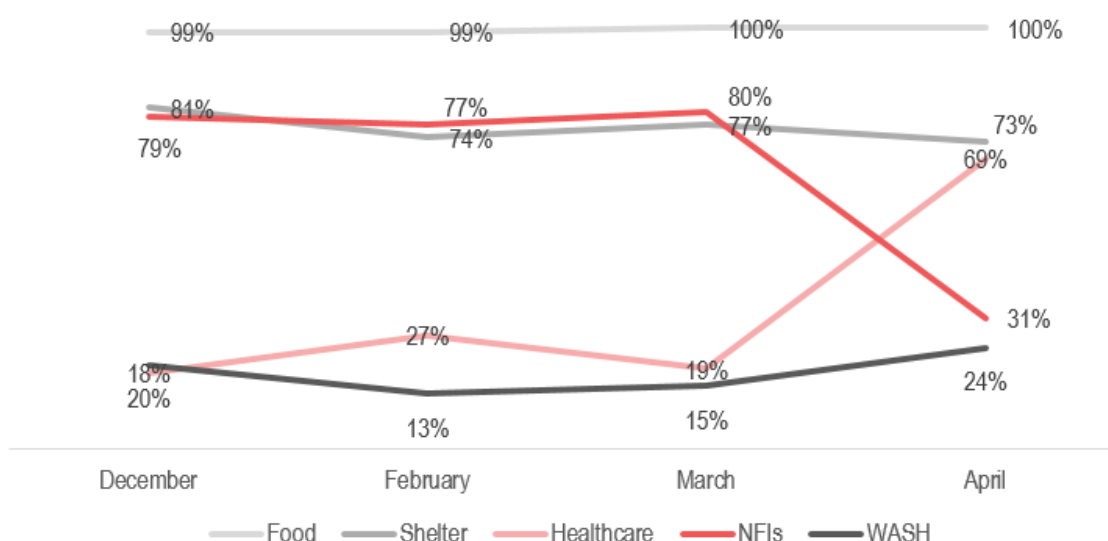
³⁶ Ibid. Multiple options could be selected and findings may therefore exceed 100%.

That food, shelter, and healthcare were the most frequently reported expenditures is also reflected in needs assessed in HEAT assessments, and expenditures reported in nationwide PDM and WoA assessment findings. These findings were also confirmed in 36 out of 40 FGDs, in which almost all participants reported that spending assistance on food, shelter, and health was a priority. **That many of the costs prioritised are recurring expenditures, indicates that MPCA fills gaps in immediate needs, but does not necessarily ensure that shock-affected households do not return to their pre-assistance level of need.**

Priority needs and change over time

As well as asking about the main three areas of expenditure of MPCA in the first round in August 2019, QLS-assessed beneficiary households were asked to report their three primary needs in each of the following rounds. **Reflecting the most frequently reported areas of expenditure, the most commonly reported priority needs were food, shelter, non-food items (NFIs), and healthcare.**

Figure 7: Proportion of QLS-assessed beneficiary households by top five most frequently reported primary household needs at the time of interview, for rounds 2 to 5 (December 2019 to April 2020)³⁷



Whilst food and shelter were consistently found to be the first and second most frequently cited priority needs, across rounds two to five, there were some interesting changes over time with regards to other types of priority needs. Through rounds two to four, NFIs were reported as priority needs with the same frequency as shelter. Yet, in the fifth round, the proportion of households reporting NFIs as one of their three priority needs dropped from 77% to 31%. There could be multiple reasons for this, including a reduced need following the winterization period, increased availability of NFIs, or increased need in other sectors being prioritized.

On this latter point, **the proportion of households reporting healthcare to be a top three priority need increased considerably between the fourth and fifth rounds, from 19% in March to 69% in April. Given the time frame for this shift in prioritization, it was likely driven by the rapid spread of the COVID-19 pandemic across Afghanistan during this time.**³⁸

³⁷ Multiple options could be selected and findings per round may therefore exceed 100%. Other needs reported, and not captured in the graph, included civil documentation and education, accounting for just 1% in the final round of data collection.

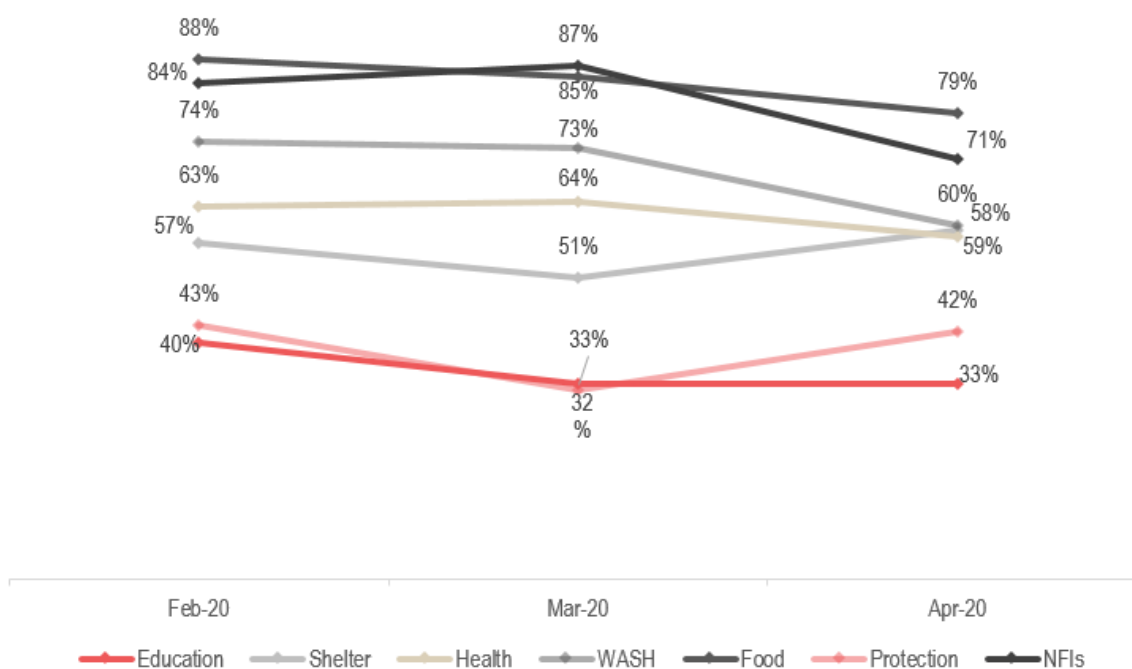
³⁸ OCHA [Afghanistan: COVID-19 Multi-Sectoral Response Operational Situation Report \(13 May\)](#).

WASH needs ranged consistently between 13% and 20% up until the fourth round of data collection. It then increased in April to 24%, which may again be explained by changing needs in response to the spread of COVID-19. It is important to note, however, that the prioritisation on WASH as a primary need in earlier rounds may also have been lower as the majority of beneficiaries of ERM MPCA assistance also receive in-kind WASH assistance at the same time.

Impact of MPCA on beneficiary household needs over nine months, and change over time

Whilst households did report that assistance was able to support these priority household needs in the short term, findings suggest that there were persistent sectoral needs across the full term of the assessment, with MPCA showing varying degrees of longer term impact. In the third through the fifth rounds, QLS-assessed beneficiary households were asked how their needs in key sectors compared to their needs prior to receiving assistance changed. There were varied responses on the extent to which needs had improved and how these changed over time, but overall, perception of needs having improved tended to correlate to higher expenditures.

Figure 8: Proportion of QLS-assessed households reporting improvement in needs at the time of interview compared to prior to receiving assistance, by type of need, for rounds 3 to 5 (February 2020 to April 2020)^{39 40}



³⁹ This includes the proportion of households reporting their needs to have improved or slightly improved compared to prior to receiving assistance.

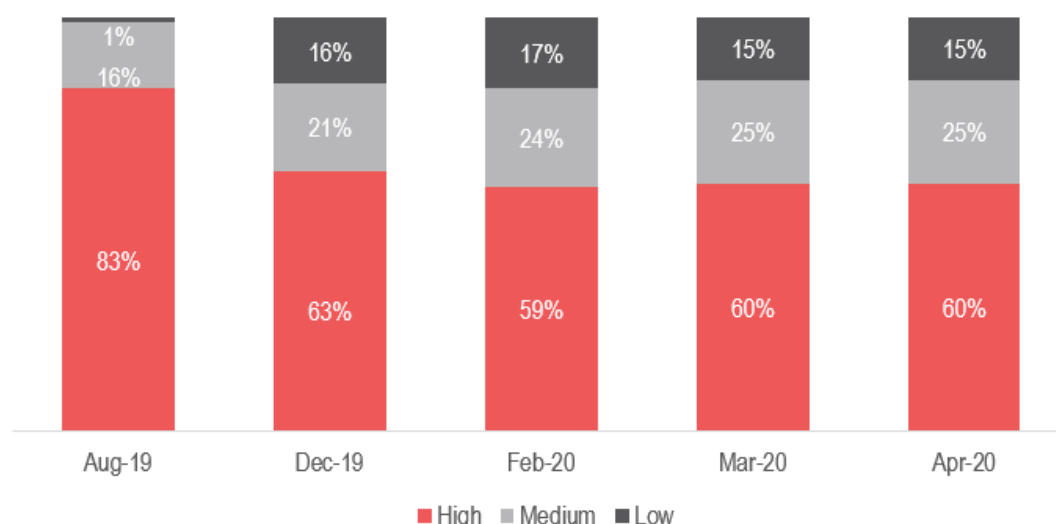
⁴⁰ Multiple options could be selected and findings per round may therefore exceed 100%.

As shown in figure 8, the highest reported improvement was for food needs, ranging from 88% to 79% across the final three rounds. However, this did gradually decrease between February and April 2020, suggesting that food security, whilst better than before receiving assistance, was in decline. A similar gradual decline was found for NFI, WASH, health, and education needs.

To understand change in needs from a more intersectoral perspective, the reduced coping strategy index (rCSI) was measured during each round to understand how and to what extent households were reliant upon negative coping mechanisms when there was not enough food or money to buy food, and consequently flag the need for cross-sectoral and protection-related interventions.

In the first round of assessment in August 2019, household representatives in FGDs discussed resorting to behaviours including: engaging children and youth in working or begging, also causing them to not be able to attend school, marriage of young (or underage) girls, young males joining Afghan security forces or armed groups, further displacement, and/or selling properties and lands. Already **highlighting the need to couple MPCA with sector-specific and in-kind interventions in the short term, as well as livelihoods-focused interventions to address the root socio-economic causes of humanitarian needs.**

Figure 9: Proportion of QLS-assessed beneficiary households by calculated rCSI score⁴¹ at the time of interview, for rounds 1 to 5 (August 2019 to April 2020)



As outlined in figure 9, **there was a notable drop in household found to be using severe negative coping strategies ('high rCSI') between the first round of assessment in August 2019, shortly after receipt of assistance, and December 2019, from 83% to 63%. Conversely, the proportion with low scores increased from 1% to 16% in the same time frame. This trend suggests that MPCA may have had a positive impact in the initial months to mitigate high levels of food insecurity leading to extreme coping mechanisms. Furthermore, findings indicate that this impact was lasting, as the proportion of households with a high rCSI score remained fairly consistent between December 2019 and April 2020, suggesting that the proportion of households using severe negative coping capacities did not further increase over time, but did not improve either.**

Whilst this is positive, there were still a considerable proportion of households, almost two thirds (60%) found to be using severe negative coping strategies by the fifth round in April 2020. **That there is no further decline in use of such mechanisms does not negate that a considerable proportion of beneficiary households are likely**

⁴¹ The **reduced Coping Strategy Index (rCSI)** is a composite indicator assessing the use of food consumption-based **coping strategies** during the seven days preceding the assessment. The calculated score corresponds to the frequency of and number of negative coping strategies used in the seven days prior to the assessment. Scoring "high" highlights a frequent use of one or more negative coping mechanisms.

still in humanitarian need, and where they may not show signs of severe humanitarian need following receipt of MPCA, they show a reduced capacity to cope with their immediate situation both after shock and in the longer-term.

These results show that vulnerable shock-affected households require support both in terms of immediate protection needs, as well as longer-term resilience and livelihoods development interventions. **Assistance aimed to promote longer-term results, resilience, and access to livelihood opportunities, together with MPCA, might not just reduce the need to rely on cash and goods distributions but also increase households' capacity to self-sustain and cope with the shock and the consequent displacement over time.** However, in order to explore the potential impact of assistance on specific sectoral needs, a number of indicators were included to measure need in more objective terms, and over time, which will be outlined below, by sector.

Food Security Needs

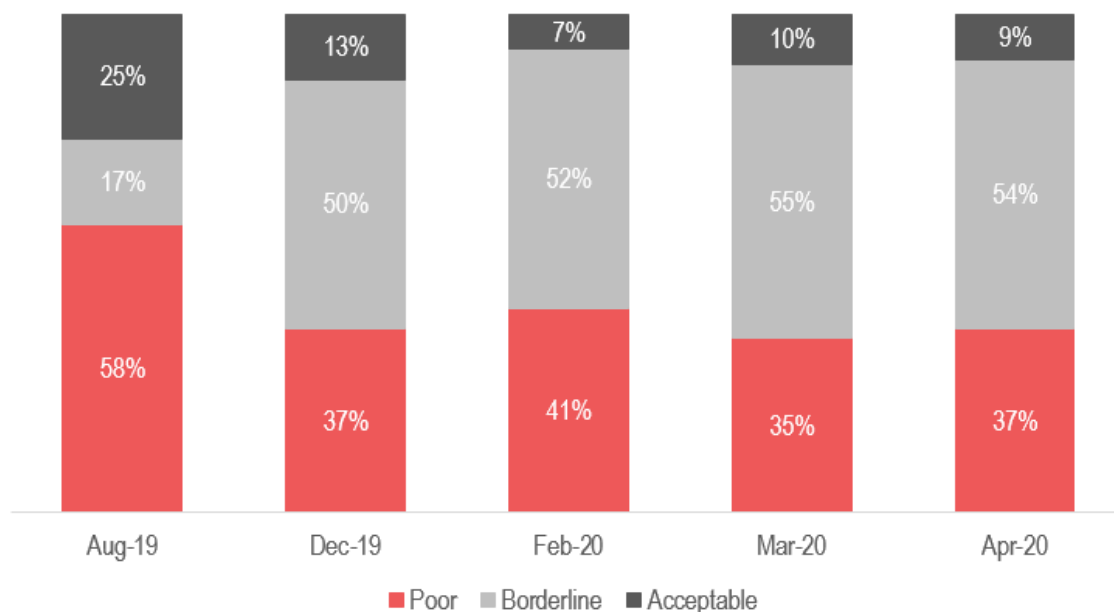
Food was the most frequently reported need and expenditure by assessed households in the QLS. Considering that the majority of households reported having spent their assistance by the time of the first round of data collection, it is interesting to highlight that, during this round, already half reported that their access to food had not improved (51%). Even where households reported access to have improved, this was only moderately (54%) or barely (45%); only 2% reported that access had improved a lot.

Of the 51% that from the first round reported no impact at all of MPCA on food access and consumption, the main reported reason behind it was the cash not being enough to cover the expenses needed (48%), followed by: the shock/conflict had gotten worse (23%), that households were in need of other types of assistance (cash was not appropriate) (20%), and finally, that the cash did not last long enough to make lasting changes (14%). These findings suggest that where access to food had increased, this was only in the short term and that, despite half of households self-reporting that MPCA had a positive impact on food security in the short term, **either the cash provided was not sufficient to meet all the households' basic needs, or that it should be coupled with more lasting solutions to maintain food security over time.**

When measuring one aspect of food insecurity of households over time through the food consumption score (FCS) composite indicator, findings showed a similar trend to those for rCSI.⁴² Namely, there was a notable improvement at the bottom end of the spectrum, with the proportion of households with a 'poor' score dropping from 58% to 37% between the August 2019, shortly after receipt of assistance, and the second round of assessment three months later in December. However, there was also a decrease in the proportion of households with an 'acceptable' score, suggesting that assistance may have helped to move people out of more extreme food insecurity, but was not sufficient to move them into or maintain acceptable levels. Indeed, roughly half of the assessed beneficiary households scored borderline, which highlights that they have a poor but still sufficient daily nutrient intake and moved out of extreme food insecurity, still not reaching a full and sustainable food security. It should be noted, however, that reaching an "acceptable" score in FSC requires a significant diversity and variety in nutrients intake, which is difficult to achieve in Afghanistan, eventually because of the incidence of droughts and flash floods on crops, the overall volatility of the context, as well as because of the reported lack of income sources and the consequent financial barriers to access food. Consequently, it is expected that only a small proportion of the assessed population would be able to achieve this, and thus findings relating to change in the proportion of households with poor or borderline scores are of greater interest.

⁴² The FCS is a World Food Programme (WFP) established proxy indicator for food security, measuring dietary diversity through calculation of frequency of consumption of different food groups by the household in the seven days prior to interview. More information on this measure can be found [here](#).

Figure 10: Proportion of QLS-assessed beneficiary households by calculated FCS at the time of interview, for rounds 1 to 5 (August 2019 to April 2020)



However, **that just over a third of households had a poor FCS throughout the subsequent rounds, and the majority maintained either poor or borderline scores, indicates persistent levels of food insecurity.** Overall, this suggests that MPCA was able to support some beneficiary households in addressing severe food insecurity, but **from approximately three to five months after receiving the assistance, at least half remained in a precarious situation of borderline food insecurity and potential ongoing humanitarian need.** Findings from 31 out of 40 FGDs during the first round of data collection supported this, as almost all participants highlighted that households perceived the cash assistance to be helpful for a short period of time to provide the households with food supplies temporarily, but that it did not meet needs or improve household nutrition in the longer term.

Shelter Needs

Trends relating to shelter needs over time were similar to food security findings. **Beneficiary households reported persistent concerns relating to shelter over time, but findings suggest an overall improvement in the proportion of households residing in permanent shelter.** Furthermore, households reported the greatest overall improvement in their situation as a result of cash assistance for shelter, compared to other needs (95%). In August, amongst the households reporting that cash had improved their shelter situation, 66% reported that the cash assistance had helped them to move to a new shelter; a further 28% reported that it helped to pay rent, and 15% reported that it had helped to make repairs to their shelter⁴³.

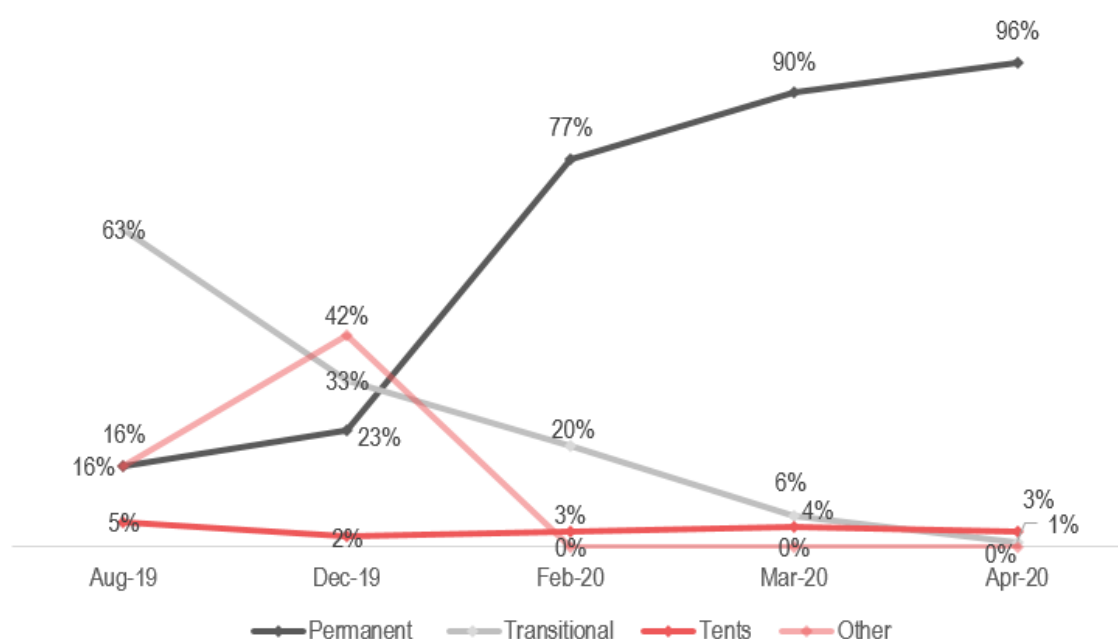
The findings from the first round of data collection and with the FGDs highlight that the households who spent cash on shelter used it mainly for transitional shelter, or to help pay for rent. This indicated shelter to be an acute humanitarian need in the months following a shock or displacement. Yet until December, two in three households reported living in transitional or makeshift shelters, or tents, at the time of interview (68%).⁴⁴ These findings were reiterated in 34 out of 40 FGDs, when many participants indicated that displaced households were most likely to live in tents, transitional shelters and often rented damaged mud housing in poor living conditions with limited access to electricity and water and sanitation facilities.

⁴³ Multiple options could be selected and findings per round may therefore exceed 100%.

⁴⁴ QLS-assessed beneficiary households reported living in the following types of shelter at the time of interview: transitional (62%), permanent (17%), tents (5%), open space (4%), makeshift shelters (1%), and 'other' (14%); "Other" represents households reporting rental housing and housing made of mud.

However, the situation improved considerably from the third round, in February 2020, with the proportion of households living in permanent shelters increasing from 23% in the previous round to 77%; by the fifth round in April 2020, this had increased to 96%. Conversely, the proportion of households reporting living in transitional shelter, tents or other types of shelter (including makeshift shelters and open space) decreased.

Figure 11: Proportion of QLS-assessed beneficiary households by type of shelter at the time of interview, for rounds 1 to 5 (August 2019 to April 2020)

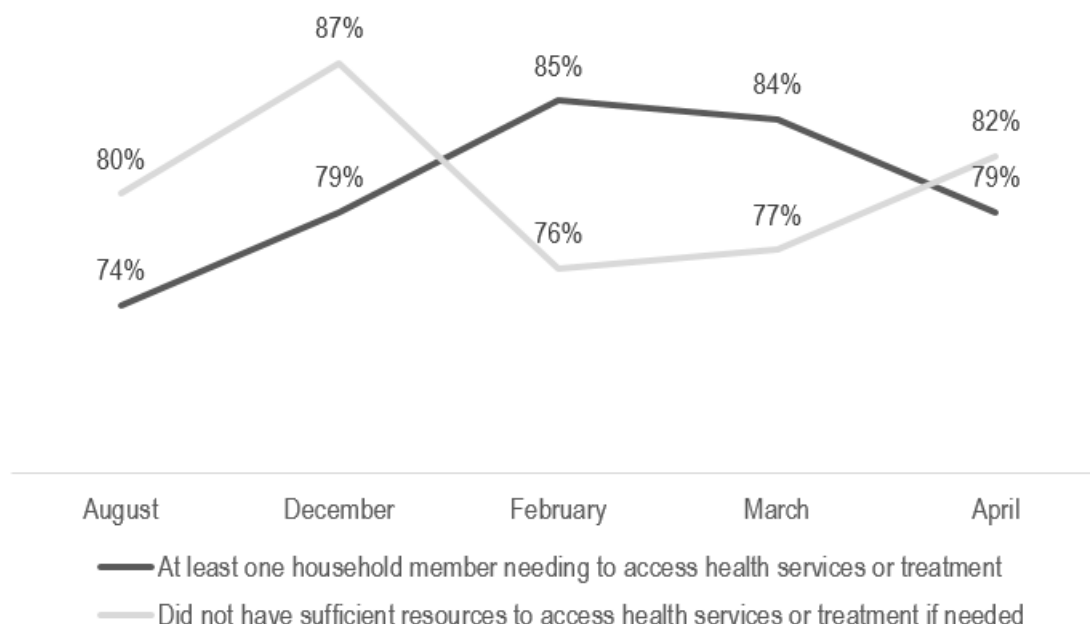


Yet, participants also highlighted that, in the first months after moving into a rented house, households often faced challenges paying rent and utilities, resulting in tensions with home owners and in potential social cohesion issues between IDPs and/or returnees and their surrounding communities. Indeed, shelter remained a priority need across rounds. From round two, roughly half of the QLS-assessed households reported that the rent they were paying or asked to pay when looking for housing was too high, or that the house they could afford was not big enough to host the entire family. Reportedly, 74% of the assessed caseload were paying rent at an average of 1,900 AFN per month (25 USD). Furthermore, between December and April, the proportion of households reporting to live in damaged shelters increased from 28% to 44%, flagging potential housing, land, and property (HLP) needs also. Additional concerns reported were related to the winterization and seasonality, peaking at 58% of households reporting it as a concern in December.

Healthcare Needs

Despite primary healthcare being free in Afghanistan, healthcare remained one of the main priority areas of need and expenditure across the rounds. In the first round of assessment, 74% of the QLS-assessed beneficiary households reported that at least one family member needed healthcare assistance. By the fifth and final round in April 2020, 84% of households reported that a member of the household had needed to access health services or treatment since the last interview. Furthermore, across the rounds, between 76% and 87% of households reported that they did not have sufficient resources to pay for health services in case any member of the family needs to seek health care.

Figure 12: Proportion of QLS-assessed beneficiary households reporting a household member needing to access healthcare services or treatment, and having insufficient resources to pay for health services at the time of interview, for rounds 1 to 5 (August 2019 to April 2020)



In terms of access to healthcare, both financial and non-financial barriers were reported. Across rounds two and five, a number of barriers were consistently reported. The five most frequently reported barriers were: the costs of treatments (93% to 99%), inability to reach or access services due to lack of transport (66% to 77%), being refused treatment without explanation (31% to 47%), feeling unsafe to travel to or be at health services (28% to 56%), and the insufficient number of female staff for women and girls (16% to 33%).⁴⁵ During the FGDs, participants reported the lack of civil documentation as an additional barrier to accessing healthcare.

Concerning the areas of expenditure, over the first round, of the **households in the QLS that reported spending on healthcare, 93% reported spending on medications, 75% on treatments, 36% paying transportation to and from the facilities, and 21% for relevant documentation and prescriptions**⁴⁶. Yet, accessing medication and treatments was the costliest and most reported health related expenditure according to the assessed beneficiary households. This **further compounds the vulnerability of those households reporting having at least one family member in need of healthcare assistance (chronic illness or disability), and especially in later rounds in the context of the growing COVID-19 pandemic.**

Because of the extent of costs related to accessing healthcare, several participants in 20 out of 40 FGDs during the first round of assessment reported that **cash was helpful in meeting healthcare needs in the short term, suggesting that cash may be an appropriate modality for humanitarian assistance for the health sector. However, it was not enough to improve access to healthcare for longer term.** Furthermore, in the 20 FGDs where this was discussed, a number of participants reported that MPCA was spent on what they perceived to be more pressing priority needs such as food and shelter. A resultant common coping strategy was to visit a village doctor using natural plant medicine instead of seeking western medical care, or to delay seeking healthcare entirely.

⁴⁵ Multiple options could be selected and findings may therefore exceed 100%.

⁴⁶ Multiple options could be selected and findings may therefore exceed 100%.

NFIs Needs

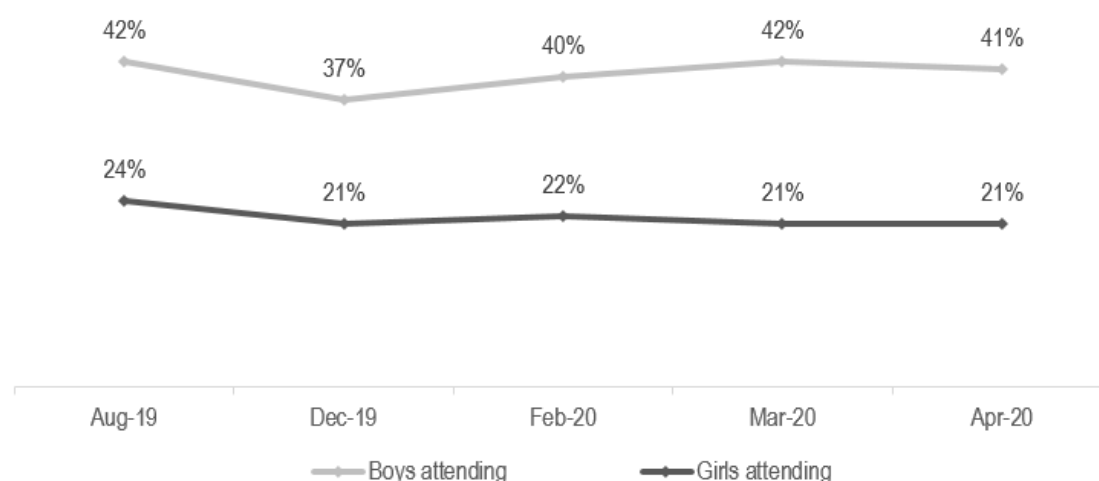
Although in February 2020, 87% of QLS-assessed beneficiary households reported that access to NFIs had improved compared to prior to receiving assistance, reporting for specific items indicated that needs were still high. Furthermore, **trends over time indicated seasonality to have an impact on the level of need, particularly for winterization items such as warm clothes (from 98% in February 2020 to 76% in April 2020) and blankets (from 99% in February 2020 to 88% in April 2020).**

These findings further support the conclusions drawn from other sectoral needs, that one-time multi-purpose cash assistance is useful in addressing urgent priority needs for the short term, and during 'peak' periods of need, but that the cash is not enough to cover all needs, nor to have a longer term impact.

Education Needs

Over time, **education remained a priority need with consistently low proportions of school-aged children (ages 6 to 18) reported to not be attending formal school** at least three days a week at the time of interview. Furthermore, proportions were notably lower for girls than boys.

Figure 13: Proportion of school-aged boys and girls (ages 6 to 18) in QLS-assessed beneficiary households reported to be attending school at least three days a week at time of the interview, for rounds 1 to 5 (August 2019 to April 2020)



Levels of reported attendance only fluctuated slightly across rounds, with male attendance consistently reported at between 37% and 42%, and for girls at between 21% and 24%. This **suggests that MPCA was unable to have an impact on education, enrollment, and attendance rates. Therefore, likely more specialised interventions may be needed to achieve higher attendance rates.** This was further evidenced by the continued reporting by households across rounds that children were not attending school due to the conflict or natural disaster that qualified them for assistance. For both boys and girls, between 55% and 57% across December 2019 to April 2020 were reported to not be attending school as a result of the initial shock.

There are three key findings that can be extrapolated from this. Firstly, that **for at least half of all school-aged children in the QLS-assessed households, they are not attending school due to the consequences of the shock and displacement.** Consequently, understanding the nature of the impact of the shock and the barriers it raised to school attendance could be highly informative in designing education specific programming. Secondly, **that these proportions remained consistent across the rounds indicates that there was an ongoing impact that may require either longer term in-kind and service based solutions, or larger or sector-specific cash injections.** Thirdly, that these proportions were equal for both boys and girls, and yet attendance for girls was much lower, **indicates more entrenched, likely socio-cultural, barriers to girls' school attendance, that may require cross-sectoral interventions that take into account gendered access constraints.**

This was supported by qualitative findings from the FGDs during the first round, where in 19 out of 40 FGDs, the **majority of participants reported that the cash received did not impact their children's access to education**

due to having to spend the cash assistance on other priority needs including shelter, food, health and repaying debt. Moreover, 36 households reported not spending any of the MPCA on education, despite having children in the house, out of which 18 because the cash was not enough, and 6 because their situation deteriorated in the weeks following receiving cash assistance and they had to prioritise other expenditures. Indeed, education was not considered as priority area of expenditure, however, all (100%) QLS-assessed beneficiary households reported that cash was not sufficient to spend on education, which may mean that if they had more money available, they could have invested more and more consistently in children education.

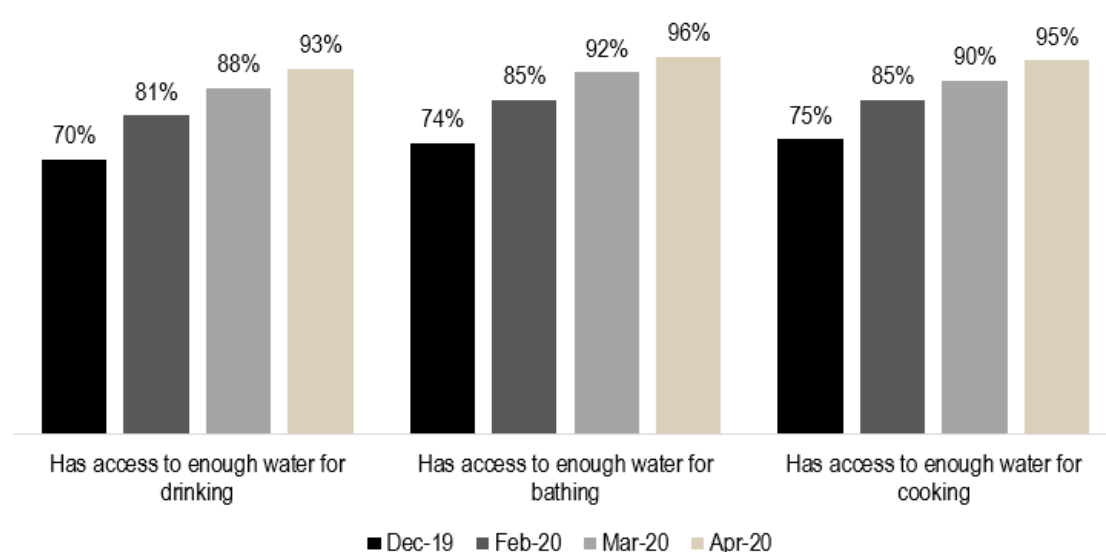
Furthermore, a number of participants in 16 out of 40 FGDs highlighted financial barriers to accessing education, including lack of finances to pay for their children's school fees, and requiring their child to seek employment and contribute to the household income instead. This is also reiterated in the monthly household income reported, which often includes a smaller but consistent income obtained through child labour. **In addition to the financial barriers both to access education and engaging children in the informal labour market, non-financial reasons were also commonly reported.** In 19 out of 40 FGDs, the majority of participants reported safety and security concerns as the main barrier to accessing education, while the lack of civil documentation was mentioned as barrier to enrollment in formal education.

Together, these findings indicate that **whilst education was a need for many households with school-aged children, they were not spending their assistance on this, either due to having to prioritise other, more critical expenses such as food and shelter, or because of considerable non-financial barriers to access.** Consequently, whilst further cash assistance might mitigate the need for households to send children into the labour market to supplement household income, **non-financial barriers to education likely require sector-specific interventions and support.**

Water Sanitation and Hygiene (WASH) Needs

Overall, 3% of beneficiary households assessed in the QLS reported spending their cash on WASH needs.⁴⁷ Yet, the vast majority of households were provided with WASH in-kind assistance alongside the one-time MPCA. Indeed, 88% of QLS-assessed beneficiary households reported that the cash assistance did not improve their access to drinking water. That being said, **reported access to water for drinking, bathing, and cooking, was shown to improve over time to almost all QLS-assessed households reporting of having sufficient access.**

Figure 14: Proportion of QLS-assessed beneficiary households by reported access to enough water for drinking, bathing, and cooking, at the time of interview, for rounds 2 to 5 (December 2019 to April 2020)



⁴⁷ This may in part be due to the provision of in-kind WASH assistance, which is regularly provided by DACAAR at the same time as ERM MPCA.

This may be due to the increase in proportion of households reporting to be living in permanent shelter across the rounds, and consequently improved access to utilities. In addition, that the majority of QLS-assessed households remained in their area of displacement may suggest a more general improvement in terms of integration into the community, and similarly, improved access to basic services.

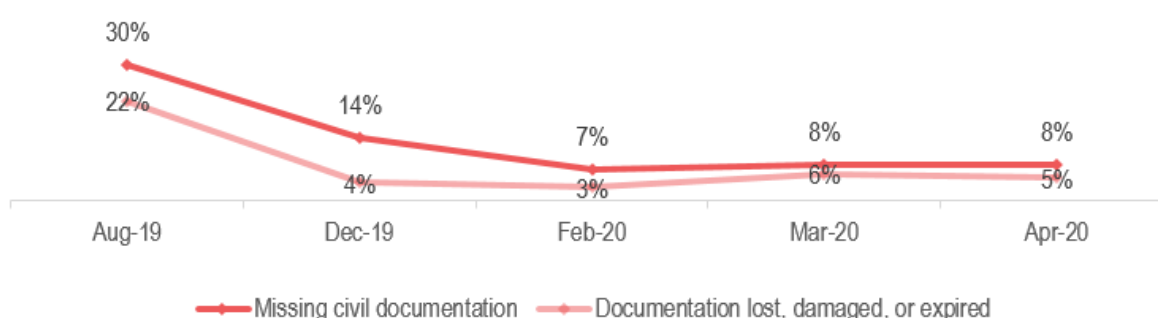
However, the QLS found that there remained critical gaps in WASH infrastructure. For instance, by the fifth and final round of assessment in April 2020, 9% of QLS-assessed households reported not having access to a latrine, and of the 91% that did, 16% still reported practicing open defecation. Additionally, the majority of assessed households (63%) reported using inadequate and open water sources by the fifth round, including public handpumps (42%), unprotected spring (6%), surface water (11%), and other (4%).⁴⁸ A third reported using safer sources: private handpumps (22%), protected springs (8%), or water piped from a public network (7%).

Protection and Documentation Needs

The main protection risks reported by beneficiary households assessed in the QLS related to ongoing physical safety and obtaining legal documentation. Despite protection being a critical need, findings from the first round of the QLS showed that ownership of legal documents was a low priority of expenditure for the beneficiary households. Indeed, 2% of households reported spending MPCA on obtaining documentation and in turn, 3% of households reported that the cash assistance had helped them to acquire documentation in the first round in August 2019. Interestingly though, lack of documentation was still reported across rounds as a barrier to access both education and healthcare.

Yet, across rounds, the amount of people reporting missing civil documentation decreased from 30% to 9% over time, out of which 5% reported at least one person in the households not having the national ID card, and 1% reported having lost either the birth certificate or the marriage document.

Figure 15: Proportion of QLS-assessed beneficiary households reporting to have missing documentation, or to have lost, damaged, or expired documentation (since the last interview), for rounds 1 to 5 (August 2019 to April 2020)

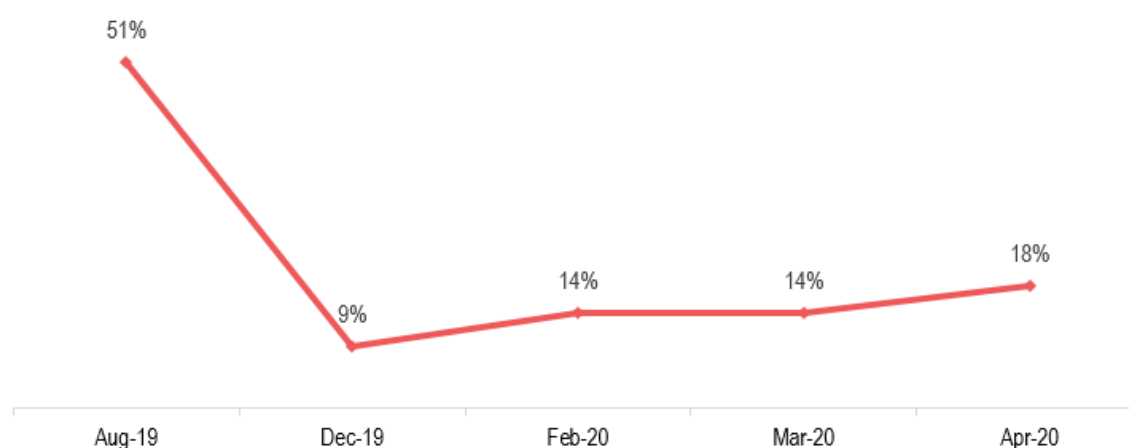


The main reasons for missing documentation reported by FGD participants were varied, but some included issues that could be addressed through cash, such as: long distances to travel to the district of origin to replace them, and limited financial means. **Nevertheless, missing documentation might affect households' access to basic services, and thus should be considered a priority for future protection related activities and interventions.**

⁴⁸ 'Other' covers various sources such as river water.

Furthermore, There was a notable decrease in QLS-assessed households reporting that they had physical safety concerns about members of their household (including themselves) between the first and second round, from 51% to 9%, which then remained below 20% up to the fifth and final round in April 2020.

Figure 16: Proportion of QLS-assessed beneficiary households reporting to have physical safety concerns about members of their household, including themselves, (since the last interview), for rounds 1 to 5 (August 2019 to April 2020)



These findings indicate that **whilst MPCA alone might not be able to directly mitigate protection needs, cash may have an indirect impact on overall protection needs**, for example, through mitigating the stress of debt, improving shelter conditions, or easing tensions with the host community. **However, reported non-financial barriers and protection risks indicate the need for cash-based programming to be coupled with follow-up protection activities to support shock-affected and displaced households.**

Remaining challenges to meeting household needs and change over time

Whilst MPCA was found to support households in addressing financial barriers to meeting needs, FGD findings shed light on multiple, and persistent, challenges and barriers to accessing services. **When asked about additional non-financial barriers to meet household needs, QLS-assessed beneficiary households frequently mentioned two key issues, namely safety and security concerns and socio-cultural barriers.** Additional barriers, however, included a lack of facilities and infrastructure, limited physical accessibility, and ethnic difference/tensions, particularly for displaced households.

This further **highlighted the need of alternative, sectoral, in-kind or service based assistance.** Thus, in order to better inform future programming for shock-affected populations, this section will explore how beneficiary households reported some of the key non-financial barriers to affect their ability to meet needs in both the short and long-term, particularly those relating to protection.

Safety and Security

In terms of physical safety, during the first round of data collection 97% of QLS-assessed beneficiary households reported that cash did not contribute to protecting their household from physical safety risks and over half (51%) of households reported having physical safety concerns about members of their family (including themselves). Types of major safety concerns highlighted during FGDs included: insecure transportation

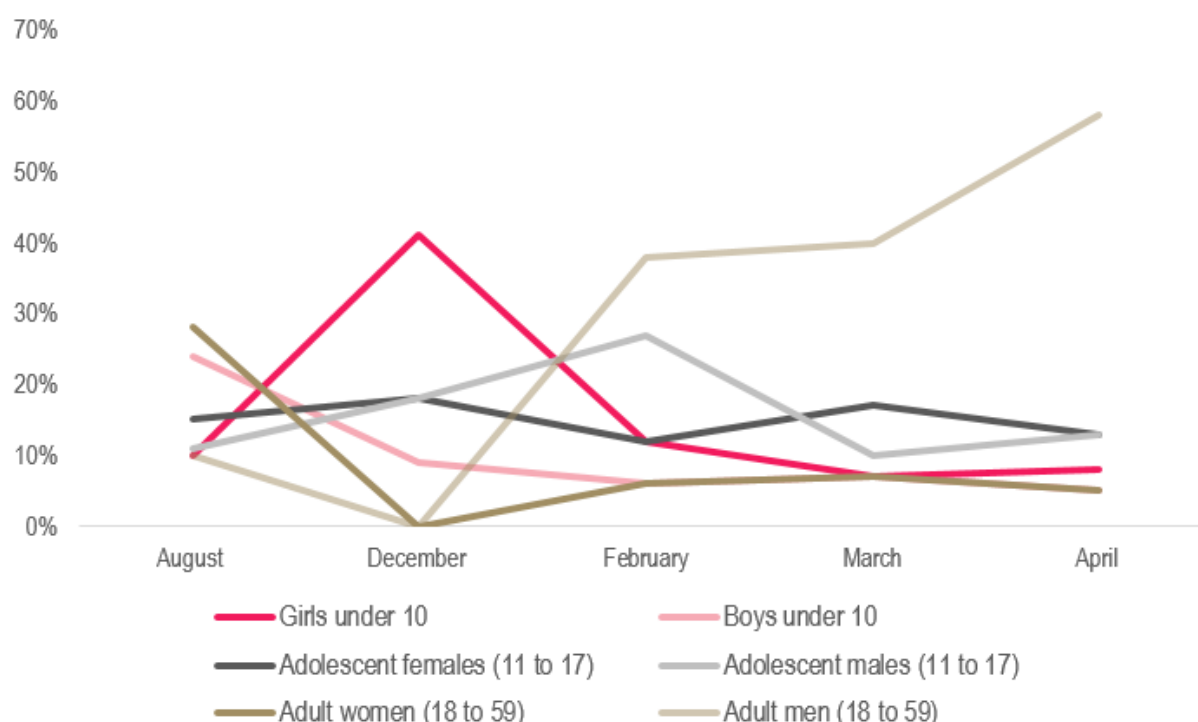
conditions (highlighted in 6 out of 40 FGDs), the presence of mines and explosive remnants of war (ERWs) (highlighted in 6 out of 40 FGDs) and unsafe locations for schools and workplaces (highlighted in 6 out of 40 FGDs).

Whilst the proportion of households reporting to have physical safety concerns did decrease considerably between the first and second rounds (see figure 16), there were persistent concerns reported between the second and fifth rounds, that also showed to slightly increase over time (from 9% in December 2019 to 18% in April 2020). Households were also asked to report the population group of most concern in relation to physical safety. The population considered to be of most concern in relation to physical safety, as reported by households in the first round, was adult women between 18-59 years of age (28%). However, over the rounds, households' perception about which population group (age and sex) was more exposed to physical risks fluctuated considerably.

Concerns for the physical safety of women in particular were highlighted as the main security concerns in FGDs in August 2019. This was especially prevalent regarding barriers to accessing health services and education. More specifically, participants in 17 out of 40 FGDs in Faryab and Ghor provinces explained that the concerns were mainly around the safety of women leaving their homes unaccompanied due to the cultural constraints. However, the extent to which these concerns changed over time did vary according to age group. For example, the proportion of households reporting concern for adult women between 18 and 59 then decreased over subsequent rounds, from 28% in August 2019 to 5% in April 2020.

Interestingly, concern for adolescent girls, aged 11 to 17, remained consistent over time, ranging from 11% to 20% of households reporting adolescent girls to be the group of most concern. With young girls under the age of 10, the trends differed again, with a considerable spike in the proportion of households reporting concern during the second round in December 2019 (to 41%), that then fell to below 10% in later rounds. This suggests either a particular contextual concern during the month of December, or potentially anomalous reporting. With the exception of this spike in concern for girls under 10 in December, trends were roughly similar for male children of the two respective age groups.

Figure 17: Proportion of QLS-assessed beneficiary households reporting the populations of most concern in relation to physical safety (since the last interview) for rounds 1 to 5 (August 2019 to April 2020)



However, there was a notable and consistent increase in the proportion of households reporting adult males as the population group of most concern, rising to 58% in the fifth and final round in April 2020. Additionally, data showed that children (under 10 years old), both males and females, tended to be considered less at risk than adults by the fifth round, which is a reversal of findings from the first round. **Changes in the nature of the protection risks across the rounds may help to explain some of these trends and provide more guidance as to the type of protection-based interventions that may be needed.**

Table 2: Proportion of QLS-assessed beneficiary households reporting the types of physical risks members are exposed to, for rounds 1 to 5 (August 2019 to April 2020)⁴⁹

	Verbally threatened or intimidated	Assaulted with a weapon	Hindered to move freely within or outside the settlement	Hindered to move freely to another district or province
Aug-19	12%	15%	13%	17%
Dec-19	46%	32%	27%	27%
Feb-20	9%	9%	62%	65%
Mar-20	20%	10%	60%	60%
Apr-20	30%	43%	50%	63%

The proportion of households reporting hindered movement, both within or outside the settlement and to other districts or provinces as a risk increased significantly in the later rounds and it may correlate to the increased concern for adult men shown in figure 17. However, given socio-cultural constraints on women's movement already reported from the first round and during the FGDs, any change in security situation affecting women and girls' general movement would likely be noted, and instead it would be seen to impact men more considerably. Indeed, reiterating the movement restrictions for women and girls spotted since the first round of data collection, in 19 out of 40 FGDs, participants reported that some parents did not allow their children to go to school due to the possible explosions, kidnappings that could occur when travelling, furthermore, women were also reported to be prevented from leaving the house without a male relative, even to go to a health facility.

Furthermore, in 12 out of 40 FGDs during the first round, participants reported additional concerns due to ethnic differences and tensions, particularly for displaced households, **concerns that were also mentioned regarding IDPs' ability to pay rent and the eventual consequent tensions between tenants and landlords. That the proportion of households in permanent shelter and renting property increased considerably by the fifth round, may suggest additional inter-communal tensions over time.** Such findings indicate a level of protection risk in relation to physical safety that further consideration in specialized service provision and longer term programming.

Cultural constraints

In line with the findings on physical safety, showing a gendered dimension of security, **women and girls were also reported to face both cultural and societal constraints, which play a pivotal role in accessing resources, public facilities, and services.** Parents highlighted their reluctance to send their daughters to school due to the disapproval of their community, which was reflected in the overall reported attendance rates. Furthermore, women were often reported to be prevented from leaving the house without a male relative, or face discrimination if alone, even to go to healthcare facilities or to access job opportunities. This consequently hindered women's access to employment, which was often limited to home-based work and activities. **These findings highlight the need for a gender-focused lense when understanding and responding to cross-cutting needs, particularly for health and education.**

⁴⁹ Multiple options could be selected and findings may therefore exceed 100%.

CONCLUSION

The QLS indicated the extent to which beneficiary households felt assistance had enabled them to meet their needs, following receipt of assistance in June to August 2019, through to April 2020. More generally, where more households reported spending money, and reported spending more money, there were higher levels of perceived improvement in level of needs. However, this was not consistently the case, nor were beneficiary perceptions of impact necessarily reflected in key indicators of sectoral need measured over time.

QLS-assessed households consistently reported the same priority needs across all rounds. This included food, shelter, NFIs, healthcare, and WASH. The continued prioritization of these needs across the rounds reflects preliminary conclusions about households' ongoing needs potentially requiring continued humanitarian intervention. Indeed, the key findings and data presented show MPCA to have had an immediate impact on beneficiary households' ability to meet certain needs, to varying extents. Tracking the QLS-assessed households' self-reported levels of sectoral needs, as well as objective measures, such as the FCS and rCSI helped to better understand household needs and their variations in the longer term. This was especially prescient given the expressed concern of participants that their situation would deteriorate over time once the assistance was spent.

This was most clear for the results obtained from the first round questionnaire, when, for example, almost all households reported spending some of their assistance on food. However, 51% reported that their access to food had not improved. When asked why, almost half reported that it was not enough (48%). Yet, over the following months, findings for FCS and rCSI scores indicated that following the initial positive impact of assistance in addressing food insecurity between the first and second rounds in August and December 2019, levels of food (in)security remained fairly stable, but still high.

In the case of shelter, reported shelter type over time indicated a clear improvement in the situation of QLS-assessed beneficiary households, with almost all reporting to live in permanent shelters by April 2020. However, as was discussed by FGD participants in the first round, this comes with increased socio-economic pressures of paying rent, which could in turn create protection concerns relating to HLP or inter-communal tensions between tenants and landlords. This speaks to a broader trend observed across the QLS with regard to the persistently low, and further declining, socio-economic status of the assessed households. Over time, the proportion of households in debt increased, likely due to negative net-income ratio leading to continually accruing debt. Furthermore, debt was reported to have additional negative implications relating to concerns around both mental health and protection.

Even though the assessed households were no longer immediately shock-affected, they did still show clear indications of vulnerability and potential need for additional humanitarian assistance nine months after receiving ERM MPCA. Indeed, their coping capacity deteriorated over time, and their income generating activities were not sufficient to meet the households' needs, leading them to incur further debt and rely on support from the community, the government, and humanitarian aid. Additionally, in case of further shock, their ability to manage displacement could further reduce over time.

Furthermore, whilst MPCA was found to support households in addressing financial barriers to meeting needs, FGD findings shed light on multiple, and persistent, challenges and barriers to accessing services. Such challenges included the MPCA not lasting enough and not being sufficient to meet all needs in the short term, and not lasting in the long-term, together with key issues related to safety and security, socio-cultural barriers, lack of functioning facilities and infrastructures, limited physical accessibility, as well as ethnic difference and tensions, which showed to persist over time. Overall, findings from the five rounds of QLS and the emerging trends highlighted in this report point to the need for integrated programming, aligning MPCA to support immediate needs in the short term, with in-kind and service-based assistance as well as longer-term livelihoods and resilience programming, particularly in contexts where IDPs expressed an intention to remain in the new location indefinitely.