

Participatory Hazards, Vulnerabilities Capacities Assessment (PHVCA) & Community Action Plan (CAP)

LIC#5 (Wazir Khan Jam Settlement), Dasht-e-Archi District, Kunduz Province, Afghanistan

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ABBREVIATIONS

BDN	Bakhtar Development Network
CDC	Community Development Council
DCA	Dutch Committee for Afghanistan
DSWG	Durable Solution Working Group
HLP	House Land and Property
HHs	Households
IDPs	Internally Displaced Persons
LIC	Local Implementation Committee
NGO	Non-Governmental Organization
NSP	National Solidarity Program
PAIDAAR	Participatory Action for Integrated Development Assistance to Areas of Return
PHVCA	Participatory Hazard and Vulnerability Capacity Assessment
PUNO	Participation UN Organization
SHC	Sub Healthcare Centre
WASH	Water Sanitation and Hygiene

1. PHVCA (Participatory Hazard, Vulnerability and Capacity Assessment)

The PHVCA workshop is a community-based discussion that engages Community members to find sustainable solutions for IDPs, returnees, and host communities. It covers aspects such as community history, demographics, and access to essential services, while also assessing hazard-prone and vulnerable areas. The process identifies existing capacities within the settlement to support effective programming that improves living conditions and upholds the rights of all groups involved.

1.1. Objectives of the PHVCA

- **Understand Socioeconomic Background:** Identify the socioeconomic profile of the settlement to understand how social and economic factors shape vulnerability and capacity.
- **Assess HLP Needs:** Determine the Housing, Land, and Property (HLP) faced by residents in informal settlements.
- **Conduct Stakeholder Analysis:** Identify and define roles, interests and influence of key stakeholders within the community.
- **Evaluate Major Hazards:** Assess the primary hazards and disasters affecting the community.
- **Identify Vulnerabilities and Capacities:** Analyze vulnerabilities, as well as available capacities, resources, and coping mechanisms.
- **Rank Hazards:** Establish a hazard ranking based on their likelihood, frequency, and potential impact on the community.
- **Examine Hazard Impacts:** Identify the effects of various hazards and disasters on people's lives.

1.2 Methods

The assessment follows workshop principles and is conducted through Focus Group Discussions (FGDs), a qualitative method used to gather detailed input from diverse community members. FGDs provide an open space for participants to exchange views, share experiences, and build a shared understanding of key issues. The PHVCA process is organized into structured steps, from planning to implementation, to ensure meaningful community engagement and accurate data collection. The steps of the assessment are outlined below.

1.3 Steps for Implementation of the Workshops

STEP (1): Presentation of the Project to the Community

The first step is to introduce the PHVCA to the community, explaining its purpose and overall process.

STEP (2): Focus Group to Identify Socio-Economic Characteristics of the Community

In this step, a focus group is organized to gather key information on the community's socio-economic conditions, including:

- Demographics: Population, age, gender, income, education, employment.

Vulnerable Groups: Elderly, children, people with disabilities, and low-income households.

Cultural & Social Factors: Traditions, social structures, and relationships influencing coping mechanisms.

- Infrastructure & Resources: Transportation, healthcare, schools, communications, and other essential services.

STEP (3): Stakeholder Analysis

Stakeholder analysis identifies the individuals, groups, and institutions involved in disaster risk management. It includes:

- Stakeholder Identification: Mapping actors such as authorities, NGOs, community groups, and emergency responders.
- Roles and Responsibilities: Defining each stakeholder's role in hazard management and response.

Influence and Impact: Assessing how much influence stakeholders have on preparedness and decision-making.

- Collaboration Opportunities: Highlighting areas for partnership to strengthen community resilience.

STEP (4): Hazard Assessments

Hazard assessment identifies and evaluates the risks the community faces from hazards such as floods, earthquakes, or droughts. It includes:

- Hazard Identification: Using historical data, scientific information, and local knowledge to determine key hazards.

Hazard Mapping: Locating areas most at risk (e.g., flood zones, landslide prone areas).-prone areas).

- Probability & Impact: Assessing how likely hazards are and the severity of their potential effects.
- Local Knowledge: Incorporating community experiences and observations to validate and strengthen the assessment.

STEP (5): PHVCA Mapping of Hazards, Vulnerability, and Capacity

This step produces a comprehensive map combining hazards, vulnerabilities, and capacities. It includes:

Mapping Hazards: Marking at risk areas using data from hazard assessment using data from the hazard assessment.

- Identifying Vulnerabilities: Highlighting groups and locations most at risk based on socioeconomic factors and exposure.

Assessing Capacities: Identifying community strengths and resources such as volunteer groups, early warning systems, and shelters.

Integrated Map: Creating a single visual map that brings together hazards, vulnerabilities, and capacities to support clearer decision-making.

2. Executive Summary

Wazir Khan Jam is a long-established settlement named after Wazir Khan, son of Shir Mohammad Khan, a respected landowner who helped shape the community. Residents, who settled permanently during the time of Zahir Shah, shifted from a nomadic lifestyle due to access to land and agriculture. The settlement now includes about 600 households: 381 local families, 150 returnees from nearby provinces, 40 IDP households, 29 returnees from Pakistan, and 33 women headed households.

Most returnees own land for housing and farming, while around 40 IDP families have land only for shelter. Agriculture is the main livelihood, with over 2,000 jeribs of irrigated and 600 jeribs of rainfed land producing wheat, sesame, corn, vegetables, fruit, and supporting small livestock. Unemployment is high, rising above 70% in winter, particularly affecting youth. Skilled workers in masonry, carpentry, and mobile repair lack tools, while women show interest in tailoring, pickle making, dairy processing, and poultry if provided training and support.

A newly established SubHealth Centre (SHC), supported by Bakhtar Development Network (BDN), offers OPD, gynecology, vaccinations, and basic care, but operates from three small rooms in a donated home and lacks adequate WASH facilities, electricity, staffing, and medical supplies.

Education access is limited to one overcrowded primary school with four teachers for about 300 students and insufficient WASH, heating, cooling, and electricity. Two madrassas serve roughly 200 learners. WASH conditions are critical: only 2 of 14 hand pumps installed under the NSP still function, forcing about 90% of households to rely on untreated canal water.

Most shelters are mud structures, with only 5% built of masonry or concrete. Around 40 households require new shelters or major repairs, and more than 30 need rehabilitation but lack financial means. The settlement is not connected to the electricity grid, roads remain unpaved and in poor condition, and Salam is the only reliable mobile network.

Overall, Wazir Khan Jam faces significant challenges in shelter, WASH, health, education, and livelihoods, yet remains socially cohesive and willing to participate in development initiatives if provided appropriate support.

3. Socio-Economic Background

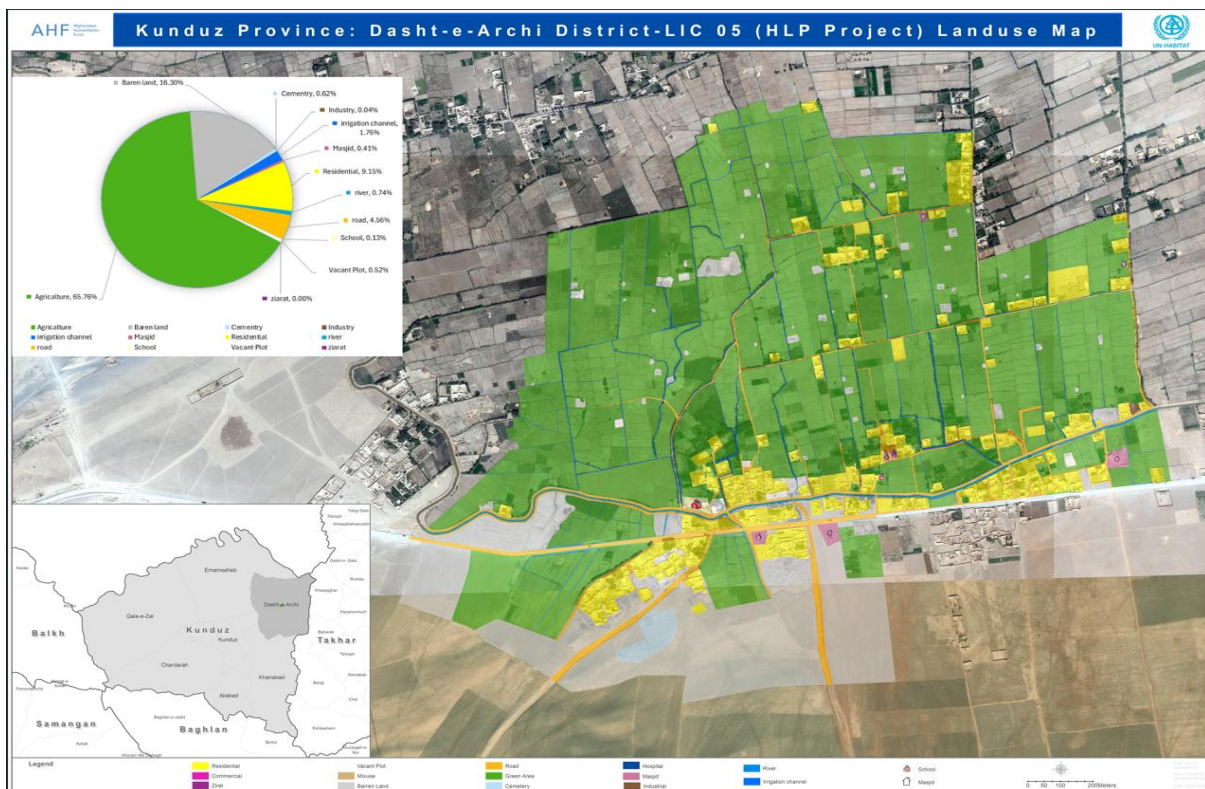
Wazir Khan Jam relies heavily on agriculture and daily wage labor. Farming is the main livelihood, but productivity is limited by poor access to improved seeds, fertilizers, equipment, technical skills, reliable irrigation, and increased crop diseases and pests.

Seasonal unemployment is high, especially in winter, and youth are the most affected. Skilled workers lack tools and demand for their services, while women earn small incomes through tailoring, pickle making, dairy processing, and poultry, though these activities require further training and resources. The settlement is not connected to the electricity grid. Families use small solar panels when affordable, while others depend on battery lights, candles, or kerosene. Biomass and animal waste are the main fuel sources. There is no electrified commercial area, and the roads remain unpaved and in poor condition. The community is located about one mile from the Dasht-e Archi–Kunduz City Road, which is still under construction

Overall, the socio-economic situation is marked by reliance on subsistence agriculture, limited infrastructure, restricted access to energy, and minimal essential services, leaving the community highly vulnerable.

3.1 Geographical Location and Land Use

This settlement covers a broad area of farmland. Approximately 1,932,134 square meters are used for agriculture, about 343,812 square meters are residential, and another 504,380 square meters are rainfed (*alimi*) land.



Map 1: Land use of Wazir Khan Jam settlement

Table 1: This table shows the land use in the settlement

Total area (<i>in m²</i>):	2,780,326
Residential Areas (<i>in m²</i>):	343,812
Commercial Areas (<i>in m²</i>):	-
Recreational Areas (<i>in m²</i>):	-
Lalmi Land Areas (<i>in m²</i>):	504,380
Agriculture Land (<i>in m²</i>):	1,932,583

3.2 Demographics Characteristics of the Community

In this settlement, many households were displaced over the years to Kunduz city, other nearby provinces, and even to Pakistan due to conflict. After the regime change, most people returned to Archi district, their original home, while some returned after being forcibly removed from Pakistan. According to community elders, the settlement now consists of 381 local hhs, of which 150 hhs were displaced to nearby districts and provinces and returned about three years ago, 40 Internally displaced people (IDPs) hhs who arrived from other districts, and 29 hhs recently returned from Pakistan following forced eviction. In total, around 600 households live in the settlement, including 33 women-headed households from the host community.

Table 2: This table summarizes the population composition in the settlement

Category	Quantity	Percentage
Total Population	7800	100%
Women	4100	53 %
Men	3,625	47%
Households		
Total HHs	600	100%
IDPs HHs	40	7%
IDP returnee HHs	150	25%
Returnees HHs	29	5%
Host Communities HHs	381	63%
Special Groups		
Women-headed Households	33	Counted in above categories
People with Disabilities	21	
Elderly (Aged 65 or above)	50	

3.3 History of the Settlement

The settlement is named after Wazir Khan, son of Shir Mohammad Khan, a respected community leader and the original landowner in the area. Shir Mohammad Khan distributed most of the land among residents, and after his passing, the community appointed Wazir Khan as their leader due to his trustworthiness and dedication to addressing local issues. Wazir Khan died approximately 12–13 years ago.

Residents have lived in this settlement since the time of Zahir Shah. Before settling here, many lived in Quetta, Kandahar, Helmand, and Faryab. Historically, they were nomadic, moving in search of grazing land. Kunduz, with its abundant land and low population at the time, provided

ideal conditions for permanent settlement, and land allocations by the rulers enabled the community to establish roots.

Most returnee households now have land for both shelter and agriculture. In addition, around 40 IDP households have arrived from surrounding provinces over the past 3–4 years; these families have land for shelter but typically not farming.

Overall, the settlement is characterized by strong social cohesion and positive relationships among residents.

3.4 Access to Job and Livelihood

Most residents of this settlement rely on agriculture as their primary source for livelihood, while some work as daily wage laborers. Men are primarily engaged in physically demanding work such as livestock farming, agriculture, and construction to support their families. Women generally handle domestic tasks, including cooking, childcare, and caring for household livestock such as cows, goats, and sheep. Some women also participate in small-scale poultry farming or assist men with agricultural work.

Many returnee households have access to land for both shelter and agriculture, while others only possess land for housing and must rely on daily wage work in the district or near Kunduz City. Households without agricultural land often keep livestock as a modest source of income. Overall, limited resources make it challenging for families to meet their needs.

Residents possess a range of skills, including mobile phone repairing, masonry, carpentry, and other vocational trades, that could improve their employment prospects if supported with the necessary tools and equipment. Women have expressed willingness to participate in vocational activities such as tailoring, stone crafting, jam and pickle production, and poultry farming if they receive proper training and support. The community includes three skilled tailors along with approximately 20-30 learners, 3-4 women engaged in pickle production, and about 5-10 women involved in dairy processing.

The primary market for residents' agricultural products is the district center, though some farmers sell crops in Kunduz city, approximately 35km away, as well as in nearby provinces. Despite the community's engagement in agriculture and wage labor, the settlement's remote location and limited commercial activity contribute to persistently high unemployment. Stable job opportunities are scarce, with unemployment affecting up to 30% of the population, mostly youth, and rising above 70% during winter months when farming activities decline.

Table 3: Distance of school and other services from the settlement

Public Services	Distance from settlement in (KM)
School	Within the Center of settlement
Sub-Health Center (SHC)	Within the Center of settlement
Market	There is no market within the settlement, and the residents go to the district center for groceries shopping etc. which is around 10-11 Km
Highway (Dasht-e-Archi- Kunduz)	0.5 -1Km

Water reservoir	No water supply network existing
Police Station	The Police station is in the district center which is 10-11km away.
Dasht-e-Archi District City Center	The nearest city center is Dasht-e-Archi district city 10-1km away.

3.5 Access to Health

Until recently, the settlement had no healthcare facility, and residents had to travel about 11 km to the CHC clinic in Dasht-e-Archi district, a difficult journey due to unpaved and poorly maintained roads. A Sub Health Centre (SHC) has now been established within the settlement, providing essential medical services. The clinic is registered with the Kunduz Directorate of Public Health, funded by the Afghanistan Humanitarian Fund (AHF), and implemented by Bakhtar Development Network (BDN), which has supplied basic equipment and staffing. -e-Archi district, a difficult journey due to unpaved and poorly maintained roads. -Health Centre (SHC) has now been established within the settlement, providing essential medical services. The clinic is registered with the Kunduz Directorate of Public Health, funded by the Afghanistan Humanitarian Fund (AHF), and implemented by

The SHC currently offers outpatient (OPD) care, gynecology services, vaccinations, and other basic healthcare support. Currently, the clinic does not have a dedicated building. The land has been allocated (waqf) by the Arbab of the settlement, Mullah Noor Mohammad, and the clinic is temporarily operating in three rooms of his residence. Although these rooms are in poor condition and not suitable for a healthcare facility, they remain the only available option at the moment.

The clinic has no WASH facilities and does not have access to electricity. Since its opening a week ago, it has been serving not only residents of the settlement but also people from surrounding communities. Both men and women have equal access to the services provided.



Sub-Health Center of this settlement

3.6 Access to Education

The settlement has only one primary school, attended by both boys and girls. Four teachers are responsible for teaching approximately 300 students, including children from neighboring areas. This is the only functional primary school in the settlement. Although the school building was originally well constructed, it has deteriorated over the years due to prolonged conflict. The school has a single well that provides safe drinking water, but it lacks electricity and has limited WASH facilities



Primary School in the settlement

The school also faces a shortage of classrooms and lacks proper access routes. Students endure harsh winter and summer conditions without any heating or cooling systems, and there is an ongoing shortage of books, stationery, and teaching staff. Since the school provides only primary-level education, students must travel more than 10km to Dasht-e-Archi district city to attend middle and high school. This long and difficult commute often results in high dropout rates. Currently, there are no students with disabilities enrolled, and the school lacks facilities or resources to support children with special needs. In addition, the settlement has two madrassas—one registered with the Directorate of Education and one unregistered—providing religious education to approximately 150 boys and 50 girls.

3.7 Access to WASH

The residents of this settlement primarily rely on water from Nahr-e-Jadid, an irrigation canal intended mainly for agricultural use and generally unsuitable for drinking. Some households boil canal water before consumption. Around 10 years ago, 14 hand pumps were installed under the National Solidarity Program (NSP), but most of them are now non-functional. Only two pumps remain operational, providing clean water for approximately 60 households, or about 10% of the population. The remaining 90% depend on canal water, often collecting it through shallow trenches and allowing sediment to settle before using it for drinking, cooking, and cleaning.



Water resources in the settlement.

Deep wells in the settlement reach depths of 40–50 meters, with the water table typically beginning at 20–25 meters below ground. There is no formal water supply network, so most residents rely on the Nahr-e-Jadid canal and the 2 functioning NSP wells. Water quality varies across the settlement, with deeper wells generally producing better-quality water.

Women and children are primarily responsible for collecting water from the canal. Although the canal is located nearby, it runs alongside a busy road, creating safety and dignity concerns for those who fetch water. Women also wash clothes and carpets along the canal, where the ground is uneven and muddy. The lack of privacy makes them feel uncomfortable carrying out these tasks in such an exposed public space.



Bathrooms in poor and unhygienic conditions in the settlement.

Indoor WASH facilities in households are very basic and inadequate. Most homes rely on simple latrines that lack wash basins, proper soap, and handwashing facilities. There are no public washrooms in the settlement. Men often practice open defecation, while women use mud latrines that offer little privacy and lack essential amenities. Many households, often

consisting of 2–4 families, share one or two latrines that do not meet basic hygiene or comfort standards, with cloth curtains used instead of proper doors.

WASH improvements could include establishing a water supply network and water tower, repairing existing hand pumps, and constructing household or communal washrooms equipped with toilets, wash basins, and proper privacy measures, including separate spaces for men and women. Strengthening community hygiene awareness is also essential. Women need a safe and comfortable place to wash clothes and carpets; creating a dedicated washing area with a concrete floor would significantly improve privacy, hygiene, and overall ease of use.

Table 4: Detailed categorization of the water and sanitation conditions in the settlement

Category	Details	Access
Water sources	Open wells	0%
	Hand-pump	10%
	Canals	90%
Sanitation facilities	Homes with proper sanitary bathrooms and toilets	5%
	Homes with unsanitary facilities (lack privacy, roofs, and doors)	95%

3.8 Access to Agriculture & Livestock

The settlement has over 950 jeribs of irrigated land with reliable water sources, in addition to approximately 250 *jeribs* of rainfed (*lalmi*) land. Residents primarily cultivate wheat, sesame, corn, mung beans, various vegetables, and a range of fruits. Irrigation is mainly supplied through the Nahr-e-Jadid canal. Agricultural production faces several challenges, including crop diseases such as *Shakarak*, as well as locust and worm infestations, all of which significantly reduce yields. Inefficient irrigation



Irrigated lands in this settlement

infrastructure—characterized by unpaved canals and damaged intake and distribution points—further limits productivity and leads to substantial water and time losses.

There are no formal livestock farms or poultry operations in the settlement; however, households maintain small-scale livestock, including cows, sheep, goats, and chickens, within their homes. These animals were vaccinated last year with support from the Dutch Committee for Afghanistan (DCA).

Farmers report that the lack of improved seeds, chemical fertilizers, pesticides, modern machinery, and technical skills, along with frequent agricultural diseases, are major barriers to production. Most agricultural activities are carried out by men, while women primarily manage livestock within the home.

Residents express a strong need for technical training and skills development, improved access to agricultural machinery and essential tools, and the provision of pesticides to protect crops from pests and diseases.

3.9 Housing and Tenure Security

About 95% of homes are constructed from mud, while around 5% are built with masonry or concrete. Current shelters do not adequately meet the community's needs.

Many households host multiple families but have very limited living spaces. Most residents are unable to upgrade or reinforce their shelters due to financial constraints.

Many returnees, including those returning from other countries or displaced from within Afghanistan, do not have homes of their own. Most are staying with relatives, while others are renting. Shelter assistance is needed for families living with host relatives, as well as those residing in overcrowded or damaged shelters. Any support should also include the provision of adequate WASH facilities

Recent returnees are among the most vulnerable groups in the settlement, as many of them are in urgent need of shelter. Most residents possess legal land documents, while some rely on customary papers. The majority of returnees also have land, although a few do not own agricultural plots. Overall, both IDPs and returnees generally have valid documentation for the land they occupy.



Shows the residential mud houses in this settlement

Despite having land where they could potentially build, many families lack the financial capacity to construct adequate shelters. As a result, most returnees require full shelter support, while others need assistance with repairs.

In total, around 40 households require new shelters or rehabilitation, the majority of whom are returnees. The host community is also affected, with more than 30 homes in need of repairs due to damage sustained during past conflict. Approximately 6-8% of residents are currently renting. There have been no eviction threats or warnings reported in this area.

Around 80% of residents possess Tazkiras, although only about 20% of women have one. A small number of residents also hold other forms of documentation, such as passports, driving licenses, or vaccination cards.

Table 5: Detailed housing situation in the settlement

Category	Details
House construction types	Mud (95%), Masonry and concrete (5%)
Space in houses	Insufficient for household members
Conditions of houses	Vulnerable to disasters (earthquakes, floods, etc.)
Home ownership	Most residents have, but many returnees and IDP, while returnees do not.
Ownership documents	Most of the residents have "Regulatory documents" (<i>Hukmi</i>) originally issued by the ruler of that time, while some have legal and customary documents.
Women's property ownership	Most residents hold old regulatory documents issued by the authorities of that period, while others have formal or customary papers.

3.10 Access to Other Services

This settlement has no access to the electricity grid, so households rely on small solar panels when they can afford them. These systems provide only enough power for basic lighting. Families who cannot purchase solar panels use battery-powered torches, candles, or kerosene lamps. For cooking and heating, residents primarily depend on biomass, and some also use animal waste as fuel. There is no commercial area within the settlement. The newly established SHC clinic has recently begun operating, but it also lacks any form of power supply



Unpaved roads in this settlement

All roads and sub-roads in the settlement are unpaved and in poor condition. The settlement is located approximately 1km from the main road that connects Dasht-e-Archi district with Kunduz city, which is still under construction. In terms of telecommunications, Salam is the only network that provides consistent coverage, while other mobile networks function only in certain areas.

4. Venn Diagram and Stakeholder Analysis

This section provides an overall analysis of stakeholders in the Wzir Khan Jam settlement. The collected information is organized according to the types of assistance provided, the benefits delivered, and the organizations currently active in the area. Data is presented using tables and diagrams to support clarity and understanding.

4.1 Key DfA Stakeholders (Organization in the Community)

During the discussions, the projects and support provided by different stakeholders, including institutional and aid organizations, to the respective communities were mapped and analysed.

Table 6: Key DfA services/representative in the community

Name	Number (Members or units, as Applicable)	Stakeholders	Contact person and phone number/ e-mail	Role In hazard management/ mitigation
Primary school		Education		Providing educational services
SHC		Health		Providing health facilities

4.2 Key Non-Governmental Stakeholders

Civil society organizations, social groups, and private institutions that have provided services to the residents of this region include the following:

Table 7: Key non-governmental stakeholders

Office Name	Major Participation/Activities	Contact person and phone number/e-mail
AKF	Roads graveling and cleaning of Irrigation Canals	-
BDN	Provide medical services and facilities and hired medical staff	-
DCA	Provided vaccination to livestock last year	

4.3 Type of Benefits

This section evaluates the benefits received by the community from the assistance provided. The table below outlines the types of support delivered and their perceived impacts, based on the information collected:

Table 8: Benefits of Assistance for the Community

No	Type of Benefits	Who (agency/actor) provided the services and when	Perceived Benefits/services delivered (relative score of preference)	Constraints in accessing services	Suggestions
1	Road graveling & canal cleaning	AKF, 2025	After road graveling, the movement is now improved, and after cleaning the irrigation canal, the efficiency of water has been increased	No, there is no constraint of any type	Remaining roads should also be graveled or concrete
2	Providing healthcare facilities	BDN, 2025	The residents have access to basic health services	No, there is no constraint of any type	Construction of New Building for Wazir Khan Jam SHC
3	Providing vaccination for livestock	DCA, 2024	The community's livestock were protected from diseases	No, there is no constraint of any type	Vaccinations should be provided on a regular basis

4.4 Venn Diagram

The main purpose of a Venn diagram is to visually represent the relationships between different sets by showing areas of overlap and separation. It helps illustrate shared and unique elements among groups, making it easier to compare characteristics, identify commonalities, and understand the connections or distinctions within the data.



5. Hazard Assessment Matrix

At this stage, an in-depth discussion was held with the LIC members and the female sub-committee to identify and understand the major risks within the settlement, with a focus on the circumstances surrounding these events. The characteristics of key hazards and disasters were analyzed, and some were compared using scoring methods to establish risk priorities. The identified risks include:

- **Natural hazards:** Floods, earthquakes, storms (heavy wind and rain), and drought.
- **Health risks:** Diseases, the long distance to clinics, and the lack of healthcare facilities.
- **Infrastructure challenges:** Unpaved roads, low-resilience housing, cracked houses, and inadequate sanitation facilities (WASH).

Economic and social risks: Unemployment (affecting men, women, and children), child labor, theft/robbery, and air pollution caused by waste.

- **Resource scarcity:** Insufficient access to water and other essential resources.
- **Fire hazards:** Risk associated with fire incidents

These risks were systematically analyzed and prioritized to better understand the vulnerabilities and challenges present in the community.

Table 9: Hazard matrix shows the impact and the likelihood of the hazards

Impact	5-Critical			<ul style="list-style-type: none"> • Deterioration of water intakes 	<ul style="list-style-type: none"> • Limited access to healthcare facilities • Damaged culverts 	<ul style="list-style-type: none"> • Flood • Lack of safe drinking water
	4-Severe			<ul style="list-style-type: none"> • Locust attack on crop 	<ul style="list-style-type: none"> • Lack of electricity • Damaged irrigation canals • Unemployment 	<ul style="list-style-type: none"> • Unpaved roads • Lack of adequate shelter • Agriculture diseases
	3-Moderate				<ul style="list-style-type: none"> • Livestock Diseases 	
	2-Minor					
	1-Negligible					
		1- Very unlikely	2- Unlikely	3-Moderately	4-Likely	5-Very likely
Likelihood						
Likelihood: 1= Very unlikely (0 – 20%) 2= Unlikely (20 – 40%) 3= Moderately likely (40 - 60%) 4= Likely (60 - 80%) 5= Very likely (80 – 100%)				Impact: 1 = Negligible (0-5% of affected families) 2= Minor (5-10%) 3= Moderate (10-20%) 4= Severe (60 – 80%) 5= Critical (80 – 100%)		

Damaged irrigation canals, deteriorated water intakes, and broken culverts have negatively impacted farmland, roads, and homes, often causing water overflow and localized flooding. Agricultural production is further weakened by crop diseases and periodic locust infestations, which reduce both yield and crop quality.

Limited access to safe drinking water has contributed to waterborne diseases such as cholera, while inadequate WASH facilities and poor access to healthcare continue to undermine public health. Unpaved roads hinder movement within the settlement and contribute to increased dust pollution.

Additionally, outbreaks of livestock diseases, including Congo fever, have affected household livelihoods. The lack of electricity further adds to daily hardships, limiting access to lighting, communication, and basic services.

5.1 Hazards Impact

To identify the hazards that put the community at risk, the most vulnerable areas within the settlement were mapped through a participatory exercise. This process helped pinpoint locations that are regularly affected by different hazards. The PHVCA methodology was also applied to assess vulnerabilities and capacities within these hazard zones and to rank the hazards accordingly. The following analysis was carried out with the active participation of community members.



Shows the Nahre Jadid canal in the settlement



Non-functional hand pumps in the settlement

Table 10: Indicates the details of hazard analysis

Hazard	When most likely to occur (month)	Name of vulnerable communities	Vulnerable schools located in the hazard zone	Vulnerable HCs located in the hazard zone	Vulnerable water supply/ sewage/ Electric networks located in the hazard zone	Capacities and coping mechanisms	Rank (based on potential impact/damage)
Flood	April and May	(30 – 35) hhs	NA	NA	NA	To prevent the flood from open ground to entering community a water canal and a protection wall should be constructed	Critical
Limited access to healthcare facilities	All the time	Entire settlement	NA	SHC	NA	Using the small, poorly built, and mud construction of SHC	Critical
Lack of tap water	All the time	Entire settlement	Primary school	NA	NA	Some hands pumps, and canal water	Critical
Deterioration of water Intakes	Rainy seasons	Entire settlement	Primary school	NA	NA	Locally made materials	Critical
Damaged Culverts	Throughout The year	Entire settlement	Primary school	NA	NA	Using existing damaged culverts	Severe
Agriculture Diseases (Shakarak and worms)	May, June, and Nov	Entire settlement	NA	NA	NA	Some farmers apply pesticide at their own expenses	Severe

Unpaved roads	All time	Entire settlement	Primary school	SHC	NA	NA	Severe
Lack of adequate shelter	All time of year	110 HHs	NA	NA	NA	Living with relatives or staying in damaged rooms.	Severe
Unemployment	Spring and Winter Season	30 – 35% of the community	NA	NA	NA	Get loans from relatives	Moderate
Locust attack	April and May	Entire settlement	NA	NA	NA	NA	Severe
Damaged irrigation canal	All time	Entire settlement	Primary school	SHC	NA	NA	Severe
Lack of access to electricity	All times of the year	Entire settlement	NA	NA	NA	Some of the residents rely on solar energy	Severe
Livestock diseases	May to July	Entire settlement	NA	NA	NA	DCA vaccinated the livestock	Moderate

5.2 Disaster and Impact

Major disasters that have occurred in this settlement covered under this LIC, along with their impact vulnerabilities, are listed below.

Table 11: Disaster and impact

Disaster	When it Occurred (Month and Year)	No families affected (esp. Productive assets)	No deaths or injured	No of the houses damaged	No schools affected	No of the HCs affected	Other infrastructure affected: roads, bridges, electric lines, water supply lines, and others (specify damage)
Agriculture diseases	May, June, and Nov. 2023	300 – 400 HHs	NA	NA	NA	NA	Affected the agricultural productivity of the community
Locust attack	3 years back	300 – 400 HHs	NA	NA	NA	NA	NA
Flood	April. 2024	30 – 35 HHs	NA	NA	30 – 35 HHs	NA	The roads and culverts were damaged
Livestock diseases	May and June. 2024	200 300 HHs	NA	NA	NA	NA	NA

5.3 Changes in Settlement & Environment

This assessment highlights how the severity of hazards has shifted over time and the resulting impacts.

Table 12: Analysis of impact and intensity of the hazards in the settlement

Types of hazards	How has the hazard changed (Severity and duration)?	Warning signs	How long does it take before awareness of danger until it occurs?	How long does it last?	Has the danger caused damage to house construction?	Are the streets damaged?	Which social groups are vulnerable?	Do effects get better or worse over time?	Are there new construction or changes in land use?	Changes people made to reduce risk.	Changes stakeholders made to reduce risk?
Flood	Increase	When rainy seasons last long	10 – 20 days	Until the rainy season end	Damage land and houses	Damage roads	Entire settlement	Worse	No	Nothing	Nothing
Limited access to healthcare facilities	Increase	NA	NA	NA	NA	NA	Entire settlement	Worse due expansion of population	NA	NA	BDN provided some medical equipment
Lack of tap Water	Rises with the growth of the population	NA	NA	Entire year	NA	NA	Women, Children & elders	Worse due to the increase of population	There are few hand pumps, but there are not enough	Nothing	Nothing
Deterioration of Water Intakes	Increase	Rainy seasons	NA	NA	NA	yes	Entire settlement	Worse	NA	NA	NA
Damaged Culverts	Increase	Rainy seasons	NA	NA	NA	NA	Entire settlement	Worse	NA	NA	NA
Agriculture diseases	Its intensity and duration increased compared to previous years	When spring and summer starts	NA	Until crop cultivation	NA	NA	Families	Worse	No	People try to apply pesticides	Agriculture Department provided pesticides
Unpaved roads	Getting worse	NA	NA	Spring and summer	NA	Yes	Entire community	Worse	AKF graveled some roads	NA	AKF graveled some roads

Lack of adequate shelter	Getting worse due to recent returnees	NA	NA	NA	NA	NA	IDPs and returnees	Worse	NA	NA	NA
Unemployment	increase	Fall and winter	NA	Until the winter ends	NA	NA	30 -35%	Worse due to new HHS returned	NA	Get loan from relatives	Nothing
Damaged irrigation canal	It has increased due to climate change.	Rain seasons	10-15 days	Until the rains stop	Damage the agriculture lands	sometime cause to flow to the roads	Entire Community	Worse	nothing	nothing	nothing
Lack of access to electricity	Increase	All time of the year	NA	All time	NA	NA	Entire community	worse	NA	Using solar energy	nothing
Locust attack	It varies from year to year. Last two years the severity was less but three years back it was very intense	No warning was provided	No specific duration	NA	NA	NA	Farmers	NA	NA	NA	No interventions
Livestock diseases	Increased	When spring and summer starts	NA	Till end of the season	NA	NA	Households that have livestock	NA	NA	Some of the households vaccinate their livestock at their own expenses	NA

5.4 Seasonal Calendar Hour Clock Experience

Seasonal analysis is conducted to identify variations in seasonal factors and their relationship to different events. The months during which these events occur were examined and compared to understanding seasonal patterns and their impacts.

Table 13: Seasonal calendar for hazard analysis

Hazard	Spring			Summer			Fall			Winter		
	April	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Flood												
Limited access to healthcare												
Agriculture disease												
Lack of Access to WASH												
Livestock Diseases												
Unpaved Road												
Damaged irrigation canal												
Lack of electricity												
Unemployment												

Color code explanation:

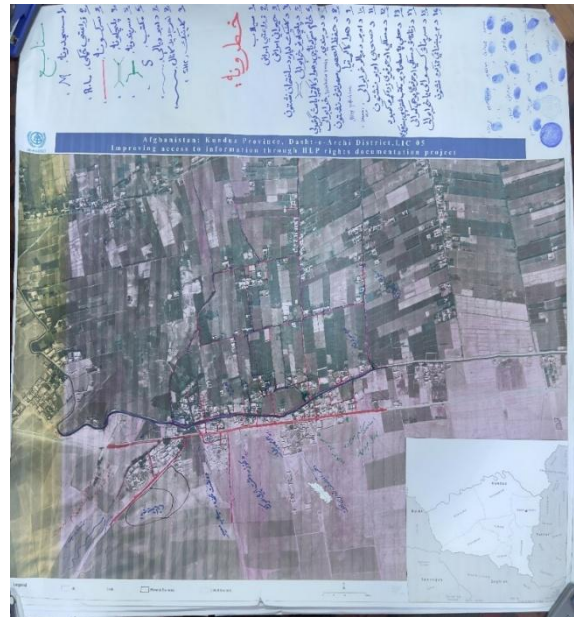
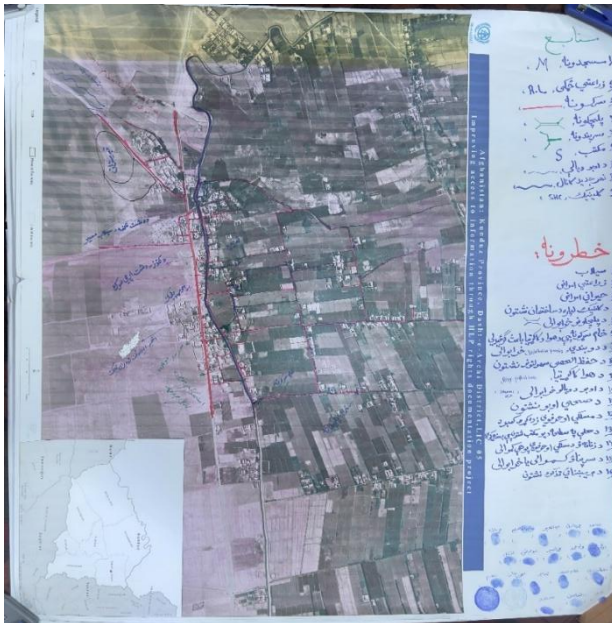
- Red for electricity shortages.
- Blue for water-related risks, such as floods and drought.
- Light blue for wind-related risks.
- Orange to indicate access or infrastructure issues.
- Green for health and disease-related risks.
- Yellow for challenges related to unpaved roads and transportation.
- Grey for environmental risks like air pollution.
- Brown for resource shortages such as lack of food or money.

6. Hazard Map, Vulnerability, Capacity, And Safety Understanding.

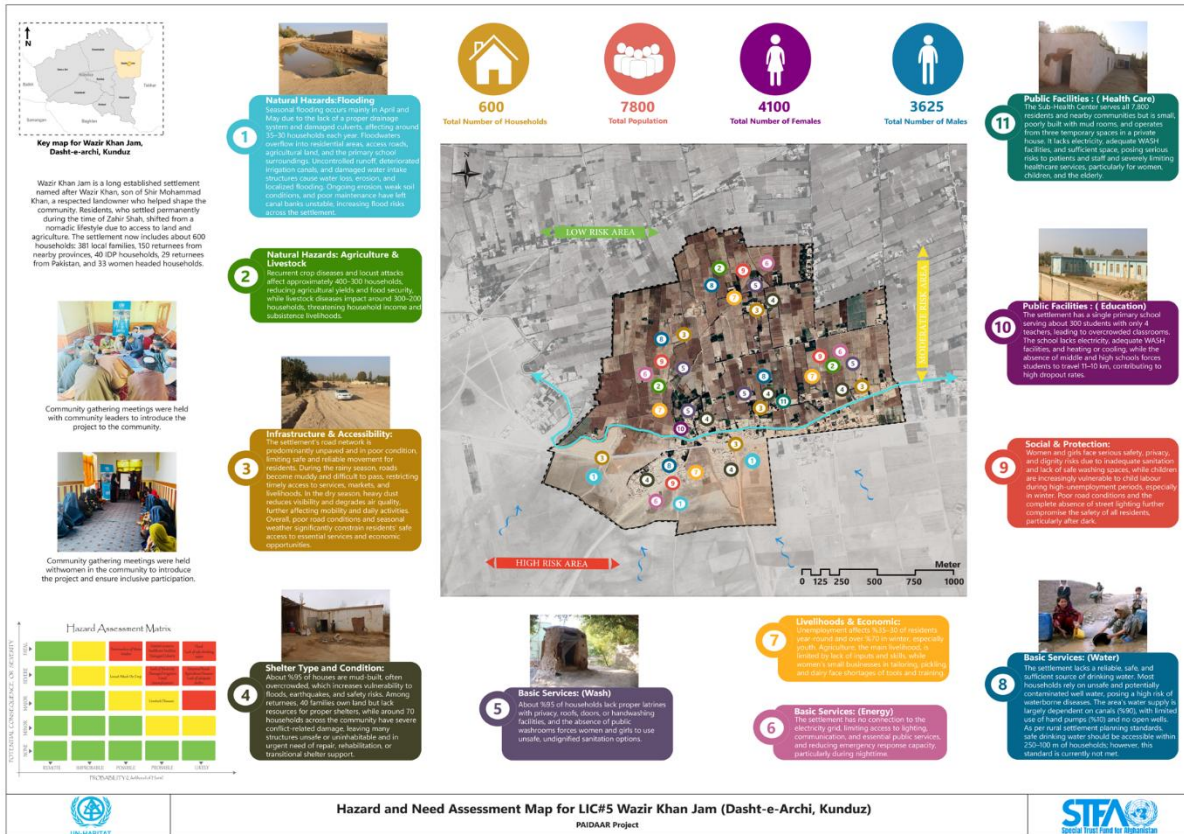
On the main map, participants identified and marked the locations of hazard-affected zones, highly vulnerable and unsafe areas, commercial areas, available resources and capacities, as well as accessible routes. Assessing environmental and climatic risks—along with risks affecting vulnerable groups, resources, and local capacities—is essential for understanding the wide range of challenges faced by residents. It also highlights that women and men often identify different risk points and face distinct challenges, underscoring the importance of inclusive, gender-sensitive analysis.



PHVCA workshop in the settlement.



Map 2: Map of the settlement where community engagement took place on the ground/Hazard map



Map 3: Map of Hazard and need assessment for the settlement

The Hazard and Needs Assessment Map for Wazir Khan Jam Settlement in Dasht-e-Archi District, Kunduz Province presents a detailed spatial overview of population characteristics, risk exposure, and priority humanitarian and development needs.

The map demonstrates a color-coded risk classification system to clearly illustrate hazard severity across the settlement. Red arrows indicate high-risk areas, primarily concentrated in zones exposed to recurrent threats of flooding, while yellow arrows represent moderate-risk areas, and green arrows show relatively low-risk zones. This visual approach enables rapid identification of priority areas for intervention and risk-informed planning.

A range of natural and human-induced hazards has been identified and mapped. Key natural hazards include seasonal flooding, which threatens shelters, access routes, agricultural land, and agricultural and livestock diseases that undermine food security and household livelihoods. Human-induced hazards are equally prominent, particularly the poor condition of infrastructure and limited accessibility, restricting movement and access to markets and services. The assessment further highlights lack of and substandard shelter conditions, alongside critical gaps in basic services, such as WASH, energy, and access to safe drinking water. Livelihood and economic vulnerabilities are widespread. Social and protection concerns are also present, compounded by the poor condition of public facilities, including inadequately equipped schools and limited healthcare services.

Overall, the map underscores the interconnected nature of risks in Wazir Khan Jam Settlement and emphasizes the need for integrated, multi-sectoral interventions to reduce vulnerability, enhance resilience, and improve living conditions for affected communities

7. Community Walk

Following the workshop, UN-Habitat staff and community members conducted field visits to observe local resources, and the vulnerable parts of the community were exposed to various risks. While walking through these areas, the team engaged in discussions with residents. During the visits to hazard-prone locations, they also discussed risk management strategies and potential measures to reduce the impacts of future hazards.



Community walk, people are showing the location of resources, features, and landscapes

8. Community Action Plan (CAP)

A Community Action Plan is a planning tool created with the community to outline their key needs, challenges, and possible solutions. It is developed through a participatory process that brings together men, women, youth, elders and vulnerable groups. Through a series of organized discussions, the community identifies problems, agrees on priorities, and decides which actions they can take on their own and where external support is needed. The plan is shaped step by step with full involvement from community members and facilitators. The process is conducted as below:

1. CAP Training

Provided training to LIC members on the purpose, objective, and expected benefits of the CAP.

2. Needs assessment / problem identification

Sub-committees identified and documented projects across sectors, including WASH, health, education, livelihoods, shelter, infrastructure, and social services.

3. Project prioritization

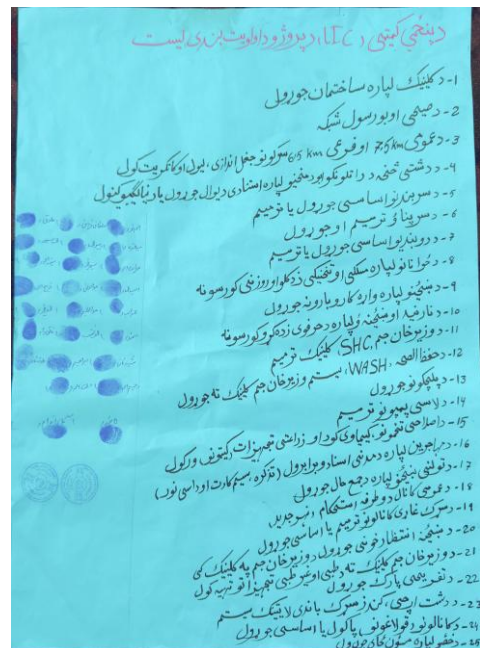
Convene the LIC to review all problems and use a participatory voting or ranking process to select the most urgent, important, and feasible issue

4. Develop the action plan

Turn priorities into clear, actionable that define who is affected, what resources already exist, the level of priority, and the exact location to support decision making

5. Validation and approval

Present the draft CAP to the wider community for review, revise if needed, and secure formal endorsement to ensure ownership and accountability.



CAP review, validation, and endorsement by LIC members

8.1 Urgency Levels in Community Action Plan

Communities face a range of challenges that require prioritization based on urgency.

High urgency needs typically involve critical services such as healthcare, clean water, safe shelter, and essential infrastructure.

Moderate-urgency projects focus on improving resilience and quality of life. Examples include repairing water systems, enhancing transportation through drainage solutions, and supporting agriculture with better tools and resources.

Low-urgency initiatives aim to strengthen social well-being and long-term development. They often include programs for economic empowerment, community spaces, and safety enhancements such as street lighting.

Prioritizing actions by urgency ensures that immediate risks are addressed first while laying out the foundation for sustainable growth and improved living conditions. Below, the CAP is presented starting from high urgency to low urgency.

8.2 Gender Sensitivity

Throughout each stage of the CAP, facilitators encourage inclusive participation by creating safe spaces where women can speak openly, especially in contexts where they may face cultural or social barriers. This approach helps uncover specific challenges that may otherwise remain unnoticed, such as unequal access to water points, safety concerns related to lighting and mobility, or gender related gaps in livelihoods and education. By mainstreaming gender considerations into needs assessment, project prioritization, and action planning, the CAP contributes to equitable decision-making and promotes solutions that improve the wellbeing of the entire community. Ultimately, gender sensitive planning strengthens ownership, enhances accountability, and supports more sustainable and inclusive community development.-related gaps in livelihoods and education. By mainstreaming gender considerations into needs assessment, project prioritization, and action planning, the CAP contributes to equitable decision-making and promotes solutions that improve the well-being of the entire community. Ultimately, gender-sensitive planning strengthens ownership, enhances accountability, and supports more sustainable and inclusive community development.

Table 14: High priority projects prioritized by LIC members

Sector	Identified Problem/ Need project	Affected Groups/Beneficiaries	Level of priority	Location (GPS)	Existing resources	Impact of the project	Gender-sensitivity	Target beneficiaries	No. of Votes	
1	Health	Construction of new building for Wazir Khan Jam Sub Healthcare Center (SHC)	Women, Girls, Children, Men and Older	High urgency	36.955638 69.159970	SHC approval obtained; 2,000 m ² land	2,098+ households gain improved access to essential health services.	Improves equitable healthcare access for all genders and ages, especially maternal and child health.	600 HHs	Male and Female Sub-committees 38M, 20F
						Three Room				Male and female sub-committee 27M, 11F
						Space available for clinic WASH system.				Male sub-committee 25M
2	WASH	Water Supply Network and Water Reservoir Tower	Women, Girls, Children, Men and Older	High urgency	1 (Ismail and Muladad Masjid) and 1 (Wazir Khan, M.Sultan ,M.Omar and Allah Noor Masjid)	Land for water Tower, Well and Solar system	600 households in Wazir Khan Jam gain safe drinking water through repaired hand pumps, reducing disease and daily hardship.	Improves safe, reliable water access, reducing burden and risks for women and girls, and enhancing hygiene, mobility, and participation in water management.	600 HHs	Male and Female Sub-committees 36M 18F
					36.954295 69.159551	Wells				Male sub-committee 24M
3	Transportation	14km Street improvement (graveling or concrete)	Women, Girls, Children, Men and Older	High urgency	36.955638 69.159970	Existing road	14 km road improves access to work, hospitals, and schools, increasing resilience and opportunity.	Provides safer, faster access to work, school, and healthcare, especially benefiting women and girls.	600 HHs	Male sub-committee 35M
		Construction of 12 Box Culverts			36.955489 69.160153	Existing damaged culverts	Box culvert ensures year-round safe passage, protects farmland, and strengthens community connectivity.			Male sub-committee 24M
4	DRR	Disaster Risk Reduction Structure	Farmers	High urgency	36.954130 69.149379	Place/Land for DRR Structure	Farmland, homes, and Nahar-e-Jadid canal protected.	Protects all community members, including people with disabilities, along with their homes and farms from disaster risks.	600 HHs	Male Sub-committees 33M

Sector	Identified Problem/ Need project	Affected Groups/Beneficiaries	Level of priority	Location (GPS)	Existing resources	Impact of the project	Gender-sensitivity	Target beneficiaries	No. of Votes	
5	Agricultural	Construction and Rehabilitation of Water Intake Structure /Check Dam	High urgency	36.954089 69.157351	1. Existing poor condition water intake	Improved main canal and settlement waterflow control to reduce shortages.	Improves water management and agriculture, boosting food security and reducing women's unpaid labor.	600 HHs	Male Sub-committees 31M	
		40 numbers of Irrigation structures (Diversion Weir / Diversion Dam/ Canal Inlet Gates/ Head Regulator)		Farmers	36.955638 69.159970			2. Locally made diversion weir/ Canal Inlet Gates	600 HHs	Male sub-committees 30M
6	Shelter	Major shelter repair and Permanent shelter	High urgency	36.955638 69.159970	Lands/Plots	70 damaged shelters replaced safe, climate-resilient units.	Improves equitable access to shelter for all, including women headed households.-headed households.	110 HHs	Male Sub-committees 31M 17F	
7	Livelihoods	Safe space	High urgency	36.955638 69.159970	1. Lands/Plot for safe space + Land for Center	Women's washing space improves dignity, comfort, and privacy.	Creates safe, inclusive spaces and strengthens women's and youth economic opportunities through training and business support.	4100 Women and girls	Female sub-committee 15F	
		TVET for Youth			Youth	Youth Trainee		Youth vocational training increases employment and strengthens the local economy.	Youth	Male sub-committees 28M
		Women small business support			Women and girls	Women skilled in tailoring, pickle making, and dairy work but lacking needed tools and materials.		Women supported to start small businesses, boosting family income and inspiring others.	3 skilled tailors (trainers)+ 20-30 (trainees) 3-4 women engaged in processing	Male and female sub-committees 27M 14 F
		Vocational training course			Men, women and girls	Human resources		Women and girls empowered with skills and confidence for economic participation and resilience.	Men, women and girls	Male and female sub-committees 27M 12F

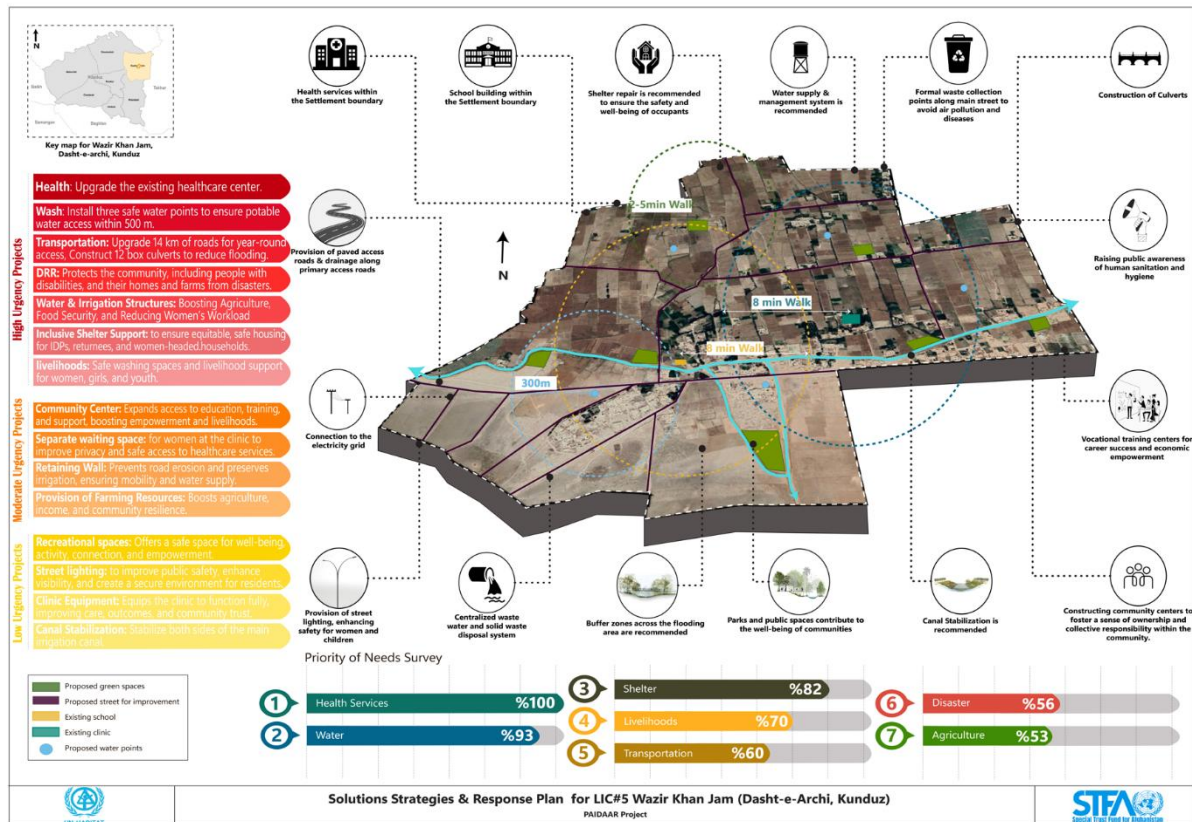
Table 14: Moderate priority projects prioritized by LIC members

Sector	Identified Problems/ Need projects	Affected Groups/Beneficiaries	Level of priority	Location (GPS)	Existing resources	Impact of the project	Gender-sensitivity	Target beneficiaries	No of votes	
1	Agricultural	Providing improved seeds, chemical fertilizers, equipment, and kits	Farmers	Moderate Urgency	36.954857 69.160331	Agricultural land	Boosts agriculture by increasing crop yields, farm incomes, and community economic resilience.	Strengthens agriculture and food security while reducing women's labor burden, and provides women with a safe, private space for healthcare, improving maternal and general health with dignity and privacy.	250 HHs	Male sub-committee 22M
		Roadside retaining walls for agricultural canals	All resident	Moderate Urgency Moderate Urgency	36.953820 69.152796	Canal	Protects the road from erosion and maintains irrigation channels, ensuring reliable mobility and a stable water supply.		600 HHs	Male sub-committee 19M
2	Livelihoods	Support to Providing civil documents for returnees	Cross border and IDPs returnee HHs	Moderate Urgency	36.955638 69.159970		Restores legal identity for returnees through civil documents, enabling access to rights, services, and reintegration.	Civil documents ensure women's equal access to IDs, enabling them to claim rights, access services, and support their families.	70HHs	Male sub-committee 20M
		Community Center for Women	Women and girls	Moderate Urgency	36.955522 69.159786	Land for Center	Expands access to education, training, and social support, strengthening empowerment and livelihoods.	The facility offers safe access to skills training, health services, and leadership opportunities, with flexible hours and childcare.	4100 individuals	Male and female sub-committee 19M 10F
3	Health	Construction of a waiting room for women at the Wazir Khan Jam Clinic	Women and girls	Moderate Urgency	36.955638 69.159970	Wazir Khan Jam clinic has space for waiting room	Improves safe, private, and culturally appropriate access to healthcare, especially maternal and childcare.	It improves safe, private access to healthcare and supports maternal and reproductive health.	4100 individuals	Male and female sub-committees 18M 9F

Table 14: Low priority projects prioritized by LIC members

Sector	Identified Problems/ Need projects	Affected Groups/Beneficiaries	Level of priority	Location (GPS)	Existing resources	Impact of the project	Gender-sensitivity	Action taken by	No of votes	
1	DRR	Nahr Jadid Main Canal – Two-Sided Stabilization	All residents	Low urgency	36.954074 69.158964	Main Canal	Stabilizes both sides of the main irrigation canal in Wazir Khan Jam.	600 HHs	Male sub-committees 16M	
2	Health	Providing medical and non-medical equipment for the Wazir Khan Jam Clinic	All residents	Low urgency	36.955638 69.159970	Wazir Khan Jam Clinic	Equips the clinic to function fully, improving care, outcomes, and community trust.	Clinic project prioritizes safe, reliable healthcare for women and girls, including maternal and reproductive services.	600 HHs	Male sub-committee 15M
3	Livelihoods	Park for women	Women	Low Urgency	36.953088 69.157969	Land for women park	Provides a safe space for well-being, activity, social connection, and empowerment.	Offers a safe, accepted space for women and girls to gather, exercise, and connect, supporting mental and physical well-being and empowerment.	4100 individuals	Male and female sub-committees 13M, 5F
4	Transportation	Street lighting	All residents	Low Urgency	36.953454 69.159437	Road	Street lighting improves safety, extends productive hours, and supports social and economic activity, especially for women and girls.	Enhances safety for women and girls after dark, reducing risks and enabling greater participation in community life.	600 HHs	Male sub-committees 11M

9. Strategic Response Map for Wazir Khan Jam



Map 4: Strategic response map for Wazir Khan Jam Settlement

As per community engagement through established committees based on people's participatory approach, most of the families requested provision of adequate Health facilities and provision of Water supply. Access to proper Shelter, safe space for women, supporting women's small businesses, Vocational training course, roads improvement, rehabilitation of irrigation structures and construction of DRR were prioritized.

Table 15: Solution Strategies (Regulations & Standards)

Education Facilities (Rural Schools)	
Primary School	
Distance	≤ 2–3 km walking distance
Population served	1 primary school per 1,000–2,500 people
Class size	30–40 students per teacher
Infrastructure standards	<ul style="list-style-type: none"> • Permanent classrooms • Separate latrines for boys and girls • Handwashing stations • Safe drinking water • Basic furniture and learning materials

Secondary School (Often serves multiple villages)		
Distance	≤ 5–10 km	
Healthcare Facilities		Basic Level
Distance	≤ 5 km or ≤ 1 hour walk	
Population served	1 facility per 3,000–10,000 people	
Services provided	<ul style="list-style-type: none"> • First aid • Maternal and child health • Immunization • Treatment of common diseases • Health education 	
Staffing	1–2 trained health workers Community health volunteers	
Energy (Electricity)		Social & community gathering facilities
Minimum standards	<ul style="list-style-type: none"> • Health centers: 24-hour power (grid or solar) • Schools: Lighting + basic ICT support • Water points: Solar-powered pumps preferred 	<ul style="list-style-type: none"> • Community centers • Market within reasonable distance (≤ 5 km) • Religious and cultural facilities as locally appropriate
Water Supply (Access & Coverage)		
Distance	≤ 500 meters walking distance Or ≤ 30 minutes round trip	
Population served	1 water point per 250–500 people	
Availability	Minimum 20–50 liters per person per day	
Reliability	Functional at least 95% of the year	
Water Quality (WHO)	<ul style="list-style-type: none"> • Free from fecal contamination (0 E. coli per 100 ml) • Acceptable taste, color, and odor • Protected sources (boreholes, protected wells, springs) 	
Typical Facilities	<ul style="list-style-type: none"> • Hand pumps • Boreholes with solar pumps • Protected wells • Rainwater harvesting (supplementary) 	
Transportation & Roads		
Road Access	All-weather road within 2–5 km of villages	

Road types	Gravel or earth roads acceptable Must be passable year-round for emergency access
Public Transport	Regular transport access at least: 2–3 times per week minimum
Footpaths & Tracks	Safe, well-maintained footpaths connecting Homes → water points → schools → clinics
Sanitation & Waste Management	
Household Sanitation	At least 1 improved latrine per household No open defecation (ODF communities)
Public Facilities	Schools and health centers must have: <ul style="list-style-type: none"> • Gender-separated toilets • Handwashing facilities • Safe waste disposal (especially medical waste)

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This report has been developed under the interagency project “Participatory Action for Integrated Developmental Assistance to Areas of Return (PAIDAAR)”, funded by the Special Trust Fund for Afghanistan (STFA) and is the result of UN-Habitat’s community engagement processes through this project. It presents the findings of settlement-level assessments conducted through participatory methodologies applying the Participatory Hazard Vulnerability Capacity Assessment/PHVCA in Wazir Khan Jam Settlement, Dasht-e-Archi District, Kunduz Province, Afghanistan. This report is part of a series of reports under this project.

The document comprises detailed settlement profiling, hazard and vulnerability assessments, spatial analysis and mapping, and the Community Action Plan (CAP). All components were developed in close consultation with community members represented in the Local Implementation Committees (LICs) to ensure that identified priorities, existing capacities, and proposed interventions accurately reflect local conditions and development needs.

This report is intended to support planning, coordination, and programmatic decision-making by Participating UN Organizations (PUNOs) and members of the Durable Solutions Working Group (DSWG). The analysis and recommendations are based on information collected during the assessment period and reflect the context prevailing at the time of documentation.

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**PARTICIPATORY ACTION FOR INTEGRATED DEVELOPMENTAL ASSISTANCE TO AREAS
OF RETURN**

PAIDAAR

TO SUPPORT RETURNEES, INTERNALLY DISPLACED PERSONS (IDPS), AND
DISPLACEMENT-AFFECTED HOST COMMUNITIES IN KUNDUZ AND BAGHLAN PROVINCES.

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