

D3.3 – Annex 5 Bio4HUMAN KII Guide for Humanitarian SWM Needs Assessment (WP3, T3.3)

Scope: The assessment has the aim of gathering information on the types of waste in DRC and South Sudan, traditional and current methods of SWM, identification of humanitarian supply chains and leaders, and identification of needs of the humanitarian sector in SWM. **Note:** This KII guide should be used for discussions separately with individual or

homogeneous groups (1-3 participants) of health facility staff living in rural, urban, and refugee or IDP camp areas. The KII participants are staff of health facilities that are direct beneficiaries of humanitarian interventions or are used as intermediaries for humanitarian interventions in their communities. All relevant questions in the KII have to be discussed but this doesn't mean that they have to be all posed as such. Information should emerge from the discussion. Additional questions might need to be posed to gather all relevant information.

Key Informant Interviews with <u>health facility staff</u> (individual or homogeneous group, 1-3 participants)

Date:

Location:

Respondent's name(s):

Institution(s):

Respondent's role(s):

Age(s):

Sex(es):

Other information (disability, diversity, etc):

QUESTIONS	Probes (not to be asked all as such but just points to be explored in the conversation if it makes sense, in <i>Italic</i> some references for the discussion)		
Which humanitarian organisations are active in your community and what do they do? (5 min)	 Which humanitarian organizations have been active in your community in the past two years? What types of interventions and projects have they carried out in your community in the past two years? Has there been any support provided in terms of agriculture, food security, nutrition, shelter, WASH, health, or any other? Have there been any distributions? What was distributed? Have there been any rehabilitations and constructions? What has been rehabilitated/constructed? 		



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	3.	 Have there been any capacity-building activities? What topics were covered? Were any items distributed as a part of these capacity-building sessions (e.g. MUAC tapes)? How many distributions took place in the last 2 years in your community? Do you know how many community members benefitted from different distributions?
What are the types of waste produced by HFs and obtained by HFs from NGOs? (15 min)	 3. 4. 5. 6. 7. 	organizations? (<u>Show pictures of different types of waste.</u>)
<u>Where</u> can we usually find solid waste in your HF and where is the waste from humanitarian interventions usually <u>located</u> ? (20 min)	3. 4. 5. 6. 7. 8.	distributed materials in your HF if distributions take place in your HF? If yes, can you show me where? <u>(use Kobo)</u> Does the <u>packaging material</u> from distributions to the community done through your HF usually stay at the HF premises or is it taken home by the beneficiaries? If it stays in the HF, can you show me where? <u>(use Kobo)</u> Do the <u>distributed items</u> from distributions done to the community through your HF usually stay in the HF? If yes, can you show me where? <u>(use Kobo)</u>



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<u>When</u> does waste usually appear in your HF and how is it protected? What is the <u>quantity</u> and <u>quality</u> of waste generated in your HF and of waste brought by NGOs? (15 min)	 Do you produce similar amounts of waste continuously or are there periods when you produce more and less waste? If yes, when? Do you have records of how many different types of waste are produced in your HF per month/year? Can you share these records with me? If not, why don't you have this information? Does <u>humanitarian waste</u> appear in your HF sites continually or are there periods when there is more waste and less waste? If yes, when and why? Do you have records of how many items/boxes of different support (Plumpynut, medication, etc.) you have received from NGOs in the past 2 years? Can you share these records with me? If not, why you do not have these records? Does your HF take any measures to protect your waste from disintegration/destruction (e.g. weather, rotting) or being taken by someone, or is the waste left without any supervision and protection? (Use Kobo) If yes, what measures do you take for which type of waste? Do you produce any waste that harms the environment (air, soil, water) or causes health problems to people? How? Do you take any measures to prevent the negative impact? If yes, what measures do you take? (<i>use Kobo</i>)
How is solid waste managed in your HF, what are the main practices and who are the key actors? (20 min)	 What does your health facility/community do with a) the waste produced by the health facility and b) obtained from NGOs (including distributions and rehabilitation)? (<i>use Kobo</i>) Are there any specific solid waste management standards that are applied to the health facility? What are they? Does the HF have an incinerator? Which type of solid waste is incinerated? How often? Which type of solid waste is burned (on an open fire)? Where? How often? Which type of solid waste is thrown away? Where? Which type of solid waste is re-used? How and for how long? What happens after it is no longer fit to be re-used? Are there informal community solid waste recyclers/re-users that handpick/collect the HF waste and reuse/recycle/resell the waste? If yes, who are these recyclers/re-users, and what type of waste and how often do they pick/collect? Do you sell them waste for a fee? How much? Is there a community waste management service that collects the waste the HF produces? What is the name of this service? How often does it collect the waste? Does it collect all types of waste (incl. hazardous waste) or only a specific type? Is there any fee you have to pay? How much? Is any type of solid waste handed over to an official recycling business? If yes, which type of solid waste is handed to this business? What is the name of this business? Are there any fees applied? Who is responsible for the transport of the waste? Is your current way of handling the solid waste you produce and receive from NGOs different from the traditional practices in the past? If yes, how? Is there any a) solid waste, or b) distributed items and their packaging that your HF likes to have/finds useful for other purpose? How long can you reuse it? What do you do when it is not useful anymore



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	6. 7.	Is there any a) solid waste, or b) distributed items and their packaging that your HF <u>doesn't like</u> to have/doesn't find useful for other purposes? Why? Is it possible that your HF limits the solid waste that you produce? What would be the solutions?
What are the challenges and opportunities of humanitarian waste management in your HF? (15 min)	2. 3. 4.	What is the biggest challenge in terms of solid waste management for your HF (e.g. inability to pay fees, community behavior)? If possible, distinguish between waste from NGOs and other waste. How can the current way of handling a) used items distributed by NGOs (when these items become waste after being used), b) packaging from items distributed by NGOs, and c) other waste (e.g. construction) from NGOs be improved within your health facility? What would you need to improve the current handling of a) used items, b) packaging, and c) other waste (e.g. from construction) from NGOs in your health facility? Are there any local actors/institutions/businesses that could contribute and provide solutions? Are there any opportunities for improving solid waste management that NGOs are not making use of? Do you know of any examples of reusing or recycling of solid waste generated by NGOs practiced in your community? Do you know/imagine any ways the bio-products or bio-technologies may improve the waste problems caused by humanitarian interventions?

