



For a world without hunger



Project No. AFG – 1154

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List of abbreviations and acronyms

Abbreviations	Explanation
AA	German Foreign Ministry
ACBAR	Afghan Coordinating Body for Afghan Relief & Development
AFG	Afghanistan
AHEAD	Assistance for Health, Education and Development; Afghan NGO
AIB	Afghan Investment Bank
ANDMA	Afghanistan National Disaster Management Authority
ANDS	Afghanistan National Development Strategy
BMZ	German Ministry for Economic Cooperation and Development
BoQ	Bill of Quantity
CDC	Community Development Council
CM	Community Mobiliser
DAC	Development Assistance Committee
DDA	District Development Assembly
DAIL	Department of Agriculture, Irrigation and Livestock
DeGEVAL	Society for Evaluation
DoE	Department of Education
DoEcon	Department of Economy
DPM	Deputy Project Manager
DRR	Disaster Risk Reduction
ENÜH	Development Oriented Transitional Aid
FAT	First Aid Training
FP	Facilitating Partner
GPS	Global Positioning System
H&H	Health and Hygiene
INSO	International NGO Safety Organisation
MDG	Millennium Development Goals
MoE	Ministry of Economy
MRRD	Ministry of Rural Rehabilitation and Development
NDMP	National Disaster Management Plan
NGO	Non-Governmental Organisation
NRVA	National Risk and Vulnerability Analysis
NSP	National Solidarity Programme
OECD	Organisation for Economic Development
PAC	Project Appraisal Committee
PVC	Poly Vinyl Chloride
RRD	Rural Rehabilitation Department
Sphere	Project for developing minimum standards for humanitarian work
UNHCR	United Nations High Commissioner for Refugees
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WASH	Water, Sanitation and Hygiene
WHH	Welthungerhilfe

Explanation:

- Scooping groyne: a traditional intake used in Afghanistan to extract irrigation water from a river
- Jerib = 0.2 ha

Impressions from the field visits

“One thing we would like to specifically mention is that the WHH is the only organisation that has always respected us and never promised anything they did not deliver” – Members of the Kuchi group from Shirabad Achakzai / Jawzjan.

“It tastes like mineral water” - a user of the bio-sand filter in Jawzjan.

“The WHH did not listen to us and our requirements, they did not build the protection wall where we wanted it” – member of CDC in Jawzjan.

“In the NSP project, we had much better control over each and every Afghani. In this project, we were afraid to ask too many questions as it is charity. We were also told that German organisations do not communicate on financial issues” – CDC in Jawzjan.

“We especially appreciate the transparency and the participatory approach of the WHH. The WHH does not create any conflict and their quality control is good” – CDC in Nangarhar.

“When we filter the water, we do not have any stomach problems which we do have when we use water from the water distribution system” – CDC member in Jawzjan on the impact of using the bio-sand filter. Their water supply system was built by an NGO six years ago and uses a tube well as the source.

“We tried to get help from anyone for four years. Finally, AHEAD assisted us in removing the threat posed by landslides from that hill” – CDC member in Samangan on the impact of the “hill demolition” project.

1 Brief description of the project and framework conditions

The project “*Improvement of drinking water supply and disaster preparedness in flood and drought affected communities in 3 provinces in Northern and Eastern Afghanistan*”, funded with EUR 1.71 million, was implemented in three provinces – Jawzjan, Samangan and Nangarhar – targeting 60 villages (25 villages each in Jawzjan and Nangarhar, 10 in Samangan) and supporting 55,000 direct beneficiaries. The implementation of the project was initially planned from May 2013 to November 2014 (19 months), but will be extended to 15 February 2015 (21 months). The project’s overall objective is to increase communities’ resilience against natural disasters while protecting their vulnerable infrastructure through:

1. Objective 1: Institutionalised and improved disaster preparedness capacities at community level, allowing communities to mitigate the negative impacts of recurring natural disasters on their livelihoods and basic infrastructure.
2. Objective 2: Improved access to safe drinking water and adequate sanitation facilities as well as the establishment of daily hygiene routines among the target group, resulting in the reduction of water borne and hygiene-related diseases.
3. Objective 3: Improving the efficiency of irrigation schemes and making them flood proof, thus safeguarding food production during flood and drought periods.

These objectives are to be achieved through the following outputs (quantities in brackets):

- Related to objective 1: Action plans and emergency plans developed jointly with the communities (60), disaster risk reduction (DRR) training, emergency and first aid training and distribution of kits (300);
- Related to objective 2: Rehabilitate wells and construct new ones (250), rehabilitate water distribution systems (13), provide hand pump mechanics training (60), distribution of water filters (300), construction of model and school latrines (220), hygiene education training (600), hygiene kits (3,000), training of multipliers (120);
- Related to objective 3: Rehabilitation of basic infrastructure (60).

Framework conditions

Knowledge, attitude and practice (KAP) studies were carried out to create a baseline and measure the project’s impact. These KAP studies were used by the evaluation to analyse the framework conditions of the target groups exemplified for the two provinces below.

In **Jawzjan**, only 15 of the 260 (6%) individuals interviewed reported that they had experienced a natural disaster in form of a flood or drought¹. All persons interviewed (260) reported water shortage as one of the key problems. Thirty percent of the population draws water from safe sources (88% of all respondents stated that they get sick when they drink the water from their main water source) and the average consumption per family is 150 litres, which translates into roughly 25 litres per person. In Jawzjan, most of the water sources are provided by NGOs, with only 25% of the sources being village-funded water points. Interestingly, 80% of the persons interviewed use latrines, however, only very few latrines are actually located near a water point (which means that there is no possibility to wash hands after use). A total of 185 persons (75%) reported that they are heavily indebted with a total of EUR 1,000 on average due to expenditure on food or weddings. None of the respondents reported that they are able to feed their family through their own agricultural production.

In **Nangahar**, 90% of the individuals interviewed (290 out of 322) responded that they do not have enough to eat and that they had experienced a flood recently. Roughly half of respondents reported water shortages. Eighty-five percent draw water from unsafe sources (50% reported that they get sick when they drink the water) and the average water consumption per family is 250 litres or 35 litres per person. In Nangarhar, most of the water sources are provided by NGOs, with only 16% of the sources being village-funded water points (critical for sustainability). Only 28% of the persons interviewed use latrines and open

¹ Drought in the context of this project is understood as a seasonal failure of rainfall and not a fundamental change in climate requiring a re-orientation of agriculture and the provision of water.

defecation is very common (a stark contrast to Jawzjan). A total of 275 interviewees (85%) are heavily indebted with a total of EUR 2,000 on average (i.e. double the amount of average debt among the respondents in Jawzjan) due to expenditure on weddings, food, livestock diseases, etc., none of which is attributable to a natural disaster. Some of the persons interviewed stated that they would be able to feed themselves or their family through own agricultural production.

The target group generally consists of farmers whose economic status is primarily associated with the group they belong to:

1. A small number of landowners who live from their own land (the wealthy group)
2. A large number of people who own a small plot of land (0.5 to 2.0 jerib)
3. A large number of people who work as sharecroppers but do not own land;
4. A small number of people who earn a living with day work and do not own land; depending on the village.

In general, a village's economic capacity primarily depends on whether it has access to irrigated land or rain-fed land only. The majority of land in some villages may be owned by some families only while in others, land may be more or less equally distributed. The majority of the families targeted by the project would have a monthly income of EUR 150 (group 2, 3 and 4 above). This implies that a large number of families will have serious problems paying off their debts.

2 Relevance

The relevance² of the measures depended on the level of exposure to natural disaster, the economic framework conditions and the subsequent deduction of priorities in the villages. The evaluation differentiated between physical assistance, i.e. rehabilitation of wells, drilling of new wells; water distribution systems; construction of latrines; construction of retaining walls; rehabilitation / protection of irrigation systems and Information and training campaigns, i.e. disaster risk reduction, first aid training (as part of DRR) and health and hygiene.

The physical assistance was in general very relevant. The measures were selected by the communities and they prioritised them, which was facilitated by the WHH. The final selection and extent of assistance depended on the available budget, and the resulting reductions reduced the impact significantly. The target group did not perceive sanitation as a priority. None of the communities would have included "trainings or latrines" on their list of priorities³. Sanitation is, however, an integral component of WASH interventions. The challenge will be to design sanitation interventions that create sufficient ownership in the villages and significantly impact public health.

The evaluation of the relevance of trainings was challenging given the limited time available during the visits to the villages. The statements of the Community Development Council (CDCs) members in the interviews that all trainings were relevant were to some extent contradicted by the level of poverty existent in the villages. Under such harsh living conditions, one would assume that any training / knowledge provided have to have an immediate practical use for the everyday life of people. This was valid for FAT and H&H, but seemed to be limited for DRR. The majority of CDC members interviewed confirmed that they were given a "list of possible assistance in terms of type and quantity", and that the WHH had informed them that trainings and latrines were mandatory. In summary, the relevance of the project was generally assessed as good, with latrine construction and DRR training (except first aid training) being viewed as limitations.

3 Effectiveness

Achievement of the project's objectives was assessed through the indicators defined in the log frame.

² The extent to which the aid activity is suited to the priorities and policies of the target group and donor.

³ Part of the development of a DRR strategy was the elaboration of an "action plan" which includes a list of priority measures.

Outcome related to objective 1

Three days of training is too short to embed and institutionalise new principles in a community, and this objective is therefore regarded as having been too ambitious. The project has initiated “structured DRR-thinking” in the community with varied success depending on the community’s level of exposure⁴ to natural disaster, the quality of the trainers and in particular, level of education⁵. The majority of CDC members and individuals who had participated in DRR trainings mechanically answered questions about the impact of the DRR training⁶, memorising what they had been taught rather than demonstrating genuine understanding of the disaster risk reduction concept and its application. There were few exceptions, and one CDC in Nangarhar expressed appreciation about acquiring new skills to build better foundations, resulting in houses being more resistant against earthquakes. A large number (at least 50%) of the CDCs had not heard of the relevant government authority (ANDMA) and could not say whom to contact in case of emergency. With respect to the content of the training, it might have been useful to analyse the “existing / traditional system⁷” first, document it and develop a more effective system built on the former one. The first aid training seems to have been quite successful, as many of the respondents were able to give first-hand, practical and credible examples on the application of their newly acquired knowledge.

Outcome related to objective 2

Assistance in improving the water services is a key priority for the majority of rural communities in Afghanistan and was thus greatly appreciated. In terms of output, it can be assumed that the project will complete all planned activities. Regrettably, minimum standards e.g. the one of the Ministry of Rural Rehabilitation and Development, namely:

- a) Availability of 25 litres/person*day;
- b) Maximum of 20 households to be covered by one water point;
- c) Safe access to water within 250 meters of the residence to not take up more than 60 minutes per round trip.

were not complied with in many cases,⁸ which significantly reduced effectiveness⁹. Some of the rehabilitated wells failed to include essential parts (i.e. non-existing well aprons, drainage channel), though the new wells in Samangan were of very good quality.

The evaluation revealed that the number of families per well varied between 9 and 66, which has a direct impact on the amount of water available to each person, on queuing time, wear and tear on the hand pump, etc. The third indicator, walking distance, could only be assessed by measuring the distance between well locations (identified using GPS) and the connected residential households. In most cases, the maximum distance of 250 meters between the two seems to have been complied with. The reasons for non-compliance with the minimum standards were pragmatic: each village was allocated a specific budget, with the project team trying to distribute the funds as evenly as possible among the 60 villages. The provision of water points often resulted in “some improvements” (“something is better than nothing”), however, people often continued to be in dire need of water services (queuing time, water quantity). The effectiveness of the pilot latrines is questionable, as nearly all 19 CDCs interviewed stated that it is too expensive to duplicate this type of latrine¹⁰. No significant impact on public health is expected. Due to security reasons, no villages where school latrines have been built could be visited.

⁴ Statement made by all DRR trainers interviewed.

⁵ The importance of education in a village was mentioned by all trainers.

⁶ Quite a number of people could not read the leaflets that were distributed or explain the system for disaster risk reduction introduced.

⁷ Each community has a strategy against disaster of any kind, which could be improved.

⁸ These standards were not even a target in the individual proposals prepared for the villages, as up to 50 families per well were used to calculate the number of possible beneficiaries.

⁹ Even the proposal submitted to the German Foreign Ministry assumed only 15 families per well.

¹⁰ It is not particularly expensive, simple and would require design changes to make it more hygienic. It is nonetheless considered much too expensive.

In summary, access to water was generally improved, however, due to the large number of villages and non-compliance with minimum standards effectiveness will be limited. The impact, the impact on existing sanitary services and subsequently on public health will be insignificant. The impact of the bio-filter was reportedly excellent, however, due to the limited number of interviewees would need to be further verified. The outcome of the FAT and health and hygiene training was fairly good.

Outcome related to objective 3

The effectiveness of this component is limited with reference to the proposal which states that it would increase the availability of irrigation water and subsequently impact on food production. Firstly, quite a number of the infrastructure measures protected roads but not irrigation infrastructure. Secondly, if the irrigation systems were strengthened through protection walls or dividers, it did not result in an increase of irrigation water but facilitated the distribution of water. The indicator in this respect was not very realistic.

It was difficult to get an overview of the social infrastructure built (referred to as DRR structures), ranging from improving the foundations of bridges, the construction of protection walls for roads¹¹ or constructing simple gravel roads. The infrastructure targeting disaster risk reduction in Samangan had seemingly a good effect on disaster risk reduction (hill demolition, foundation of bridge, planting of trees¹², etc.). A common component was paid work for digging trenches and especially cleaning irrigation canals. The latter has major implications, as canal cleaning is traditional community work which facilitates community cohesion. By paying such work, one could assume that self-help capacity was partially undermined, although some canals were reportedly heavily blocked with sediments by strong floods and the cleaning work would have been beyond the capacity of the community. Nevertheless, this work was also used to channel cash into the communities, which does not carry any long-term benefit.

In summary the effectiveness of the project was satisfactory, but was negatively impacted by the amount of funds vs. the large number of target groups and the non-compliance with standards, especially for water supply. The effectiveness of the trainings met the expectations, but could be improved by modifying the curriculum to make it more practical.

4 Efficiency

The total costs per person calculated on the basis of the proposals for the individual villages were EUR 7.2, which is fairly low and is indicative of an emergency project. By contrast, the overall budget allotted 1/3rd for operational costs, 1/3rd for personnel costs and 1/3rd for materials, which is indicative of a development project. The provinces' individual budgets¹³ allotted slightly more (45%) for materials.

The evaluator compared the unit rates of various bill of quantities (BoQs) from Jawzjan, Samangan and Nangarhar with market rates collected from contractors in Mazar. The rates for gravel, sand and cement in Jawzjan appeared to be very high (2 to 3 times that of the market rates), however, the majority of unit rates were within the actual market rates of Mazar. The costs for well rehabilitation were unusually high in Nangarhar (3 times that of Jawzjan; EUR 130 vs. EUR 480) when compared with the average figures for this type of work. The average costs in Jawzjan came much closer to the standard costs, with the original rate stated in the budget amounting to only EUR 285.

The difference in costs for protection walls in Jawzjan and Nangarhar would require a more in-depth investigation (EUR 20 vs. EUR 80). This disparity is possibly attributable to varying depths of foundation and cross-sections of walls. The unit rates for stones, sand, cement, pointing, etc. represent market rates. The new wells in Samangan are of very good quality

¹¹ All of the protection walls constructed protected a limited distance as the funds did not suffice to cover the necessary length.

¹² Planting of trees, however, is a long-term measure and its usefulness in this project is questionable unless it is continued.

¹³ The overall budget was separated into a budget for Jawzjan, for AHEAD in Samangan, for Nangarhar and for the main office in Kabul.

(visually better than in Jawzjan), but they are expensive (EUR 7,000 vs. EUR 2,800). The reason for this difference in price could be that AHEAD contracted a rotary rig¹⁴ and that Samangan's geology is more rugged.

The costs for a latrine were also high (EUR 300), especially considering that they are not very well-designed and especially well-constructed latrines. The bio-sand filters are reasonably priced (EUR 16) as are the per capita costs for the water distribution system (EUR 10 /capita). This figure is only indicative as it seems that only parts of the existing systems were rehabilitated and only a few new systems were installed. The DRR and FAT kits were quite costly (5 were distributed to each village, each cost EUR 100) considering the villages' economic situation. They are hopefully being stored centrally, allowing access for everyone, and will hopefully be re-stocked in case certain parts are used up.

One crucial aspect in terms of efficiency is the fact that a significant amount of funds has not yet been spent (32%), exerting a certain pressure to conclude project selection (the project has been extended to February 2015, however, construction during the winter months is difficult).

In summary, the efficiency of these measures is rated as average.

5 Outcomes and impacts

The outputs are clearly being utilised, although some of the latrines visited were apparently still unused. The wells, reticulation systems, roads, bridges, etc. are being utilised as these particular projects were selected as priorities by the communities themselves. Only the quantity and size was adjusted to the available budget, which reduces the projects' impact considerably. The limited budget resulted in walls which should have been 200 meters to only end up being 80 meters long, hence causing an expected reduction in flood protection.

Participants of all three training types—DRR and FAT, health and hygiene—consistently confirmed their significance and value. According to the participants, they were well aware of most of the information provided, but had to be refreshed. Based on the evaluation of the interviews, FAT training seems to have had a positive impact because it was of immediate usefulness in the everyday life of people. The distributed kits as part of the first aid, DRR and health and hygiene trainings were well received¹⁵. The DRR kits and first aid kits are allegedly stored in the community centres and are accessible to all at all times. Whether they will be re-stocked once certain parts have been used up is difficult to assess. One negative factor is that the communities did not procure these kits on their own although the procurement of these kits lies within the communities' purchasing power.

The assistance provided will not have any significant impact on the beneficiaries' economic situation. An investment of an average of EUR 10,000 per village and approximately EUR 7.2 per beneficiary is too small under the existing framework conditions. The cash-for-work component for canal cleaning and digging of trenches will give individual households a limited short-term boost. All activities were implemented through the established CDCs. Certain types of projects will / would have an impact, but most of these projects could unfortunately not be inspected. No negative impacts on the environment are anticipated from the project.

The limited assistance for each village understandably caused some tensions and conflicts. This was more or less confirmed by all CDCs; it is the CDCs' task to distribute the benefits as evenly and to as many people as possible.

The project's impact was certainly negatively affected by the decision to distribute the outputs across a large number of villages. Due to the reduced amount that subsequently became available for each village and the partial negligence of minimum standards, no significant impact can be expected. In summary the impact is rated as not satisfactory.

¹⁴ A rotary rig is much faster than a common percussion rig, but is considerably more expensive.

¹⁵ They are considered essential in order to keep people motivated to participate in the trainings.

6 Sustainability

To analyse sustainability, the individual components were evaluated separately. The evaluation therefore analysed:

Physical assistance

- Water supply: Rehabilitation of wells, drilling of new wells: The sustainability of wells equipped with hand pumps in Afghanistan depends on the existence of an alternative water source; if such a source is available (irrigation channel, river, private dug well with bucket), the likelihood is very high that even minor repairs will not be undertaken and the problem “outsourced”. Unfortunately, villages in rural Afghanistan have developed a form of NGO-dependency syndrome in this respect. Otherwise, the sustainability of wells with hand pumps will not pose a problem; trainings of hand pump mechanics were provided within the scope of the project, and spare parts are available;
- Water supply: Reticulation systems: None of the systems could be inspected for security reasons; one negative indication is that a number of the systems in Nangarhar are only an upgrade of the existing system; the reason for installing solar systems was that the communities could not pay the fuel costs for generators, even though it involved 400 families or 3,000 users. It is thus questionable whether these water systems can be maintained if not even the fuel costs can be covered. One positive aspect, on the other hand, is that the firm that sells these solar systems reportedly offers a 5-year warranty and that the local government authorities are involved in the project, which might help the communities in case of any disputes;
- Sanitation: Construction of pilot latrines: Sustainability is not an issue; one problem relates to design; the latrines were built on top of a pit and the superstructure will be rendered useless once the pit is full (2 – 3 years of use);
- Flood protection: Construction of retaining walls and intakes¹⁶: The protection walls are of good quality and should be durable, the dividers were of good quality as well, including the penstocks which are often a weak point; both structures are relevant for the communities and will be maintained;
- Irrigation: Rehabilitation of system components: The walls and penstocks were of good quality and well-constructed; however, only a small number of structures could be visited;
- Gravel roads: No roads could be visited; the construction of durable gravel roads requires proper compaction and insurance against overload from heavy traffic; according to the limited information available, it seems that the constructed gravel roads are short tertiary roads which are not subject to heavy traffic;
- Bio-sand filter: Conflicting information was received ranging from ‘easy to operate’ and ‘very positive impact’ to ‘a number of households do not use them because they do not function properly’; the filter will be clogged depending on the level of turbidity in the raw water; depending on the training of people in terms of washing the sand and/or replenishing it with new sand, the filter will continue to operate; however, these aspects were not assessed.

Trainings:

- First aid training: First aid training reportedly had a positive impact and respondents convincingly reported what they had learned and the practical benefits they had derived from it; a continuation of such trainings is expected;
- Disaster Risk Reduction: Awareness, information and training campaign: albeit reporting the usefulness of DRR training, respondents regarded it as being quite theoretical; when asked, none of the DRR participants could explain what they had learned in the training aside from memorised topics; they could not explain the DRR

¹⁶ The evaluator only visited distribution structures that facilitate the distribution of irrigation water from a main channel to secondary or tertiary channels. No intake as such was constructed in a sense that water was taken from a river (scooping groynes).

strategy to improve the village's safety; unless various and longer-term campaigns are implemented, it is likely that the impact of such trainings will not be long-term;

- Public health: Health and hygiene awareness, information and training campaign: These type of awareness, information and training campaigns are a long and well-established type of assistance for villages in Afghanistan; to what extent these activities will be continued without external impulses is difficult to assess; the impact of such trainings can best be described with a frequent response in the interviews "...we were aware of most of the issues but had to be reminded".

In short, the sustainability of the measures meets the expectations, with the exception of water supply which is not, however, attributable to shortcomings of the project. It is nevertheless unlikely that all reticulation systems and wells will be sustainably operated and maintained.

7 Main recommendations

General

- DRR should be a cross-cutting issue in the work of the WHH, but should be addressed more comprehensively and not only from an "infrastructure perspective"; guiding concepts could be strategies as expressed in "characteristics of a disaster resilient community¹⁷" and should generally be guided by the internationally agreed Hyogo Framework¹⁸;
- DRR as implemented by the Welthungerhilfe (WHH) should take a systematic approach to identify, assess and reduce the risks of disaster for communities from a socio-cultural, socio-economic and natural resources perspective where infrastructure is eventually only one end result. It shall aim at reducing socio-economic vulnerabilities to disaster and at managing environmental and other hazards that trigger them;
- The WHH should offer training for the local government engineering departments in the three provinces (AHEAD could participate); these should include design principles and structured site supervision, but first and foremost train the staff to carry out feasibility studies to define the status quo and elaborate options and alternatives for informed decision making;

Future project components

- It is recommended to adjust the intervention area, project duration and available funds to the objective; an area covering 60 villages across three provinces is too large of an intervention area for a project with a duration of 19 months, especially if the project aims to have a significant impact on the reduction of the vulnerability of communities to natural disasters;
- The design of any infrastructure project should be based on a comprehensive survey in the villages to develop scenarios and alternatives and ensure compliance with accepted minimum standards (i.e. MRRD standards; maximum 25 families per well, maximum distance 150 m / MRRD, Sphere is inadequate as it is emergency-related); this will require training of engineers; the objectives of infrastructure work should be "guaranteed access to reliable water services" or "sustainable disposal of faeces and sludge, etc."; a similar approach is recommended for any intervention in the irrigation system;
- The concept of pilot latrines should not be continued and replaced by a concept which addresses the problem of "safe and hygienic disposal of faeces and sludge" for the entire village from a technological and sociological perspective; sanitation interventions have to create sufficient ownership in the villages and overcome the behavioural and economic challenges to provide a high number of households with a safe latrine;

¹⁷ Author John Twigg; Characteristics of disaster resilient communities – A guidance note / November 2009.

¹⁸ Hyogo Framework for Action 2005-2015: I S D R International Strategy for Disaster Reduction International Strategy for Disaster Reduction www.unisdr.org/wcdr Building the Resilience of Nations and Communities to Disasters.

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- A “traditional DRR strategy” already seems to exist in the communities; it is recommended to analyse this strategy as the basis for developing an improved DRR approach and to make the existing approach more effective rather than introducing new aspects;
 - Training should focus on the topics that are most relevant for the respective village and should be routinely adapted based on the lessons learned by the trainers; it seems that a number of topics are not immediately relevant;
 - Flood protection measures should comprehensively protect the relevant area at risk (i.e. roads, intakes, etc.); irrigation project should survey the entire system to identify suitable locations for effective interventions.

8 General conclusions and “lessons learnt”

Important lessons learnt

The key lesson learnt is that the WHH must decide whether or not to include DRR in its project work. If it includes DRR, it should not be an ‘add-on’ but a cross-cutting issue and thus decisive for the design and implementation of a project.

The applicability of DRR principles in a community strongly depends on the community’s economic situation and must strictly adhere to existing priorities. It does not suffice to design a theoretical training course (even with partly practical components) that aims to raise awareness among people about their current situation and suggest possible remedies. Any DRR approach must start by analysing the existing (traditional) disaster risk reduction systems already in place in the village and “take it from there”.

If infrastructure is part of a DRR project, the selection of measures should be based on a practical feasibility study applying agreed minimum standards and norms for i.e. water supply and sanitation. A limitation in this respect is the capability of the local engineers, who will have to be trained in conceptual and strategic thinking. Interventions for irrigation systems should be based on a survey of the entire system, from the main intake to the field turn-outs.

Best practice examples from the project

The evaluator participated in a meeting of the project approval committee (PAC) in Nangarhar. These committees ensured transparency and complemented the approach described in the village guidelines developed by the WHH office in Nangarhar. The concept of using PACs is effective as it ensures the participation of and coordination with all stakeholders, thus enhancing ownership of the project.
