

# HUMANITARIAN RESPONSE PLAN

— JANUARY 2018 - DECEMBER 2021 —

2019 UPDATE, DECEMBER 2018



**AFGHANISTAN**

TOTAL POPULATION

35.7M

PEOPLE IN NEED  
2019

6.3M

PEOPLE TO BE  
ASSISTED 2019

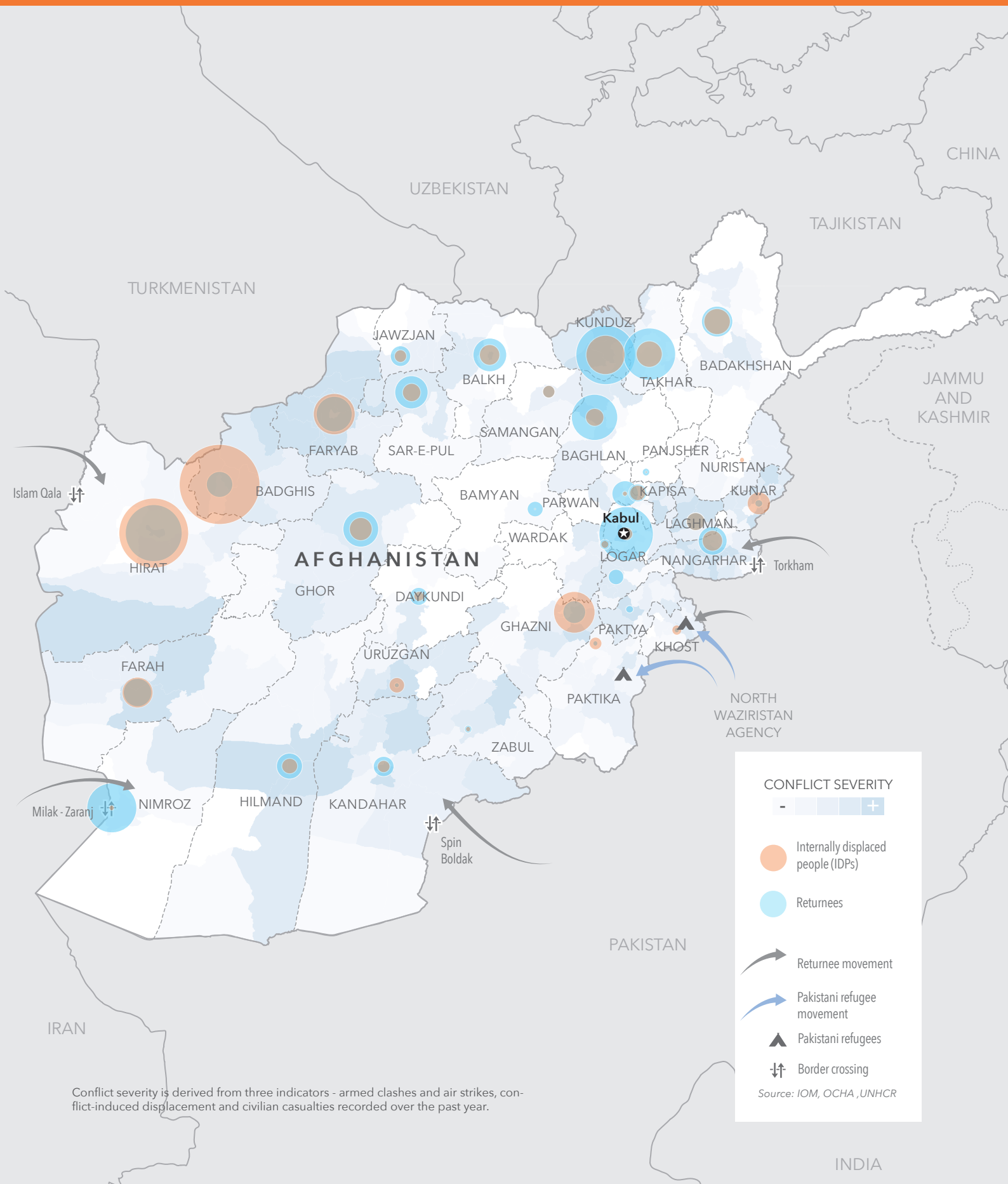
4.5M

REQUIREMENTS  
2019 (US\$)

612M

# HUMANITARIAN  
PARTNERS

166



Conflict severity is derived from three indicators - armed clashes and air strikes, conflict-induced displacement and civilian casualties recorded over the past year.

Source: IOM, OCHA, UNHCR

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## FOREWORD BY

THE HUMANITARIAN  
COORDINATOR

Since arriving in Afghanistan in March 2017, I have seen Afghanistan face its worst drought in decades; insecurity grow in both intensity and geographic scope; and the proportion of the population living in poverty reach 54 per cent. At the same time, I have seen people, many of whom have known nothing but a lifetime of war, experience their first taste of peace following an unprecedented Eid ceasefire; economic growth pick-up; and the international community in Geneva reaffirm its commitment to Afghanistan's stability, self-reliance, and regional connectivity. Working towards a better tomorrow, however, must not distract us from healing the wounds of today.

04

As many as 6.3 million people need humanitarian aid in 2019, including 4 million because of drought. Of these, 3.6 million people are experiencing emergency levels of food insecurity – a 24 per cent increase on the same period of 2017. At the same time, Afghanistan is grappling with a conflict too often marked by suicide bombs, targeted attacks on civilian infrastructure and air strikes. As my colleagues and I have moved around the country it is hard not to be confronted by the visible signs of war: children without limbs or mothers blinded by shrapnel. Already one of the hardest countries for people to make ends meet, the prospects of doing so in Afghanistan when disabled are dim.

Given the complexity of the crisis and severity of need now present, the Humanitarian Country Team (HCT) has updated the multi-year Humanitarian Response Plan (HRP) to prioritise the delivery of life-saving assistance to the most affected people and to include two 'humanitarian-plus' activities: to help restore livelihoods; and rehabilitate and reintegrate trauma victims into society. Humanitarian agencies and development actors plan on expanding partnerships and using innovative technologies, such as predictive analysis and risk management that help to better forecast and respond to disaster, thereby maximising collective impact on the ground. I am delighted that the

Famine Action Mechanism (FAM), a multi-stakeholder platform involving the Government, the World Bank, civil society, and other key partners, to bridge short and long-term food and water security needs will be activated in Afghanistan in 2019.

Meeting immediate needs while reducing risk and vulnerability, however, requires multi-year funding as well as increased support for preparedness and new ways of working. This is why the updated HRP presents, for the first time, multi-year figures for people in need (PiN), people to be assisted and financial requirements; indeed, only by shoring-up more predictable funding can we end the cycle of repetitive and costly humanitarian action. With donors having significantly stepped up their financial contributions in 2018 to enable the response to the drought, I call on them to act again between now and 2021 as we require US\$1.5 billion to meet the most pressing humanitarian needs in Afghanistan. Almost half of this amount – \$612 million – is for 2019 when we aim to assist 4.5 million people.

As we embark on this programme, in close coordination with key government institutions, we face a dichotomy. On the one hand, new-found opportunities for peace offer hope to a people who have endured nothing but conflict; the chance for development to expand where it has previously been unable to; and for improved rains to yield a better harvest and alleviate the impact of the drought. On the other hand, we are mindful that prospects for negotiating peace can be marked by escalating hostilities as parties position themselves for talks; increased political competition as the country prepares for district council, provincial and presidential elections; and the heightened risk of flooding due to El Niño-related rains. I nevertheless believe that with the ongoing support of donors and continued commitment and investment of partners we can overcome the challenges ahead of us and ensure, in tandem with key institutions of the state, that timely aid reaches people who need it most.



Toby Lanzer  
Humanitarian Coordinator



**2018-2021 HUMANITARIAN RESPONSE PLAN**

# 2019 AT A GLANCE\*

**STRATEGIC OBJECTIVE 1**



Lives are saved in the areas of highest need

**STRATEGIC OBJECTIVE 2**



Protection violations are reduced and respect for International Humanitarian Law (IHL) is increased

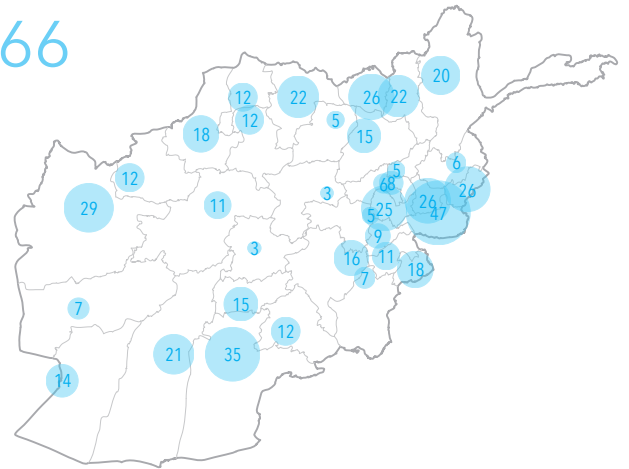
**STRATEGIC OBJECTIVE 3**



People affected by sudden- and slow-onset crises are provided with a timely response

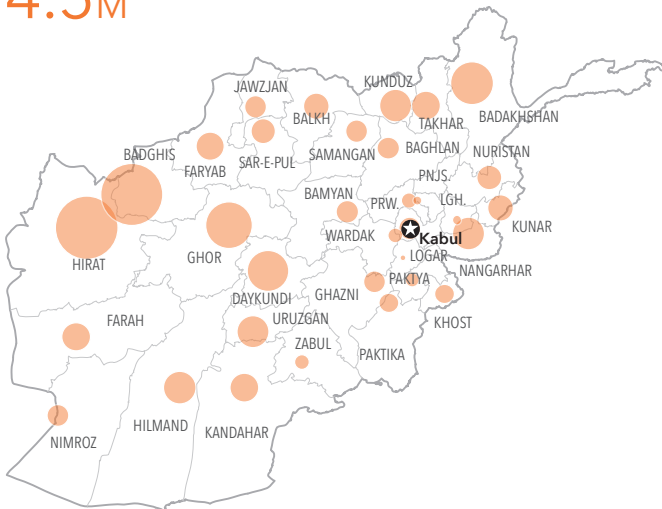
**OPERATIONAL PRESENCE: AN OVERVIEW OF NUMBER OF PARTNERS**

166



**PEOPLE TO RECEIVE HUMANITARIAN ASSISTANCE**

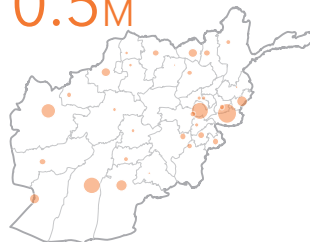
4.5M



**BREAKDOWN OF GROUPS TO RECEIVE HUMANITARIAN ASSISTANCE**

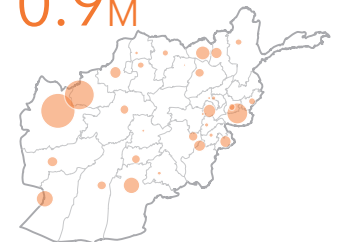
**CONFLICT AFFECTED**

0.5M



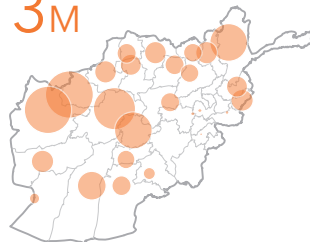
**PEOPLE ON THE MOVE\*\***

0.9M



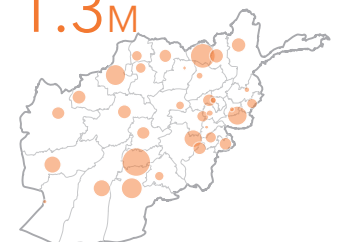
**NATURAL DISASTER AFFECTED**

3M



**NO ACCESS TO BASIC SERVICES**

1.3M



**PEOPLE IN NEED**



6.3M

**PEOPLE TO RECEIVE ASSISTANCE**



4.5M

**TOTAL REQUIREMENTS (US\$)**



\$612M

\*Figures referred to on this page reflect year two (2019) of the HRP only. Please refer to the needs, targets and requirements section on pages 72-73 for 2020 and 2021 figures.  
 \*\*IDPs, returnees and refugees

## OVERVIEW OF

## THE CRISIS

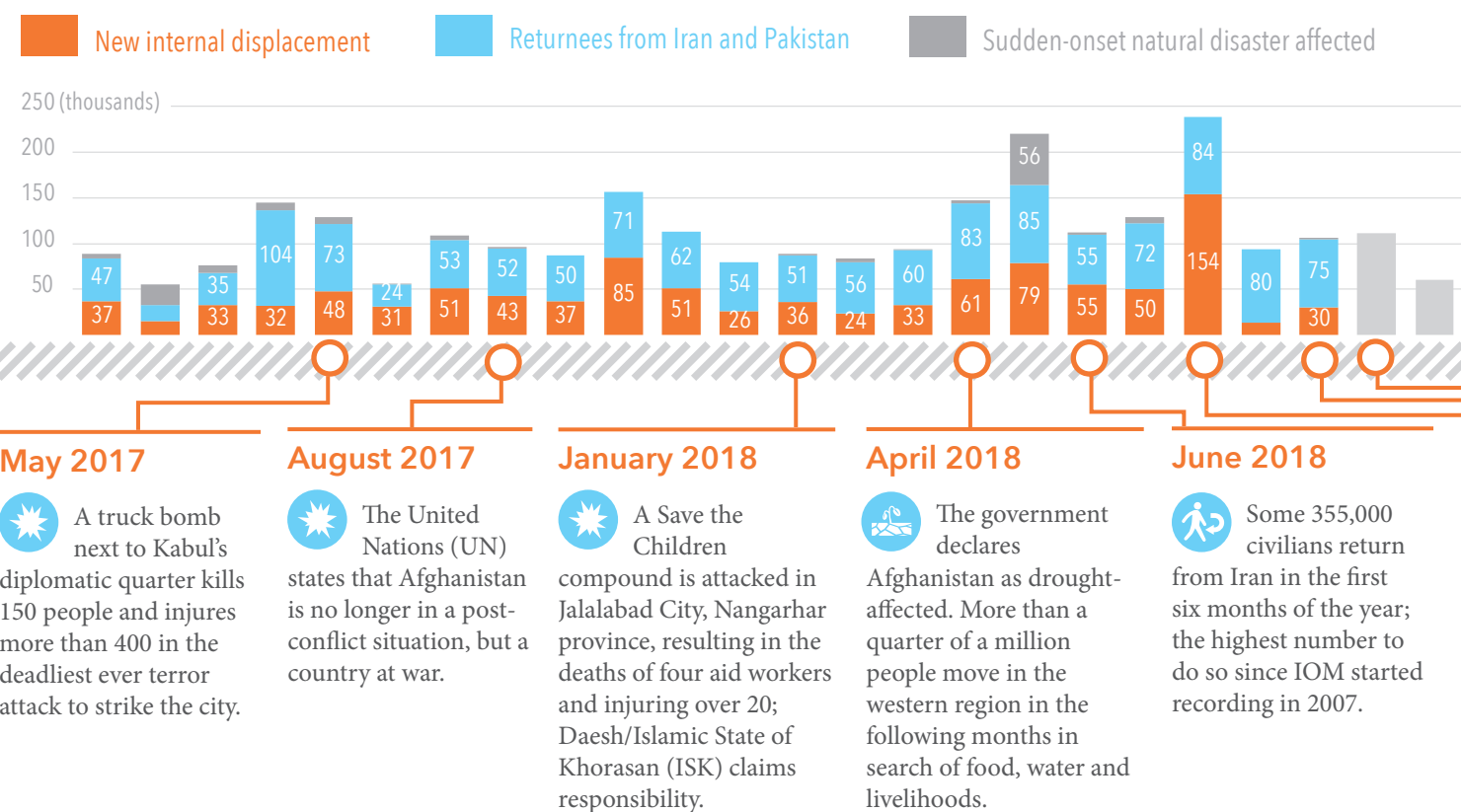
Ongoing conflict, the worst drought in decades, and deepening poverty have all contributed to a deteriorating humanitarian situation across Afghanistan. As many as 6.3 million people require some form of humanitarian and protection assistance in 2019 – almost double the number at this time last year. The next three years are likely to be equally challenging with needs determined by the political, economic and regional context, which could evolve in both positive and negative ways, and imply an increase or decrease in needs accordingly.

People are facing multiple crises, including armed conflict, displacement, drought, chronic underdevelopment and weak investment in basic services, all of which demand a humanitarian response. More than 17 million people live in the provinces most severely affected by drought, of which 10.5 million have been affected and 4 million require an inter-sectoral response to survive. At the same time, a quarter of all districts (106 out of 401) have a conflict-severity score of 4 (out of 5) due to the high-levels of displacement, armed clashes, air strikes and civilian casualties experienced by communities living in these locations.<sup>1</sup>

This chapter briefly summarises the overall drivers and impact of the crisis. Additional thematic and sector-specific needs analyses can be found in the Afghanistan Humanitarian Needs Overview (HNO).

06

## CRISISTIMELINE



### Armed conflict and a deteriorating protection environment

Ongoing conflict continues to drive humanitarian needs across Afghanistan, inflicting high levels of civilian casualties and collateral damage on health and education facilities, as well as disrupting and destroying other life-sustaining civilian infrastructure such as water, electricity and telecommunication systems. Violations of IHL and international human rights law (IHRL) occur frequently. The first nine months of 2018 alone registered a 46 per cent increase in the number of civilian casualties from suicide attacks;<sup>2</sup> a 39 per cent increase in civilian casualties resulting from airstrikes,<sup>3</sup> and a 153 per cent increase in aid workers killed and injured compared to the same period last year.<sup>4</sup> Overall, 8,050 civilian casualties (2,798 deaths and 5,252 injuries) were recorded nationwide between January and September 2018.<sup>5</sup> Health partners reported 85,477 trauma-related consultations between January and September – a 24 per cent increase on the same period in 2017.<sup>6</sup> Traumatic

amputations, many of which are now bilateral and trilateral, constitute a significant and growing burden on civilians.

The invisible toll of the conflict has been no less severe: 70 per cent of men do not feel safe when travelling to work, the mosque, health and education facilities or the market, with this figure as high as 95 per cent in Uruzgan and 92 per cent in Hilmand.<sup>7</sup> Deprived of one of the two most fundamental human requirements - the need for safety and security – for almost four decades now, it is no surprise that people’s ratings of their own quality of life in Afghanistan are lower than any other population worldwide. When recently asked to rate their life-quality on a ladder scale where ‘0’ represents their worst possible life and ‘10’ their best possible life, people gave an average rating of 2.7 in 2018, down from 4.2 in 2016. This is the joint-lowest figure Gallup has recorded in any country since it began tracking these measures in 2006.<sup>8</sup>

An increase in conflict-driven humanitarian needs is expected.



August 2018	October 2018	November 2018
<p>A three-day Taliban assault on Ghazni City leaves 210 civilians dead or injured and displaces more than 37,000 people to surrounding areas and Kabul city.</p>	<p>Following a three-year delay, parliamentary elections are held amidst tight security. While four million people vote, elections are marred by violence which sees more than 400 civilian casualties on the days ballots are cast.</p>	<p>The Integrated Phase Classification Unit of the Ministry of Agriculture, Irrigation &amp; Livestock (MAIL) estimates 13.5 million to be living in Crisis and Emergency levels of food insecurity – an increase of 6 million on the same period in 2017.</p>

### INTERNALLY DISPLACED PEOPLE

	JAN-OCT 2018	PROJECTED for 2019
	551k*	800k

### NATURAL DISASTER-AFFECTED (SLOW- & SUDDEN-ONSET)

	OCT 2018	PROJECTED for 2019
	3.54M**	4M

### RETURNEES FROM PAKISTAN

	JAN-OCT 2018	PROJECTED for 2019
	43k	105k

### RETURNEES FROM IRAN

	JAN-OCT 2018	PROJECTED for 2019
	670k	575k***

\* 287,000 displaced due to conflict, 263,000 displaced due to drought  
 \*\* 77,000 due to sudden-onset disasters, 3.46m due to drought (non-displaced)  
 \*\*\* 20 per cent of returnees from Iran (115,000) are considered vulnerable

## A people on the move

In 2018 people have continued to use mobility as a coping mechanism to manage a range of conflict, protection and livelihoods risks. While the number of people displaced due to conflict has once again declined, the effects of the drought have contributed to significant numbers of people on the move.<sup>9</sup> Between June and August alone, 263,000 people were displaced within Badghis and Hirat provinces, leading to the emergence of 19 vast and sprawling informal settlements.<sup>10</sup>

Displaced families living in informal settlements are particularly vulnerable to the use of negative coping mechanisms, such as reduced food intake and a reliance on child labour. IDP families residing in informal settlements report that they earn, on average, 20 per cent less than other IDP households,<sup>11</sup> frequently do not own Tazkeras (national ID) and have children who are less likely to attend school.<sup>12</sup>

Across the country, a lack of civil documentation consistently hinders access to assistance and services for displaced households, in particular education.

While returnee flows have accelerated since 2014 and are now reaching unprecedented levels, 2018 trends have been dominated by the surge in returns from Iran which, at more than 670,000, have already well surpassed last year's total.<sup>13</sup> Of particular concern is the higher prevalence of especially vulnerable individuals among the returnees, including 22,000 unaccompanied minors, single women, as well as hundreds of critical trauma cases.<sup>14</sup> The combination of higher than expected returns from Iran and drought-induced displacement has resulted in significant demographic changes across various parts of the country. In Farah province, one in four people is now either an IDP or returnee, while Hirat province hosts the highest number of IDPs and returnees nationwide – more than 200,000 people.<sup>15</sup> In contrast to returns from Iran, the number of people arriving home to Afghanistan from Pakistan is at an all-time low. So far this year, just 43,000 people have returned from Pakistan, including 13,295 registered refugees, following a continued decline in related push and pull factors.<sup>16</sup>

Once in-country, however, and whether documented or not, returnees become de-facto IDPs as conflict and lost community networks prevent them from returning to places of origin, exposing them to episodes of further displacement. Three quarters of returnees surveyed in late 2017 indicated that they were unable to go back to their original home because of insecurity, while 72 per cent reported their families have been displaced twice and almost 33 per cent three times.<sup>17</sup> The concentration of IDPs and returnees

in just a handful of urban centres has compounded the pressure on over-stretched services and infrastructure, and increased competition for resources in host communities. Providing support to host communities and displaced people alike is essential to unlocking the potential of both groups moving forward and ultimately to reducing their need for humanitarian assistance over time.

## Drought compounds humanitarian needs

In 2018 drought has affected more than two-thirds of Afghanistan, devastating the agricultural sector and leaving some four million people across the worst-affected provinces in need of life-saving assistance. The drought has unleashed a host of problems on already impoverished communities, reducing incomes by half,<sup>18</sup> exposing people to additional health risks and causing households to engage in negative coping mechanisms. Currently, 13.5 million people are facing Crisis or worse levels (Integrated Food Security Phase Classification or IPC Phase 3+) of food insecurity, 6 million more than this time last year, of which 3.6 million are facing Emergency levels (IPC Phase 4) nationwide.<sup>19</sup>

The drought has also exacerbated the humanitarian needs of children. Rates of child marriage in Badghis province are 13 per cent higher than the national average,<sup>20</sup> while cases of child labour, child abandonment, and child-selling have all been reported in recent months as families have resorted to increasingly risky measures to survive severe financial hardship.<sup>21</sup> Child health indicators in drought-affected areas and among drought-affected people are similarly worrisome. A rapid nutrition survey conducted in Badghis province in July found that global acute malnutrition (GAM) and severe acute malnutrition (SAM) rates now exceed emergency thresholds at 19.7 per cent and 5.7 per cent respectively, while poor access to health services in areas of origin has contributed to high rates of children under two missing out on vaccinations in Badghis (51 per cent) and Ghor (26 per cent) provinces, compared to the national average of 18.3 per cent.<sup>22</sup>

However despite concerns that a drop in agricultural production related to the drought would result in higher commodity prices, markets have remained remarkably stable. Seventy-eight per cent of traders surveyed in nine of the most drought-affected provinces in April/May 2018 said that the supply of wheat flour was the same as or higher than the same period the previous year, and 82 per cent said prices were the same or lower.<sup>23</sup> Indeed, contrary to prevailing assumptions that the main factors influencing local prices in Afghanistan are conflict, increased demand, or drops in local agricultural



production, in fact the biggest determinants of market prices are macro-economic factors – in particular, fluctuations in the currencies of the United States, Afghanistan, Pakistan and Iran; changes in global food prices; or changes in trade agreements/ border closures with Pakistan, Iran or Uzbekistan (the three neighbouring countries through which Afghanistan imports most of its staple foods).

### A crisis of access to services

A combination of widespread conflict, prohibitive costs, as well as inadequate coverage and capacity, continue to disrupt, delay or deny people's access to the healthcare they need. Access to the national Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS) remains uneven across the country with surveys consistently showing imbalances across socio-economic levels, including a clear urban/rural divide and high out-of-pocket expenditures, while mental health, control of epidemics and non-communicable diseases are all inadequately addressed by the current system.<sup>24</sup> As of September, 72 health facilities had been forcibly closed and four destroyed in 2018, depriving up to 3.5 million people of access to primary healthcare, with Nangarhar, Badghis and Zabul among the worst-affected provinces.<sup>25</sup>

Despite year-on-year increases in mass casualty incidents, basic and essential surgical care remains outside the seven major elements of the BPHS, meaning that trauma provision is almost exclusively provided by humanitarian partners. Nationwide there is an extreme shortage of emergency surgical capacities, ranging from oxygen supplies, blood banks, and electrical power, through to dedicated and qualified personnel – including surgeons and anaesthetists.<sup>26</sup> Despite significant improvements in assisting people closer to the place of injury, high rates of referral continue to be seen from conflict-affected districts, suggesting that demand is outstripping response capacity in many parts of the country.<sup>27</sup>

### A generation at risk

Children continue to be disproportionately affected by the crisis, comprising 60 per cent of the total number of people in need in 2019. Persistent violence, discrimination, and denial of access to essential services – particularly healthcare and education – have all undermined their right to a safe and secure early environment, compromising their physical and psychological well-being. 2018 has seen an alarming increase in the number of schools attacked and closed as election-

related violence, general insecurity, cross-fire, intimidation and threats have both disrupted and diminished children's access to essential education. More than 1,150 schools were closed across the country in the first 11 months of 2018, depriving up to 545,000 students of learning opportunities.<sup>28</sup> Girls – who are already less likely to go to school – have been particularly impacted.

Despite an overall decrease in the number of children killed and injured in the first 9 months of 2018, casualties remain extremely high with 2,136 recorded.<sup>29</sup> In addition to the physical costs imposed on children, the mental toll on those who have experienced stressful situations – now multi-dimensional in nature – has been considerable.<sup>30</sup> More than three-quarters of households surveyed as part of the Whole of Afghanistan (WoA) Assessment indicated that they were aware of children in their community in need of psychological support, with conflict, airstrikes, displacement and the loss of a family member cited as the primary causes.

Similar concerns and stressors afflict under-25s, many of whom have known nothing other than a lifetime of crisis and conflict. According to a recent perception survey, 39 per cent of the population would now leave the country if they had the opportunity to do so – a 9 per cent increase on those expressing the same desire the previous year – with insecurity (76 per cent) and unemployment (54 per cent) given as the top reasons.<sup>31</sup> With an increasingly untenable and inhospitable environment in Iran and much of Europe,<sup>32</sup> many have been left with little alternative but to stay and take their chances, despite the disconcerting and uncertain future confronting them.\*

\*The number of people from Afghanistan filing for asylum in the European Union in 2017 was 75 per cent less than the previous year.

## Outlook for 2019 and beyond

2019 promises to be another tumultuous year for the people of Afghanistan, with presidential elections – set for April – likely to be accompanied by a spike in violence as non-state armed groups (NSAGs) seek to disrupt the process by targeting schools, mosques and other civilian infrastructure serving as voter registration and polling centres. Although a series of significant diplomatic developments has recently renewed hopes for a negotiated political settlement, conflict is expected to continue in 2019 and may even intensify in some parts of Afghanistan as both sides try to improve their hand in advance of any direct peace talks.

Looking ahead to 2020 and 2021, the humanitarian community remains cautiously optimistic that an improved security situation may evolve, resulting in slightly less conflict-related IDPs over time and improved reintegration prospects for returning populations, however partners will remain prepared for all eventualities including a potential deterioration in the situation and an increase in needs. The physical threat posed by Daesh is also unlikely to be fully

eradicated, and while no meaningful expansion of territorial control is foreseen, they are expected to retain their capacity to carry-out spectacular mass casualty incidents in major urban centres, such as Jalalabad and Kabul, as well as attacks against Non-Government Organisation (NGO) and UN targets, both of which may increase in the coming years.

The increased likelihood of average to above-average precipitation during the 2018/19 wet season<sup>33</sup> is expected to alleviate some of the current effects of the drought, although improved rains and the predicted El Niño weather effect will bring their own risk. Dry, compacted soils mean water is less easily absorbed into the ground and more likely to run-off in the event of heavy rains, causing flash flooding which, in turn, could generate additional humanitarian needs. This is especially the case in flood-prone areas such as the north-western, northern and central highland regions. Against this backdrop, chronic needs arising from years of under-investment in basic services, bureaucratic inefficiencies, escalating poverty and rapid population growth continue to undermine the future prospects of the population.

## STRATEGIC

## OBJECTIVES

The humanitarian community will continue to prioritise the delivery of life-saving assistance and protection services to address the acute needs identified in the HNO, while simultaneously preventing the most severely food insecure from slipping into famine. Given the extent to which livelihoods have been decimated by the drought, partners will harness the multi-year timeframe of the HRP to support initial recovery and resilience-building for the worst-affected communities. This will be supported by enhanced advocacy, collaboration and sequencing of action with development partners in order to handover eventual responsibility to longer-term programmes which can more sustainably address the root causes and drivers of vulnerability.



## 1 Lives are saved in the areas of highest need

Deteriorating and widening insecurity is exposing greater numbers of people to life-threatening harm and injury across Afghanistan. For the next three years of the 2018-2021 HRP, the primary objective will be the provision of immediate and effective assistance which prevents loss of life and alleviates human suffering. In 2019, particular efforts will be made to scale-up operations which roll-back food insecurity and avert extreme hunger, as well as mitigate the likelihood that risky negative coping mechanisms will be deployed by a significant proportion of the population.

11



## 2 Protection violations are reduced and respect for International Humanitarian Law is increased

Evolving conflict and continued violations of IHL have contributed to an alarming protection crisis affecting all members of society. Disproportionately affected are displaced people (both internally and cross-border; recently or for protracted periods), women, children, ethnic minorities, as well as rural populations who are disconnected from economic centres and who are yet to benefit from national-level policies and frameworks. Over the next three years, humanitarian actors will continue to deliver needs-based assistance which promotes the safety and dignity of the people it serves.



## 3 People affected by sudden- and slow-onset crises are provided with a timely response

Almost 40 years of relentless war, exposure to natural or environmental hazards, including in 2018 one of the worst droughts in decades, rapid population growth and urbanisation, have all eroded the livelihoods and purchasing power of millions, forcing families to resort to increasingly harmful coping strategies to survive. With conflict, climate variability and economic challenges all expected to continue, investments in science and technology which enhance predictive capacities - including initiatives such as the FAM - and improve the timeliness of the response will be prioritised. Activities which rebuild livelihoods, such as asset rehabilitation and cash-for-livelihoods programmes, will also be considered for the most vulnerable drought-affected communities where market assessments and perception surveys show that they are feasible and have been identified as a priority.

## RESPONSE

## STRATEGY

In late 2017, the HCT adopted a multi-year HRP aimed at minimising the impact of the conflict by saving lives and preventing suffering in the areas of highest need, as well as enhancing preparedness to facilitate timely response to new and emerging crises. While the overall goals of the HRP remain fundamentally the same, a combination of relentless violence, as well as grinding poverty and economic crisis fuelled by the drought, have compounded humanitarian needs to such an extent that, for some population groups and certain geographic areas, partners can no longer avoid engaging in a limited set of 'humanitarian-plus' activities.

## 12

**Changes to the multi-year strategy**

Now in the second year of the 2018-2021 HRP, the humanitarian situation has significantly deteriorated due to a drought which has afflicted two-thirds of the country, leaving 3.6 million people in extreme food insecurity,<sup>34</sup> and a conflict which is continuing to evolve in character and tactics to take a worsening toll on civilians. Across the country, humanitarian needs are not only being driven by violence, but increasingly by weak state capacity to manage or mitigate the impact of natural hazards; economic hardship due to unsustainable population growth and limited income-generating opportunities; and the erosion of livelihoods and assets. The change in context and anticipated evolution of needs has required that the initial planning assumptions on which the HRP was based be re-evaluated and that consideration be given to the inclusion of a limited range of 'humanitarian-plus' activities which can address specific vulnerabilities generated by the multi-dimensional crisis now confronting people.

**Scope and priorities**

Proposed changes to the scope of humanitarian activities are not intended to replace development programmes, but rather to recognise that the initial assumption in the 2018-2021 HRP<sup>35</sup> – that actors engaged in One UN<sup>36</sup> programming would be able to more quickly meet the structural needs of affected people – has not yet materialised. Indeed, while millions of people continue to receive humanitarian

assistance, they have yet to benefit from longer-term and larger-scale government-led investments in basic service delivery, including the Citizens' Charter National Priority Programme (CCNPP), such that they now require additional support to aid their recovery. As there is, by definition, no clear distinction between humanitarian and humanitarian-plus activities, the HRP is premised on the fact that different actions may be more or less geared towards immediate life-saving outcomes or those which contribute to more sustainable objectives.

Changes to the scope of humanitarian action are thus not to be misconstrued as the pursuit of development goals, but rather are intended to protect people from the consequences of state fragility; the absence of social safety nets; and the adoption of increasingly destructive negative coping mechanisms. Given this, the HCT has agreed to allow a temporary widening of the current humanitarian parameters to allow for the following activities to be implemented in 2019:

- Asset creation and livelihoods support to enable drought-affected communities who have lost their crops and livestock to rebuild and/or recover their assets, thereby facilitating more sustainable returns and reducing the likelihood that people in rural areas will resort to migration as a coping mechanism;
- Enhanced physical and mental rehabilitation for trauma patients to increase their mobility and psychological recovery, in addition to programmes aimed at improving greater access to employment opportunities for people with disabilities.



In broadening the scope of humanitarian action to include these activities, the multi-year HRP continues to prioritise saving lives, while at the same time acknowledging that the humanitarian burden can only be sustainably reduced through a greater commitment to early recovery and resilience-building initiatives which bridge short-term relief and longer-term assistance, and help affected people achieve self-reliance. Geographic prioritisation will therefore continue to follow the logic set out in the 2019 HNO which

identifies the most severely affected provinces as Faryab, Hilmand, Hirat, Kandahar, Nangarhar and Zabul. The plan also recognises that there may be additional provinces, such as Badghis, in which multi-sectoral or integrated responses are required to address needs within specific thematic areas, such as the drought, independent of whether these provinces are also adversely affected by conflict, population movement or limited access to basic services.

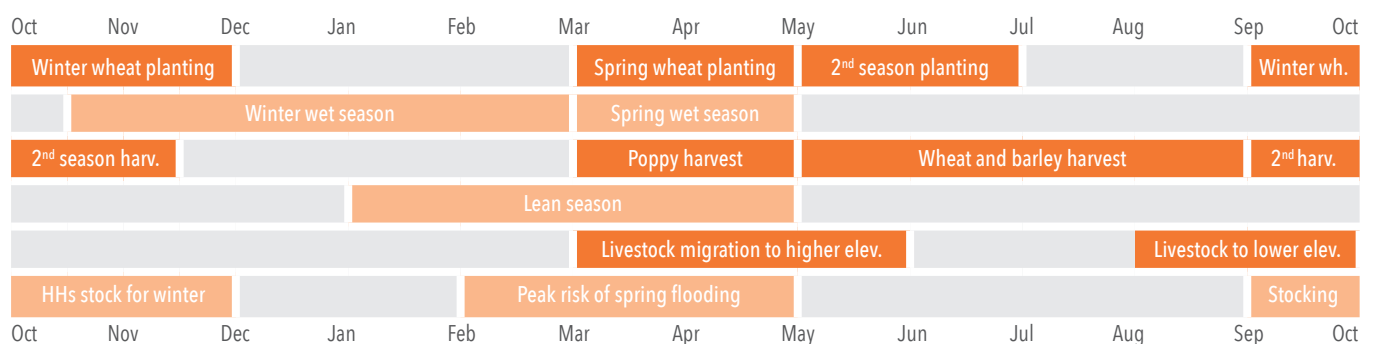
### Integrated drought response pilot in Badghis province

Notwithstanding the significant humanitarian needs that have been generated as a result of the drought, not all provinces have been equally affected or have the same number of people suffering from extreme hunger. With 75 per cent of the population currently experiencing Crisis and Emergency (IPC 3 & 4) levels of food insecurity in Badghis province and a high prevalence of GAM and poor water, sanitation and hygiene (WASH)-related health issues for a significant proportion of the population, the Inter Cluster Coordination Team (ICCT) has collectively agreed to pilot an integrated drought response in four districts - Ab Kamari, Bala Murgahb, Muqur and Qadis – focusing not just on the symptoms of the problem (food insecurity and malnutrition) but also the underlying causes (health and WASH).

While exact details of the pilot – including targeting criteria, packages of assistance and programme activities - will only be available in 2019 following regionally-led consultations in Badghis and Hirat, it is envisaged that the primary focus of the multi-sector response (food, health, nutrition and WASH) will be two-fold: i) to prevent those experiencing IPC 4 levels of food insecurity (Emergency) from slipping into IPC 5 (Famine); and ii) to ensure that any IPC 3 populations do not fall back into IPC 4 throughout the latter half of 2019 – in the event that a better harvest supports the natural graduation of some people to a better food security classification.

Indeed, while higher-levels of rainfall are predicted during the winter season it won't be clear until the second quarter of 2019 whether this has translated into conducive planting conditions due to it not being known: a) whether the water will actually be harvested into irrigation reserves or run off straightaway into deforested land / barren soil; b) that families either had the resources or received assistance in time to plant; and c) that the harvest will provide enough for their food and/or economic security through the next winter. Regular monitoring of vegetation growth and the food security outlook, supported by FEWSNET and Food Security and Agriculture cluster (FSAC) analysis in the first quarter of 2019, will therefore be critical to how the pilot is eventually designed.

### SEASONAL CALENDAR



### Validating multi-year planning assumptions

In contrast to the original 2018-2021 plan, which only outlined the number of PiN, together with targets and financial requirements for 2018, the updated version presents these figures for all three remaining years of the response – see Table I for further details. Developing a genuinely multi-year outlook which contains plausible projections, however, has only been possible by basing it on a series of credible, but by no means certain, assumptions about how events will unfold.<sup>37</sup> It should be noted that people are exposed to multiple risks and vulnerabilities, and needs may be triggered or escalate unexpectedly such that a revision to the plan would become necessary. Reasons for this could include:

- Conflict displacement which is not comparable to recent years and exceeds current estimations;
- The conduct or outcome of the presidential elections results in significant levels of civil unrest;
- The right of registered refugees to remain in neighbouring countries is not respected or the timeframe for repatriation of undocumented people recently agreed to under the Afghanistan-Pakistan Action Plan for Peace and Solidarity (APAPPS) is not followed;
- The occurrence of a major natural disaster, such as a significant earthquake;
- The impact of the El Niño weather event in 2019; or
- A slide from acute food insecurity levels into famine (See preparedness efforts underway through the FAM, more details of which available on page 15).

This plan is therefore intended to serve as a streamlined response to currently presented or known needs, and to enable timely and scaled-up responses in the event a new emergency occurs; it does not attempt to elaborate all possible scenarios, which would be unrealistic given the multiple factors at play. What remains critical, however, is that regular situation monitoring be undertaken to test the continued validity and relevance of initial planning assumptions. These assumptions include an expected alleviation in the impact of the drought in the second half of 2019. Should such an improvement not materialise or be complicated by El Niño impacts, current planning figures may need to be adjusted, along with the activities required to respond to them. Stocktaking exercises of this kind are essential to ensuring the pertinence, timeliness and credibility of all humanitarian response plans. Indeed, it is this very process which led in May 2018 to the first revision of the 2018-2021 HRP – from 3.3 million people in need to 5.5 million – and again, in November, from 5.5 million to 6.6 million.

TABLE 1: PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE AND FINANCIAL REQUIREMENTS (2019-2021)

2019	6.3M	4.5M	612M
2020	4.3M	3M	465M
2021	3.7M	2.4M	394M

Moving forward, and given that the HRP now contains multi-year projections, quarterly reality checks of initial planning assumptions will be built into monitoring. This will be accompanied by greater scrutiny and accountability of emergency preparedness, such as the stockpiling of supplies and monitoring of pipelines. Reality checks will also be informed by the use of satellite imagery, such as vegetation growth as well as other forecast analyses, including precipitation levels and snow depths to ensure that seasonal considerations are factored into the response accordingly. A planned review of the existing humanitarian architecture in the first quarter of 2019 will also examine the utility of current emergency response preparedness (ERP) processes, as well as related roles and responsibilities. Robust and proactive ERP approaches are critical in a context such as Afghanistan, where a major drought is known to occur, on average, every six years, and whose effects could be better managed or mitigated with more effective operational planning.

### Holistic efforts underway to manage famine risk in Afghanistan

In September 2018, the UN, the World Bank and other key stakeholders announced a collective partnership – the FAM – aimed at reducing crisis levels of food insecurity by formalising, strengthening and incentivising the links between early warning, financing and implementation arrangements to enhance famine prevention and mitigation efforts globally. Selected as one of five ‘first-mover’ countries, Afghanistan held a high-level roundtable in Kabul on 19 November aimed at exploring how government, humanitarian, development and donor entities could better work together to address growing food insecurity and water scarcity in a context where humanitarian assistance is limited in both timeframe and scope, and development for millions of people remains seriously challenged.

Indeed, with acute levels of food insecurity in Afghanistan rising by 30 per cent in just 5 years to affect 13 million people in 2018 and water storage per capita the lowest in the region, earlier and more accurate data, as well as pre-emptive, rather than reactive, financing is required to support more consistent early action and reduce exposure to mass hunger. This is especially the case when it is widely understood that Afghanistan, on average, experiences a major drought once every six years.

Key takeaways from this roundtable, which was convened by the World Bank and Acting Minister of Finance, H.E. Mohammad Humayun Qayoumi, included:

1. A recognition that development financing has been concentrated in urban areas, or focused on larger-scale infrastructure which may overlook the pressing needs of rural, village and mountainous communities;
2. The need to link data with analytics and strengthen communication with decision-makers and affected communities to provide them with actionable information; and
3. The need to further examine existing financing mechanisms such as the Central Emergency Response Fund (CERF) and Afghanistan Humanitarian Fund (AHF) to highlight the potential financing gap to be filled by the FAM.

Over the next few months this roundtable will be followed up by a series of technical discussions which seek to develop a more aligned, holistic plan to address water scarcity, food insecurity and famine risk in Afghanistan and address the ‘missing middle’ – that is, vulnerable and at risk communities who fall between short-term humanitarian (<1 year) and long-term development (+10 years) responses.

### The new way of working

Seventeen years since the 9/11 attacks and 11 years after the cluster system was first activated in Afghanistan, the need for a new way of working (NWOW) is not only compelling but also urgent. In spite of the vast amounts of aid money that have been spent over the last two decades, key development indicators are either stagnating or reversing, and current resources are simply too meagre for the scale of action required for positive life-changing programming to benefit the majority of people who need it, at least through the current approach. For the first time, the 2019 HNO presented an alternative way of framing the primary humanitarian needs on the basis of thematic areas<sup>38</sup> which do not confine responses to isolated sectoral approaches but instead promote collective action and support inter-agency cooperation.

While there are currently limits as to how theoretical

guidance on the NWOW can be applied to Afghanistan in its present circumstances, some steps have already been explored in-country, including the alignment of humanitarian action to the Sustainable Development Goals (see Table II: Excerpt of the 2018-2021 HRP logframe and One UN results framework). Collaboration is also ongoing at the technical level with humanitarian and development actors engaging in joint planning around the short and longer-term drought response, including the feasibility of cash-for-livelihoods programmes. Additional plans in early 2019 include a one-day workshop of ICCT and Programme Management Team (PMT)<sup>39</sup> members to determine roles and responsibilities for initial early recovery and resilience-building work.

This will be supported at the strategic level by discussions among the UN Country Team (UNCT) and HCT on how the NWOW can be applied and the necessary prerequisites for the development of collective outcomes, including the

articulation of a common understanding of critical needs and response priorities across the country. The HRP will also draw upon engagement with national and international frameworks, including the National IDP Policy and the

Global Compacts on Refugees and Migration to support durable solutions to internal and regional displacement and the eventual transition of responsibilities to government authorities.

## EXCERPT FROM THE 2018-2021 HRP LOGFRAME AND ONE UN RESULTS

The below excerpt represents a sample of how outcomes under Afghanistan's humanitarian and development frameworks are complementary and contribute to achieving common goals in Afghanistan. For the full HRP logframe see page 59.

HUMANITARIAN RESPONSE PLAN	ONE UN FOR AFGHANISTAN FRAMEWORK	SUSTAINABLE DEVELOPMENT GOALS
<b>SO 1: Save lives in the areas of highest need</b> <b>1.3</b> Conflict IDP, returnee, refugee and women, men and children of all ages have a minimum household food consumption score above 42.5	<b>3. Food Security, Nutrition and Livelihoods</b> <b>3.1</b> Food insecure populations, including crisis-affected people, have improved access to safe, nutritious and sufficient food all year round	<b>2. Zero Hunger</b>
<b>SDG 2.1</b> By 2030, end hunger and ensure access by all people, in people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round <b>SDG 2.2</b> By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons.		
<b>SO2: Reduce protection violations and increase respect for International Humanitarian Law</b> <b>1.5</b> School-aged girls and boys affected by emergencies can access quality, basic education.	<b>2. Education</b> <b>2.2</b> Equitable Access: Increased equitable and inclusive access to relevant, safe, and quality learning opportunities for children, youth, and adults in Afghanistan, especially women and girls.	<b>4. Quality Education</b>
<b>SDG 4.1</b> By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.		
<b>SO 3: People struck by sudden- and slow-onset crises get timely assistance</b> <b>3.1</b> People affected by natural disasters, including severe weather conditions, receive timely assistance, preventing loss of life and minimising the risk of disease.	<b>3. Food Security, Nutrition, Livelihoods</b> <b>3.4</b> Rural communities and authorities have strengthened capacity to adapt to and mitigate climate change and increased resilience to cope, prevent and recover from climate-related and other natural disasters.  <b>4. Health</b> <b>4.4</b> Health Emergencies: reduced death, illness and disability in the most acutely vulnerable population while complementing and strengthening existing health institutions to adequately prepare for and respond to conflicts, outbreaks and natural disaster-related health crises.  <b>5. Return and Reintegration</b> <b>5.5</b> Access of the returnees, displaced populations and host communities to the infrastructural services in areas of high return and displacement, including (or particularly) in the returnee townships, is enhanced	<b>1. No Poverty</b> <b>2. Zero Hunger</b> <b>3. Good Health and Well-being</b>
<b>SDG 1.5</b> By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters <b>SDG 2.4</b> By 2030, ensure sustainable food production systems and implement resilient agricultural practices that increase productivity and production, that help maintain ecosystems, that strengthen capacity for adaptation to climate change, extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality. <b>SDG 3.13</b> Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.		



## CROSS-CUTTING

## ISSUES

**Centrality of protection**

The scale and complexity of the crisis in Afghanistan have affected the population in diverse ways, with the scope, duration and intensity of needs manifesting differently in people depending on their circumstances. Among the 6.3 million people now in need across the country, the most vulnerable are increasingly the rural poor; minority groups (particularly the Shi'a Muslim community); those exposed to forced, multiple and often extended periods of displacement; as well as children, female-headed households and young men. The multi-year humanitarian response therefore remains committed to ensuring that people are at the centre of humanitarian action and that all assistance is planned and implemented in such a way that their safety, dignity and rights are upheld. Humanitarian partners will be guided in their response by more robust analysis of protection risks and human rights abuses, supported through the recently-established Protection Incident Monitoring System (PIMS)<sup>40</sup> currently being piloted in the western region, and complemented by the HCT protection strategy that was endorsed in 2018.<sup>41</sup>

Implementing a response that has people at its centre and which is defined by the priority protection concerns that they have identified - rather than being driven by what humanitarian actors can tangibly deliver in a short timeframe - will likely, however, require a shift in programmatic approach and resourcing. A reduction in geographical footprint and field-level staffing across Afghanistan in recent years has diluted partners' ability to retain close proximity to affected people, understand their main humanitarian needs, and engage in more upstream work which could prevent protection violations and avert costly response efforts.

Recent attacks on Hazara strongholds in Ghazni province, for example, have reaffirmed the extent to which communities themselves have the knowledge and networks to make informed decisions about their own safety and well-being. The timing of counter-offensives, which are often accompanied by air strikes and house-to-house search operations, is frequently known in advance and their impact on civilians could be mitigated if humanitarian actors were in a better position to negotiate or establish people's safe passage out. With changing strategies on the battlefield suggesting that rural populations may be increasingly exposed to siege-like conditions, where connecting roads to cities and escape routes are blocked-off, there can be no substitute for protection by presence.

Ever-evolving conflict demands that a similarly agile and proactive advocacy approach be adopted. Indeed, with attacks on education and healthcare facilities now an almost daily occurrence; sectarian and ethnic-based violence on the rise; and perfidious acts more common,<sup>42</sup> dual actions which enhance the prevention of protection violations – as opposed to merely responding to their consequences – are urgently required. In this regard, the HCT will both prioritise messaging which promotes respect for IHL and IHRL, as well as support specific programmes which safeguard especially vulnerable people from harm. This includes practical measures to upgrade the physical safety of school buildings and mine-risk awareness for teachers to help them detect improvised explosive devices (IEDs), in addition to ongoing advocacy with the Government which is a signatory to the 2015 Safe Schools Declaration. The HCT will therefore elevate protection issues which require higher-level engagement to the Senior Level Working Group on Protection of Civilians established in 2016.<sup>43</sup> The reinvigoration of this forum, which has only met twice in the past two years, will be essential to the success of future advocacy efforts.<sup>44</sup>

At the same time, the humanitarian response must continue to account for the fact that there is currently no realistic prospect of engaging certain NSAGs, such as Daesh/ISK, in a dialogue on respect for IHL and IHRL. Survivor-based care will thus remain a critical component of the response and, in some areas – such as post-operative physical and psychosocial rehabilitation – need to be strengthened to ensure that those with life-changing injuries and/or disabilities are not further disadvantaged.

**Gender, age and disability-sensitive programming**

Both men and women have paid a heavy price as a result of the ongoing conflict, although the costs have been borne differently. Conditions for women both in and outside the home have comprehensively deteriorated as suicide attacks, recruitment of male family members into the armed forces, and economic migration abroad have deprived them of breadwinners, social support networks and even, in some cases, security.<sup>45</sup> Female-headed households are more likely to be food insecure than male-headed households,<sup>46</sup> and are twice as likely to be in debt than their male counterparts when displaced.<sup>47</sup> At the same time, unsustainably high dependency ratios – 47.5 per cent of the population is aged 15 or below and therefore considered economically dependent – have

systemically undermined savings and meant that whatever income exists must automatically be consumed in order for the family to subsist.<sup>48</sup>

Men and young boys, on the other hand, make up more than half of all trauma victims; 96 per cent of all returnees from Iran, including 93 per cent of deportees;<sup>49</sup> and are more likely to experience physical violence at the hands of parents, teachers and relatives as children.<sup>50</sup> At the same time, at least six million school-age children are engaged in child labour, while minors are estimated to make up half of the population with disabilities.<sup>51</sup>

Ensuring that humanitarian assistance is appropriately tailored to meet the distinct needs of women, men, girls and boys in a way that accommodates their physical and mental well-being will not only be critical to their immediate survival therefore, but also their capacity to meaningfully engage with and contribute to society in the future. This is particularly important in a context such as Afghanistan where there is a significant youth bulge and the demand for jobs outstrips the available opportunities among certain age cohorts to such an extent that increased conflict is a possible result.<sup>52</sup>

In this regard, while preventing exposure to violence, abuse and exploitation and the adoption of harmful coping strategies will remain paramount to the HRP, the response will also prioritise a set of targeted livelihoods activities for some population groups, such as drought-affected, rural poor men and women. Humanitarian actors will also work with development partners to sequence their activities to ensure that these individuals are picked-up in longer-term and poverty-reduction programming, which is ultimately better suited to realising fundamental change in people's lives than one-off packages of humanitarian assistance.

At an operational level, humanitarian action in Afghanistan will also remain committed to fully integrating gender, age and disability considerations into all components of the humanitarian programme cycle - from assessments to planning, as well as implementation and monitoring. Already in the first year of the 2018-2021 HRP, partners have made significant strides in collecting, using and analysing gender and age specific data, ensuring that the gender with age marker (GAM) is incorporated into the methodology and design of nationwide surveys such as the WoA Assessment. This has yielded sex and age disaggregated data (SADD) for all population groups included in the 2019 HNO, as well as critical information relating to the presence of additional key vulnerabilities within the household, such as disabled and chronically ill members or pregnant and lactating women (PLW).

In order to reduce gender bias in assessments, and in recognition of the fact that 94 per cent of all households in Afghanistan are headed by men,<sup>53</sup> the humanitarian community has also undertaken numerous women-only focus group discussions to supplement the collection of quantitative data with qualitative information so as to better articulate and address their needs within the response. Efforts to reach more women and girls by increasing the number of female frontline workers – be it in healthcare delivery or protection from sexual and gender-based violence (SGBV) – are also being actively pursued. Good practices from partners operating outside the HRP are currently being explored as potential models, although expectations must be tempered given the limited mobility of women, particularly in rural areas, when not accompanied by a male mahram (a male relative with whom contact is permissible).

Measures which are already ongoing to redress existing imbalances and recruit more women into humanitarian action include the hiring of husband-and-wife as well as brother-and-sister teams, and using government contacts to identify female candidates (as this often reassures families that their involvement in these activities is acceptable). The resumption of the Gender in Humanitarian Action Task Force (GIHATF), which has been dormant for much of 2018 following high levels of staff turnover, will play an important part in ensuring the success of these initiatives moving forward.

### **Accountability to affected populations and community engagement**

Engaging women, men and youth more meaningfully in humanitarian action will continue to be an integral feature of the response. In 2018, humanitarian partners undertook a series of steps to develop a more comprehensive understanding of the needs and concerns of affected people and to ensure that these are appropriately reflected in the HNO and in programme implementation, including gender dimensions. This has ranged from their direct participation in nationwide and sector-specific assessments, key informant interviews and focus group discussions, through to incorporating feedback and complaints into the response effort, and taking any necessary course corrections as a result. Humanitarian partners have also reached-out to affected people through perception surveys of both women and men, to enable them to better determine their level of satisfaction with assistance received – both in terms of amount and appropriateness of the modality.

More frequent and interactive communication with communities is just one component of accountability to affected people, however, and more proactively involving them in decisions which affect their lives – giving them greater agency rather than reducing them to passive recipients of aid – will be critical to meeting Grand Bargain commitments associated with the ‘participation revolution.’

This is challenging in a context where much of what the population needs and desires (particularly in drought-affected communities) lies outside the remit of humanitarian action – for example, improved rural irrigation systems and infrastructure,<sup>54</sup> or better employment opportunities.<sup>55</sup> Nevertheless, practical steps which can be taken to assist affected people in accessing basic goods and services which support their initial recovery, without actually undertaking the work of development partners or substituting for the role of the government, include: the construction of small-scale water harvesting schemes; targeted programmes which rehabilitate agricultural land and animal shelters; and facilitating ‘go and see’ visits for drought IDPs to potential return areas.

Regular consultation with communities will be an essential part of this process and key to mobilising a more effective, relevant and accountable response. To support this work, in June 2018 the ICCT established a Community Engagement Working Group (CEWG), currently chaired by UNOPS and co-chaired by WFP, aimed at integrating community engagement and accountability into the humanitarian programme cycle to promote informed decision-making and enhance local empowerment. Initial mapping of community engagement activities carried out by the CEWG in June 2018 demonstrated a priority need for the following:

1. Engagement with communities in harder-to-reach areas and locations impacted by high levels of displacement and significant return;
2. More specific information to be provided by humanitarians to affected people about the response, including the activities agencies are implementing, the targeting criteria being used and the duration of assistance;
3. Promotion of community structures and the incorporation of local capacities and participation;
4. The establishment of Accountability to Affected Populations (AAP) focal points at the local level; and
5. The allocation of dedicated resources (personnel, funds) to support the mainstreaming of community engagement, including a single-hatted working group coordinator and strengthening of inter-agency mechanisms for reporting sexual exploitation and abuse (SEA).

In October 2018, the Awaaz<sup>56</sup> call centre received its first allegation of SEA, the referral of which highlighted, at a minimum, the need for concerted efforts by agencies operating in Afghanistan to establish a centralised mechanism for protection from sexual exploitation and abuse (PSEA) and an agreed inter-agency referral pathway. Plans are already underway to address the latter by potentially using Awaaz as the channel for the collation of PSEA cases and trend analysis, along with more regular meetings of the existing PSEA Taskforce.

The UN will also ensure that existing mechanisms for staff who may face exploitation and abuse in the workplace are fully effective and are as accessible and responsive as possible. In this regard, consideration will be given to building upon the 12 recommendations of the UN Gender and Sexual Harassment Survey completed at the end of 2017, including the reinforcement of gender policies and commitments to ensure staff understand the need for gender equality and parity, and increased support to young female national staff, such as through the establishment of dedicated focal points to increase protection and mitigate the risk of discrimination and harassment.

### Market-based response modalities

Cash and market-based responses have been implemented in Afghanistan since 2009 with the value widely acknowledged by the HCT – both in terms of cost-efficiency and effectiveness, as well as the improved dignity, flexibility and choice it offers to affected people. Already in 2018, \$21 million has been disbursed in cash-based transfers<sup>57</sup> to 800,000 people covering a range of basic needs, including food, shelter, as well as NFI, fuel, and health expenditures and transportation under the Survival Minimum Expenditure Basket (SMEB).<sup>58</sup> While this represents a 50 per cent reduction on the \$43.3 million distributed to 900,000 people in 2017, the reduction is primarily due to the three-quarters drop in documented refugee returnees from Pakistan entitled to UNHCR’s repatriation grant in 2018, and to changes in the targeting procedures of the Emergency Response Mechanism (ERM) consortium of partners which saw a reduced timeframe for eligibility and the introduction of a two-tier assistance package for vulnerable households.<sup>59</sup>

2018 also saw an increased use of mixed modality responses that reduced the ERM partners’ multi-purpose cash provision, when compared to the full cash packages provided in 2017. In keeping with 2018 trends, cash- and vouchers-for-food remained the most common type of transfer – representing 69 per cent of the total – followed by multi-purpose cash (23

per cent) and cash-for-shelter construction (8 per cent). As in previous years, targeted groups included conflict IDPs, returnees (both documented and undocumented) and, for the first time, drought-affected communities (both displaced and non-displaced).

While underlying market conditions in Afghanistan are generally conducive to cash programming – with markets being mostly accessible to affected people (who tend to be concentrated in urban or peri-urban centres); highly functional even in insecure environments; and able to bounce-back quickly from shocks, the decision to provide cash needs to take into account a number of different factors. Considerations of efficiency – given the time required to mobilise, transport and distribute in-kind goods for example - must be balanced against considerations of do no harm; financial service providers' operational reach; effectiveness (in ensuring the intended humanitarian outcome) and protection risks/opportunities.

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Indeed, the role of cash as a pull factor in Hirat and Qala-e-Naw provincial capitals during the recent drought response has highlighted the importance of having a nuanced, informed and critical approach to the use of cash in humanitarian programming. In response to increasingly tense relations between local authorities, host communities and IDPs after initial cash distributions, partners decided not to provide the

standard multi-purpose cash grant normally given to conflict IDPs (\$375 per household), but rather smaller, sector-specific grants (such as cash-for-food grants of \$80 per household). The rationale for this was that smaller grants would make it less likely that rural households would migrate to Hirat or Qala-e-Naw cities for \$80 than they would for \$375.

Given the recent drought response experience, in 2019 the Cash and Vouchers Working Group (CVWG) will lead a detailed discussion within the humanitarian community on the specific conditions and considerations that need to be taken into account when deciding on cash-versus-in-kind assistance, in line with Grand Bargain commitments and specific contextual factors in Afghanistan. The CVWG will also explore possibilities for using cash-for-livelihoods as part of drought-related recovery efforts, while further streamlining timely and accurate reporting of cash-based transfer programmes to ensure accurate data on the types, scale and location of these programmes across the country, as well as capturing geographic and temporal trends. In line with recommendation three of the global SIDA evaluation of cash inclusion in HRPs, the updated 2018-2021 HRP includes sector-specific cash targets, by activity and beneficiary category, indicating the share of assistance each cluster plans to provide in cash.<sup>60</sup>



### Strategic use of pooled funds & local empowerment

Pooled funding has been fundamental in addressing critical humanitarian priorities across Afghanistan in 2018 including drought-related needs, winterisation and emergency trauma care. Overall, the AHF and the CERF have disbursed a combined total of \$76.7 million, to 41 partners (12 national NGOs, 22 international NGOs and 7 UN agencies) through 2 AHF standard allocations, 6 AHF reserve allocations and 1 CERF rapid response allocation. These allocations enabled 84 projects, providing life-saving humanitarian assistance to 3.5 million beneficiaries. Overall, pooled funds represented 17 per cent of all funding received towards the HRP in 2018 (\$460 million against a revised requirement of 599 million). The AHF is essential to kick-starting life-saving activities included under the HRP, while the CERF is critical in responding to new or unforeseen emergencies. In 2019, it is envisaged that the AHF will provide seed funding to initiate the integrated drought response pilot in Badghis province, which is aimed at preventing those currently experiencing Emergency (IPC 4) levels of food insecurity from deteriorating further, and supporting early recovery and resilience-building to protect affected communities from further shocks.

Significant investments have been made by the humanitarian community in 2018 to enhance engagement with national NGOs, ensuring wider coverage by and increased sustainability of humanitarian action. This has manifested itself in a number of ways, including:

1. More than doubling the number of national NGO partners eligible to receive AHF funding from 22 in 2017 to 46 in 2018, mainly due to a revised due diligence process;
2. The use of 17 national NGO partners as enumerators in the WoA Assessment, funded by the United Kingdom's Department for International Development (DFID) with the support of the Agency Coordinating Body for Afghan Relief and Development (ACBAR)'s twinning programme, thereby building the assessment capacity of local counterparts.

With worsening security in 2019 a possibility, along with a contraction in the UN and NGO footprint, it is likely that national partners will become increasingly critical to the response and that further investments in capacity-building will be required. This will range from efforts to improve their technical and core management skills, through to developing and managing financial and accountability frameworks, as well as understanding of and ability to operate within humanitarian principles. Continued engagement with the ACBAR twinning programme, which pairs national NGO and international partners through peer mentoring schemes, will be an essential part of this process.

## HUMANITARIAN

## ACCESS

Constraints and limitations on humanitarian access continue to pose a challenge to the delivery of assistance across Afghanistan, with organisations facing a range of obstacles to the movement of personnel and goods due to ongoing conflict, administrative requirements imposed by both government and NSAG members, and restricted road travel. With the presence of the State receding in many areas, context-sensitive strategies which engage all parties to the conflict in a safe, coordinated and principled manner are increasingly required by the humanitarian community.

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Deteriorating security has adversely affected humanitarian space across Afghanistan in 2018. The ability of aid workers to move staff and assets throughout the country has increasingly been hampered by insecurity along key transit routes (Kabul to Kandahar, Kandahar to Hirat, Hirat to Badghis, Kandahar to Tirinkot and Faizabad to Maimana), including the establishment of non-government checkpoints, resulting in a greater reliance on air transport which is both costly and time-consuming to arrange. Critical humanitarian supplies such as tents and mine clearance equipment have also been held at border points as authorities have demanded tax payments, while lengthy memorandum of understanding (MoU) procedures for the approval of humanitarian projects have led to significant delays in the start-up and implementation of emergency response activities which should be exempt from this requirement under Article 23 of the NGO law. Reports of NSAGs pressuring NGOs to pay tax in exchange for access to areas and affected people have also been increasing.

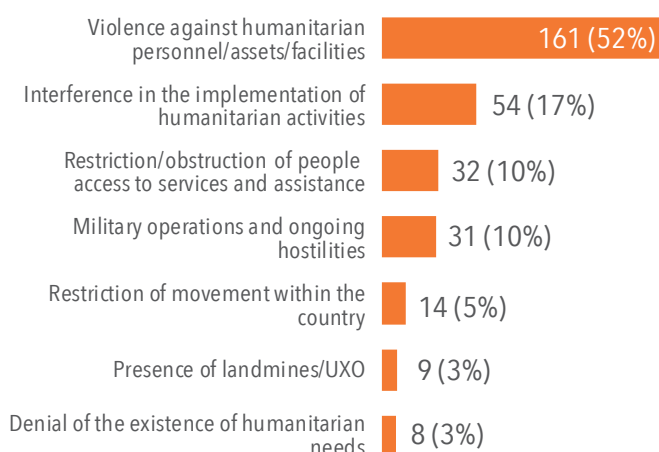
At the operational level, the environment has become equally inhospitable to humanitarian action, negatively affecting the reach of partners. In 2018, violence against humanitarian personnel, assets and facilities continued to be the most reported of all access constraints, with this incident type comprising more than half (52 per cent) of all incidents reported so far this year, an increase of 12 percentage points on 2017.<sup>61</sup> Of particular concern has been the increase in threats and intimidation against aid workers operating in the education, health and demining sectors in Nangarhar, Farah and Uruzgan provinces – some of which have translated into actual violence – and which have led to the suspension of related programme activities. Other constraints reported in 2018 include: interference in the implementation of humanitarian activities (17 per cent); restriction or obstruction of people's access to services and assistance (10 per cent); as well as military operations and ongoing

hostilities (10 per cent).

Although humanitarian access-related challenges are widespread, geographically the highest number of reports come from the eastern, southern and western regions, including Nangarhar (49), Kabul (29), Zabul (20), Badghis (19) and Kandahar (18) – all provinces where a high number of IDPs and aid workers are concentrated, negatively impacting project implementation.

The humanitarian access group (HAG) remains the primary forum in Afghanistan through which operational coordination takes place to analyse and discuss humanitarian access issues. Priority issues for the HAG in 2019 include greater negotiations with parties to the conflict on road access, interference in programming, and taxation requests, as well as technical support for ongoing efforts to amend the NGO Law to provide a transparent and simplified process that expedites endorsement of short-term emergency projects.

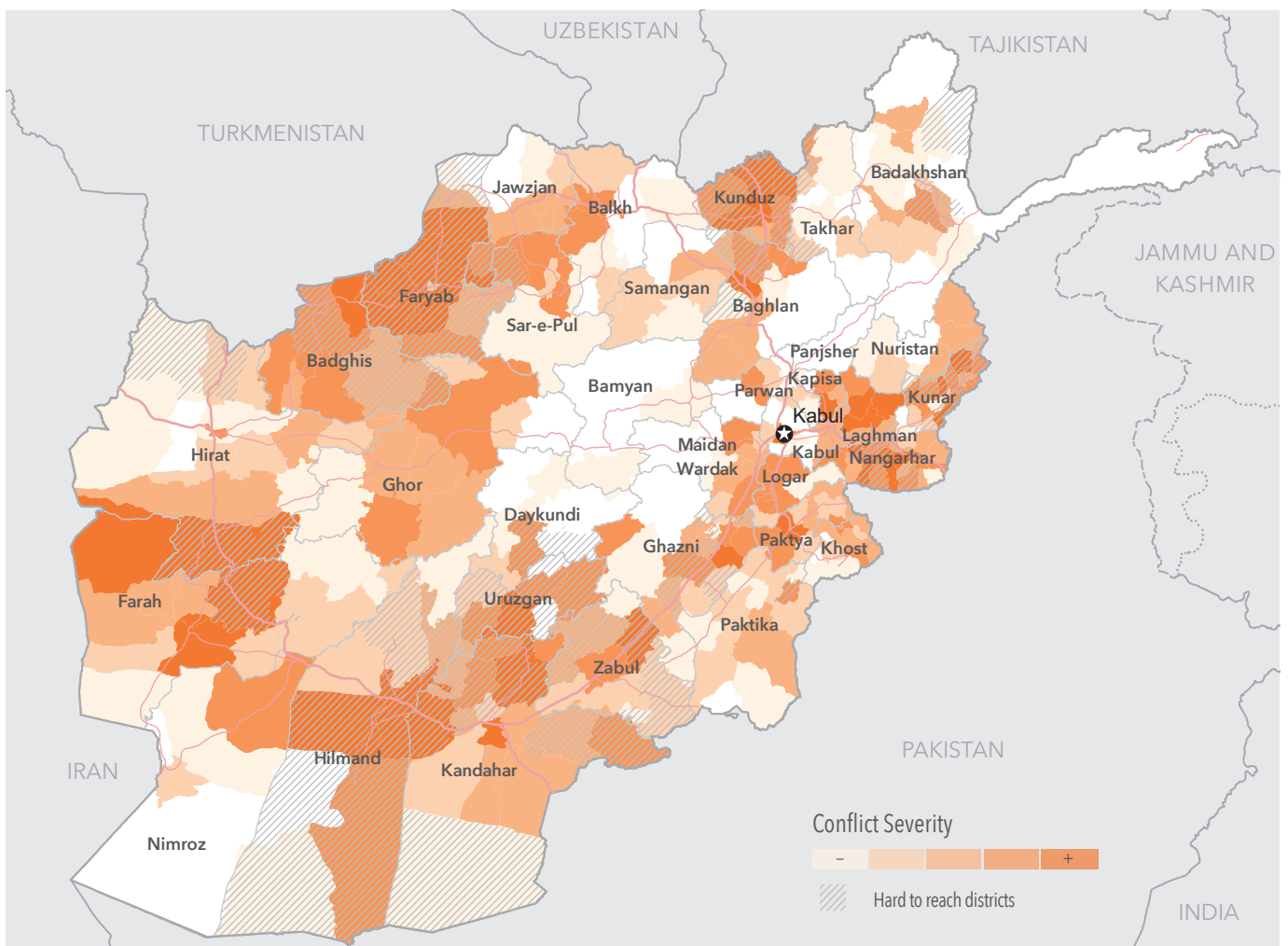
## ACCESS-RELATED INCIDENTS (2018)



In 2018, new opportunities have emerged for both direct and indirect humanitarian negotiations with parties to the conflict. Both government and NSAG representatives have recently emphasised their willingness to allow cross-line operations to alleviate human suffering, particularly in drought-affected areas. In this regard, the HAG continues to support a humanitarian environment that fosters a more open dialogue around engaging with NSAGs for improved humanitarian outcomes. This will be supported through the sharing of best practices regarding communication with NSAGs and

clarifying organisational positions on engagement, as well as efforts to build the capacity and confidence of field-based colleagues to engage directly in negotiations. In addition to encouraging principled humanitarian engagement, the HAG will also continue to collect and analyse information on access trends to support evidence-based advocacy with the donor community, humanitarian coordination entities and local authorities.

## CONVERGENCE BETWEEN CONFLICT SEVERITY AND ACCESS CHALLENGES



Conflict severity is derived from three indicators - armed clashes and air strikes, conflict-induced displacement and civilian casualties recorded over the past year.

**OPERATIONAL**

# CAPACITY

In 2018, the number of partners managing or implementing projects across Afghanistan has increased to 166.\* Despite this, concerted efforts are still needed to consolidate field presence, particularly in more rural and remote locations, where needs are currently the greatest.

Currently there are 83 national NGOs and 72 international NGOs, as well as 11 UN organisations participating in the humanitarian response. Overall, some 34 partners are operating in the western region (20 per cent of the total). These are primarily concentrated in Hirat rather than Badghis province given the former’s status as a major population centre and hub, despite Badghis being the source of most drought-related displacement in 2018. The integrated drought response pilot planned for four districts (Ab Kamari, Bala Murgahb, Muqur and Qadis) of Badghis province in early 2019 is expected to address some of these existing imbalances, however, and improve response coverage across multiple sectors, at the same time as expanding geographic footprint.

Outside of the drought response, humanitarian presence is well established in the 5 additional provinces where needs are the most severe (Faryab, Hilmand, Kandahar, Nangarhar and Zabul), with Nangarhar and Kandahar particularly well served, where at least 6 partners, operate in 55 per cent of both provinces. In 2018, humanitarian assistance delivered to these five provinces represented close to a third of all aid delivered in Afghanistan. Furthermore, operational response capacity in hard-to-reach districts influenced or controlled by NSAGs, including in Hilmand and Faryab has also increased somewhat in 2018: Hilmand now has 30 per cent of districts with more than 5 partners (a 20 per cent increase on last year), while Faryab has a partner presence in all its districts, compared to 2017 when there were no partners in more than a third of districts. The increase in operational capacity in hard-to-reach areas has been facilitated by dedicated funding provided by the AHF to support project implementation across 45 selected districts, and a greater investment in partnerships with national NGOs, including through sub-contracting and sub-implementing arrangements.

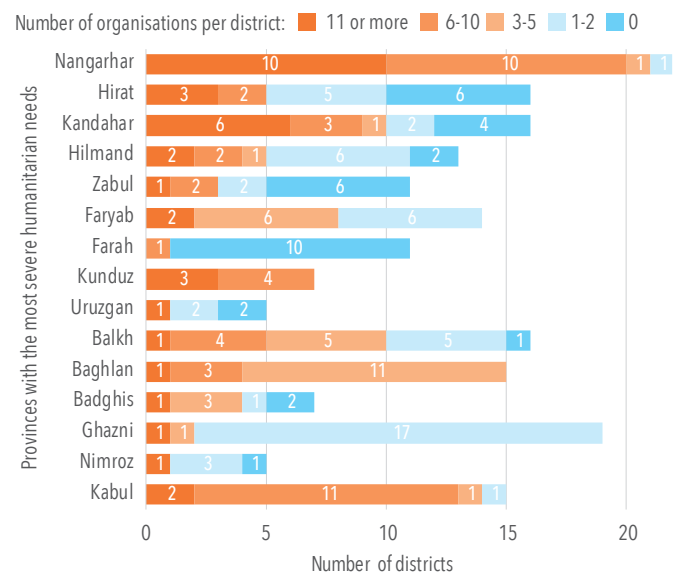
Moving forward, the humanitarian response may have to rely more extensively on national NGOs – who currently comprise half of all active organisations under the coordinated humanitarian response – such that systematic capacity-building, including trainings and mentoring schemes, will need to be both adequately resourced and regularly undertaken. Indeed, innovative approaches which encourage

\*Only 158 participate in regional level Humanitarian Response Teams (HRTs).

the willingness of partners to not only ‘stay and deliver’ but also to ‘enter and stay’ will be required, given that operational capacity and the reach of partners in Afghanistan is closely linked to sustained and unfettered humanitarian access, adequate and predictable resourcing from donors, and the ability to retain necessary staff in areas where the needs are the greatest.

The ongoing presence of Daesh/ISK in Nangarhar province will therefore continue to serve as a major test of the resolve of humanitarian actors operating there. Of the 72 aid workers killed (23) and injured (49) so far in 2018, almost a third of these occurred in Nangarhar province alone, mainly as a result of Daesh/ISK attacks in Jalalabad City. The fact that NGOs are considered legitimate targets by Daesh/ISK – not because they are NGOs but because they are foreign, including national actors who receive international donor funding – has led to number of them reconsidering the sustainability of their operations in the area.

**NUMBER OF OPERATIONAL PARTNERS PER DISTRICT**







## RESPONSE

## MONITORING

Partners will continue to undertake regular response monitoring to measure progress against multi-year targets outlined in the logframe, and assess the performance and value of humanitarian action. Programmatic adjustments will also be made to the response as dictated by the situation on the ground, to ensure that it is aligned with the nature and scale of the needs present.

In 2018, the HRP was revised twice: first in May following the declaration of drought and again in November following publication of findings from the Emergency Food Security Assessment (EFSA) which showed that the impact of the drought was worse than initially thought. Being able to make time-sensitive and evidence-based changes to the HRP will remain fundamental to retaining a flexible and agile response over the next three years, and to ensuring that assistance is directed to the people and areas that need it the most, in a manner that is consistent with humanitarian principles.

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In this regard, the HRP will continue to operate as a living document that can incorporate changes in needs, planning assumptions, targets and financial requirements, as necessary. A shift in the information-management approach will also be made, moving away from dense situation reporting towards the creation of more analytical products which support effective prioritisation and strategic decision-making, such as issues-based or thematic dashboards, as well as successful advocacy and resource mobilisation efforts.

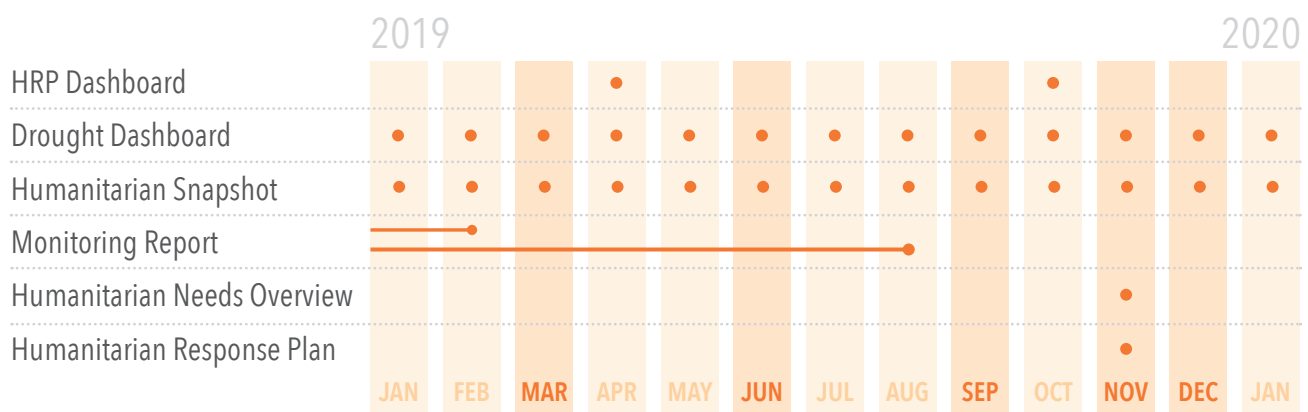
One year into the multi-year response plan however, progress against results remains mixed. Sectors continue to face challenges in obtaining comprehensive and high-quality indicator and target reporting from partners due to a variety

of factors, including: limited access to conflict-affected areas for monitoring purposes; limited staff resources; and limited understanding or awareness of reporting systems. Overall, some 14 out of 85 indicators included in the original logframe were not reported against at all in the first half of 2018, while 25 others set either no baselines or no targets against which to track progress.

In order to rectify this and ensure a more accountable and relevant response for affected populations and donors alike, the clusters have recently been engaged in an exercise to remove obsolete indicators and replace or amend others, and provide updated and complete information for related datasets (i.e. baselines and targets). The results of this exercise can be found in the updated logframe on pg. 59.

Combined, these challenges have revealed how incredibly hard it is in a protracted and complex context such as Afghanistan to have an impact on the underlying or structural causes of need; measuring this progress is even harder. While the humanitarian community will thus continue to strive to measure strategic objectives and outcomes in terms of the overall reduction in need and vulnerability, in line with Grand Bargain commitments, expectations must be tempered by ground realities, particularly given the lack of a proven

## HUMANITARIAN PROGRAMMING CYCLE TIMELINE



monitoring and evaluation methodology for doing so and limited prospects for longer-term handover to government and development counterparts.

### Reporting

The ICCT and HCT will monitor the response on a quarterly basis with related reports and data made publicly available at <https://www.humanitarianresponse.info/en/operations/afghanistan>. In-depth periodic monitoring reports will be published bi-annually: at the mid-point at the end of quarter two, to inform planning figures, priority activities and budget revisions for the second half of the year; and at the end of quarter one of the following year to evaluate

the previous 12 months. These will be supplemented by the publication of two HRP dashboards (at the end of quarter one and three) which summarise achievements to date against a select set of indicators. Monitoring will be undertaken at the activity, output and outcome level. The HCT will ensure that challenges and recommendations for action identified through monitoring are collectively addressed to ensure the effective delivery of humanitarian assistance.

Throughout the year, support and trainings will also be provided to donors and cluster partners to ensure that financial contributions towards the HRP are accurately reflected through the Financial Tracking Service (FTS) in a timely manner, including sector-specific breakdowns, so as to enable strategic allocations from the AHF to be made.

## CONSEQUENCES OF

## UNDERFUNDING

Late or insufficient funding for the multi-year HRP will undermine efforts to respond comprehensively to the drought, not only in areas of displacement, but also of origin – where needs are arguably much greater. It will also place undue stress on already over-burdened communities hosting large numbers of IDPs and returnees, while compromising preparedness in a country that is among the most vulnerable in the world to climate change impacts<sup>62</sup> and other sudden-onset shocks. The effect of this is not only that lives may be lost in the short, medium and longer-term, but that agencies will be caught in a perpetual cycle of short-term aid delivery rather than focusing on efforts to reduce risk or vulnerabilities over time and ultimately, therefore, drive down overall need.

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When an operation is underfunded this tends not to result in a proportional cut across the board to all activities such that they are equally affected, but rather that limited humanitarian financing is invariably directed towards life-saving activities: towards emergency trauma care in the aftermath of a suicide bombing; towards the treatment of SAM in children under five; or towards the provision of initial relief packages for families fleeing violence or instability. While this is an appropriate, prioritised response to a funding shortfall, it comes with significant costs to human dignity and to initiatives focused on preparedness and sustainability which seek to pre-empt or reduce the need for humanitarian assistance over time.

This is not only a question of aggregate funding; the timeliness is also critical, since delayed disbursements can have a serious impact on the ability to meet time-bound needs – for example, those which may be influenced by seasonality (including winterisation and production cycles) – and which therefore go either completely unaddressed or are inadequately dealt with if disruptions or discontinuities in service provision occur.

In line with the above, the humanitarian community in Afghanistan has identified the following consequences of underfunding across a number of different areas in 2019 and beyond:

**Drought-induced displacement may become both an acute and chronic problem, and food insecurity levels may worsen:** Currently more than 220,000 people live in undignified and harmful conditions across 19 displacement sites in Badghis and Hirat provinces due to loss of livelihoods and assets in their areas of origin. Over three million more

remain in their rural communities, where they are severely food insecure and have limited or no purchasing power to improve their current conditions. Without sustained and complementary humanitarian support over at least the next year to enable them to recover lost assets and re-establish economic opportunities, these populations could be exposed to ever-more extreme levels of food insecurity and be forced to increasingly rely on negative coping mechanisms, such as exploitative work and migration to urban centres, in order to survive. Rather than alleviating their needs, these coping mechanisms often only serve to compound them and often disproportionately affect the young, the elderly and the infirm.

**Voluntary and sustainable returns are not be possible:** In areas where the security situation is conducive to return, IDPs and people who have newly-arrived home in Afghanistan may be reluctant or unable to do so because housing and infrastructure have been damaged or destroyed by fighting; safe water supplies are simply not available or are inadequate; and the health or education facilities are not in place to support the number of people requiring these services. This is particularly the case in provinces experiencing substantial population inflows, such as Jawzjan and Nimroz – where IDPs and returnees now make up 40 per cent of all residents<sup>63</sup> – and where there is already considerable strain on existing resources. Recent mapping of under-served districts carried out by the Health cluster found that 46 per cent of the population in Nimroz cannot access health services by any means, while 52 per cent lack access to secondary referral care.<sup>64</sup>

**Preparedness actions required to adequately manage and respond to a sudden influx of returnees are not implemented:**

While the estimated number of returnees to Afghanistan in need of humanitarian assistance in 2019 remains relatively low at 149,000,<sup>65</sup> arrival rates remain subject to regional political and economic dynamics such that a sudden surge in returns cannot be ruled out.<sup>66</sup> At present, preparedness activities – including the physical expansion of reception sites at border points in Nimroz and Kandahar provinces and scaling-up of services within host communities – are unable to take place due to insufficient resourcing. Based on a contingency planning exercise undertaken in 2018, humanitarian partners estimate that it would cost approximately \$10 million to improve post-arrival facilities at the Spin Boldak border point (expected to receive 30 per

cent of all returnees from Pakistan) and extend essential support to local communities, including livelihoods assistance and equipping the district hospital with life-saving medical supplies.

Over the past few months, OCHA has been working with partners to ensure that financial contributions are both regularly reported and accurately reflected through the FTS in a timely manner. This has included bilateral follow-ups with donors and additional trainings – or FTS clinics – to cluster and NGO partners. In 2019, a particular focus will be given to national NGOs, which are generally less familiar with the process and have less capacity to meet reporting requirements.



**SUMMARY OF**

# NEEDS, TARGETS & REQUIREMENTS

PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE AND FINANCIAL REQUIREMENTS FOR 2019

PEOPLE IN NEED



6.3M

PEOPLE TO TO BE ASSISTED



4.5M

REQUIREMENTS (US\$)



612M



BREAKDOWN OF PEOPLE TO BE ASSISTED

	TOTAL		CONFLICT-affected	POPULATION MOVEMENT				DISASTERS		ACCESS to basic services	SEX & AGE % children, women, men*	REQUIREMENTS	
	People in need	People to be assisted		Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani refugees	Sudden-onset	Slow-onset			Refugee chapter	Total (US\$)
EiE	0.5M	0.3M	0.09M	0.05M	0.09M	0.02M	0.02M	0.02M	-	0.05M	100   0   0%	0.4M	33.8M
ES-NFI	1.0M	0.8M	-	0.34M	0.25M	0.08M	0.05M	0.10M	-	-	60   20   20%	4.1M	48.3M
Food Security	4.9M	3.9M	-	0.35M	0.30M	0.20M	0.04M	0.11M	2.94M	-	59   20   21%	-	278.8M
Health	1.9M	1.5M	0.19M	0.08M	0.09M	0.07M	0.03M	0.01M	0.17M	0.88M	59   20   21%	-	51.4M
Nutrition	2.1M	1.0M	-	0.08M	0.05M	0.05M	0.01M	0.03M	-	0.74M	78   22   0%	-	57.6M
Protection	2.4M	1.3M	0.49M	0.25M	0.10M	0.11M	0.03M	0.02M	0.34M	-	71   16   13%	4.3M	44.7M
WASH	2.1M	1.3M	-	0.30M	0.16M	0.13M	0.04M	0.10M	0.30M	0.27M	59   20   21%	-	36.4M
MP Cash	-	0.5M	-	0.35M	-	0.16M	-	-	-	-	59   20   21%	-	23.9M
<b>TOTAL</b>	<b>6.3M**</b>	<b>4.5M**</b>	<b>0.50M</b>	<b>0.35M</b>	<b>0.30M</b>	<b>0.21M</b>	<b>0.05M</b>	<b>0.11M</b>	<b>2.94</b>	<b>1.31M</b>	<b>60   20   20%</b>	<b>8.8M</b>	<b>***612</b>

\*Children (<18 years old), men, women (adults, >18 years). \*\*Total figure is not the total of the column, as the same people may appear several times. \*\*\*Total also includes UNHAS & Coordination.

# PART II: OPERATIONAL RESPONSE PLANS

-  Education in emergencies
-  Emergency shelter & non-food items
-  Food security & agriculture
-  Health
-  Nutrition
-  Protection
-  Water, sanitation & hygiene

-  Multi-purpose cash assistance
-  Refugee chapter

2019 PEOPLE IN NEED



PEOPLE TO BE ASSISTED



REQUIREMENTS (US\$)



## EDUCATION IN EMERGENCIES



The Education in Emergencies (EiE) response plan aims to provide safe, equitable, relevant and age-appropriate education opportunities for crisis-affected girls and boys in Afghanistan. Accessing education during emergencies is not only a child’s right, but also a potentially life-saving turning point. EiE support is physically and psychosocially protective and tries to take children out of the immediate crisis situation where they are deeply vulnerable to abuses and exploitation, and place them in an environment where their social, emotional, cognitive and developmental needs are addressed. EiE activities emphasise traditional subjects, including mathematics, science and language, as well as life-skills and life-saving messages.

education provided.

These modalities are all supported by the sector’s agreed minimum standard teaching and learning materials in the form of classroom, teacher and individual student kits. Activities are intended to include full packages consisting of: TLS, CBE, teacher recruitment and training, psychosocial support, and the provision of teaching and learning materials. All children receive parts of the package based on their actual needs, with responses specially tailored to IDPs, returnees and vulnerable host-community children, who may have different requirements including life-skills training for adolescents focusing on social-cohesion.

The activities are aimed at ensuring the eventual transition of affected children into the formal system. The intention is for the Ministry of Education to lead this process and absorb students into its formal schools. The same activities the were implemented in 2018 will continue in 2019-2021, but these will be scaled-up in light of the upcoming presidential elections and the anticipated interruptions to education these could bring.

### Multi-year strategy

The chosen strategies for bringing targeted school-age children back to education include: providing temporary learning spaces (TLSs), whenever possible set-up within a formal school; offering community-based education (CBE) or accelerated learning classes (ALC); offering catch-up classes; and early multi-grade teaching (Years 1-6) in the community itself, protecting younger children from having to travel to the nearest school until they are old enough to transition to formal schools. Due to a shortage of funds, the provision of TLSs in formal schools has only been possible by double-, or sometimes triple-shift<sup>67</sup> teaching which is not ideal but is designed to minimise risks to the quality of

### Response approach

For 2019, EiE partners will target almost 350,000 IDP, returnee and vulnerable host community children with critical and acute humanitarian needs.<sup>68</sup> In line with the principles of the Afghanistan HRP 2018-2021, the EiEWG does not list all children

### BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	% children, women, men*
PEOPLE IN NEED	0.13M	0.07M	0.13M	0.03M	0.02M	0.03M	-	0.08M	100   0   0%
PEOPLE TO BE ASSISTED	0.09M	0.05M	0.09M	0.02M	0.02M	0.02M	-	0.05M	100   0   0%
FINANCIAL REQUIREMENTS	SECTOR: \$33.4M		REFUGEE CHAPTER: \$0.4M			TOTAL: \$33.8M			

\*Children (<18 years old), men, women (adult >18 years old)

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## PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)

	2019	2020	2021
People in need	0.49M	0.35M	0.34M
People to be assisted	0.35M	0.3M	0.3M
Requirements (US\$)	33.8M	24.9M	24.9M
Target share of assistance in cash (%)	0%	0%	0%
Assistance to be provided in cash (US\$)	-	-	-

who are out-of-school as PiN but instead focuses on the most vulnerable boys and girls who are out-of-school due to sudden shocks. EiE partners will target school-aged children in provinces where there are large concentrations of IDPs and returnees who are most affected by the ongoing conflict and drought: Badghis, Baghlan, Balkh, Faryab, Hilmand, Hirat, Kabul, Kandahar, Kunduz, Nangarhar, Takhar and Uruzgan.

Looking forward, the Afghanistan EiE target for 2020 is estimated to be just over 300,000 people, while the target for 2021 is estimated to be almost the same. These forecasts represent 73 per cent of the 2019 PiN figure. The EiE working group (EiEWG) has based its forward projections on recent conflict trends, where a decrease in displacement has been noted in 2018, even though the number of children out-of-school continues to remain high in conflict-affected or natural disaster areas. The calculation also anticipates that the impact of the drought will not go beyond 2019; and that the number of returnees from Pakistan will remain relatively modest. The PiN figure will have to be re-calculated based on the environment in 2020 and 2021.

The displacement situation is dynamic with comprehensive data on the number of affected children changes rapidly, especially in drought-affected provinces where families are continuously moving. EiE studies<sup>69</sup> consistently show displaced children are likely to miss-out on education and are subject to increased protection risks in their areas of displacement. Thus, the goal is to offer returnees, IDPs and the most vulnerable families access to education, with a reduced financial burden, so as to limit the number of families using

negative coping mechanisms.

### Inter-sector programming

The EiEWG has been working closely with the UNICEF/UNAMA Monitoring and Reporting Mechanism (MRM) team and the Child Protection in Emergencies (CPiE) sub-cluster to ensure that protection issues are addressed in a conflict-sensitive manner in the humanitarian response, and that mitigation measures are applied during implementation and monitoring of the programme. As an inter-sectoral component, 2019 activities will be integrated with child protection actions to minimise the risk of families resorting to child marriage, child labour, exploitation and harm. A WASH component will also focus on improved hygiene practices in learning spaces through the training of teachers and community representatives.

### Efficiencies & effectiveness of multi-year programming

In support of the HRP objectives for 2019, the EiE working group will strengthen its support to the response through the production of quality information management products which are widely shared with donors and others for advocacy and awareness; strong data analysis; assessment result compilation and interpretation; capacity-building of partners (including government counterparts) in planning, response, monitoring and reporting; and improved identification of and coordinated response to gaps. Sub-national coordination in Hirat, Kabul, Kandahar, and Nangarhar will be a special focus during the coming years with the aim of improving monitoring and reporting, as well as promoting informed and active participation of implementing partners, provincial and district-level education department officials (PED/DEDs), donors and OCHA, to ensure the most vulnerable children are reached, duplication is avoided, and inter-sectoral linkages on the ground are strengthened.

### Links to development programming

Decades of conflict have had a devastating impact on Afghanistan's society, undermining access to and the quality of basic services such as primary schooling. The long-standing education deficit due to poverty and underdevelopment cannot be overcome through humanitarian action alone, despite the legitimate education needs among 3.7 million

children who are currently out-of-school in Afghanistan. Through humanitarian assistance, EiE partners are prioritising their response to meet the immediate education needs of out-of-school children who are affected by conflict and disaster, especially those who are displaced. It is of utmost importance that the gains that have been made in education in the last two decades are not lost either due to the ongoing conflict or the extreme overcrowding presently being witnessed in many primary schools as a result of accommodating large numbers of IDP and returnee students. These risks threaten to undermine the already fragile state of Afghanistan's formal education system.

Education is, by its very nature, at the nexus of the humanitarian and development fields. National EiEWG meetings are also attended by development donor representatives, and dialogue with development donors such as the World Bank (the managing entity of the Education Quality Reform in Afghanistan or EQRA) will be strengthened during the coming year to ensure EiE and development education responses continue to be fully aligned for the sake of the many children currently deprived of their right to education because of acute humanitarian needs or chronic problems. Activities are also in line with the 'Education Cannot Wait' Multi-Year Resilience Programme, that will be launched in 2019.

#### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
85	95	83	85

The cost of providing emergency education per child is approximately \$95 in 2019, up from \$85 last year. The increase in the cost per child in 2019 is due to higher operational costs in hard-to-reach areas; an improved EiE integrated approach with child protection partners, improved monitoring mechanisms and increased reporting requirements under the 'Education Under Attack' initiative and the provision of additional life-skills activities for youth and adolescents. 2020 and 2021 costs have been estimated based on projected targets and requirements.

EiE activities will improve access to quality education through community-based and innovative approaches with the support of key stakeholders in the field, including local authorities. The EiE working group at national and sub-national levels will oversee work related to developing and scaling-up the programme, including linkages between humanitarian and development needs, as well as coordination with various stakeholders in the education sector in the country e.g the Development Partners Group (DPG) etc. to document lessons-learned from work completed and to identify opportunities for expansion of successful strategies in future planning by the Ministry of Education.



## 2019 PEOPLE IN NEED



## PEOPLE TO BE ASSISTED



## REQUIREMENTS (US\$)



## EMERGENCY SHELTER & NON-FOOD ITEMS



The aim of the Emergency Shelter and Non-Food Items (ES-NFI) cluster is to provide life-saving assistance to people affected by conflict and natural disaster, including the current drought-displaced population, by protecting them from the elements, mitigating protection risks and ensuring people's dignity and safety. Priority target populations include: IDPs, returnees and vulnerable host communities. The response will be tailored through a multi-sectoral, integrated approach in coordination with the Government, development actors and through engagement with communities.

### Multi-year strategy

In 2019, the cluster will prioritise:

1. Vulnerable families who have been directly impacted by new emergencies including returnees, those at risk of eviction and those living in open spaces in both accessible and hard-to-reach areas by providing emergency shelter and NFI assistance that ensures their privacy and dignity, while mitigating protection and health risks.
2. The improvement of existing shelters that are in poor condition particularly for prolonged IDPs, returnees and newly displaced families. Vulnerable, prolonged IDPs and returnees with secured tenure will receive short to medium-term support for transitional shelters in the form of construction or rental assistance

to improve their privacy, psychological well-being, safety and security until a durable solution is found.

3. For the winterisation response, the cluster will focus on resilience-building through support such as the provision of solarised verandas to minimise the cost for heating during winter.
4. In response to the drought displacement, the cluster will support site management.

Looking forward to 2020 and 2021, the cluster will continue similar life-saving activities (emergency shelter, provision of NFI and shelter upgrades) due to anticipated ongoing conflict and disaster, as well as returns from Iran and Pakistan. Newly vulnerable families displaced and affected by conflict and natural disaster, as well as returnees have limited capacity to cope with the onset of winter and will continue to require initial assistance to survive and thereby mitigate negative coping mechanisms related to early marriage, child labour and other protection risks. Vulnerable returnee families and those exposed to prolonged displacement – either due to conflict, drought or other disasters – will require interim shelter solutions.

### Response approach

For the response, the cluster will prioritise the regions with the highest shelter, winterisation and NFI needs: the western, eastern,

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### BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	-	0.40M	0.30M	0.12M	0.05M	0.12M	-	-	60   20   20% 
PEOPLE TO BE ASSISTED	-	0.34M	0.25M	0.08M	0.05M	0.10M	-	-	60   20   20% 
FINANCIAL REQUIREMENTS	SECTOR: \$44.2M		REFUGEE CHAPTER: \$4.1M			TOTAL: \$48.3M			

\*Children (<18 years old), men, women (adult >18 years old)

**PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE,  
FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)**

	2019	2020	2021
People in need	0.99M	0.59M	0.56M
People to be assisted	0.82M	0.46M	0.46M
Requirements (US\$)	48.3M	41.7M	39.5M
Target share of assistance in cash (%)	88%	88%	88%
Assistance to be provided in cash (US\$)	42.5M	36.7M	34.7M

northern and southern regions. All those displaced by drought and living in the open without NFI will be targeted in 2019, complemented by site management activities. The priorities of the cluster are geared towards achieving protection outcomes through the integration of cross-cutting issues related to housing, land and property, protection, gender, age, disability and AAP. The cluster will prioritise the collection and analysis of sex and age disaggregated data to inform its response in addressing the different needs of boys, girls, women and men, as well as vulnerable groups including people with a disability, female-headed households and older people.

For 2019, the cluster will aim to assist 820,000 of the most vulnerable people in need. This will include emergency shelter and NFI assistance and a winterisation response. It also incorporates site management and physical site planning activities for drought-displacement in the Badghis and Hirat sites in the first half of the year. For 2020 and 2021, the cluster will cover just over 460,000 people who are classified as the most vulnerable families, focusing on life-saving activities. For 2020 and 2021, it is not expected that site management activities will be needed for drought IDPs as this is just an interim measure to facilitate and enable predictable humanitarian assistance, however transitional shelter support may still be required. The cluster will also increase its advocacy with the Government and development actors for a sustainable response through opportunities for livelihoods, income generation and durable housing.

Considering the development of a National Housing Policy, the cluster's transitional shelter design is expected to be

reviewed further in coordination with the Government, to obtain a more focused and mainstreamed approach among partners and strengthen synergies with development partners. Partners are expected to comply with the agreed technical guidelines and minimum standards in all ES-NFI cluster response activities.

The cluster uses both in-kind and cash modalities in its humanitarian response. The decision regarding which modality is chosen is based on market assessments, accessibility and availability of the commodities, as well as its capacity to meet the needs of the people. Cash will be used when considered the best option as it puts the onus on and empowers the people targeted, at the same time as giving flexibility in meeting their immediate needs and mitigating vulnerabilities. ES-NFI assistance (cash/in-kind) will be provided to affected people after identifying needs accurately and in line with the cluster's minimum standard. Efforts will be made to ensure the same level of assistance is provided based on needs by adjusting distributions to agreed standard packages.

Whether the response is in-kind or cash, the cluster recommends an integrated, multi-sector approach be adopted to prevent cash being used to meet needs outside of shelter and to ensure that families are adequately protected from the elements. Post-distribution monitoring has shown that due to the extent of other needs, targeted families often do not prioritise shelter and opt for very low-cost, sub-standard shelter, while continuing to live in overcrowded conditions. This situation often exposes vulnerable families, including those headed by single women, to protection risks and frequently does not allow separate spaces for women and girls.

Needs assessments, analysis and response will consider the collection of SADD and the various needs of girls, boys, women and men. Partners will ensure that assessment teams include women to enable adequate collection of information about the different issues that create barriers for women and girls in accessing ES-NFI cluster assistance.

### Inter-sector programming

The cluster will promote joint programming, assessments and an integrated, multi-sectoral response. In particular, ES-NFI activities, assessments, analysis and distributions will be done jointly with other clusters, where feasible, in order to guarantee cost and time-efficiency by using cross-sectoral vulnerability criteria to help promote joint responses.

The FSAC and/or the WASH cluster present a number of opportunities in this regard. Information-sharing within the cluster and with other clusters is vital to mitigating duplication and maximising the use of resources. The WASH cluster will complement NFI packages with hygiene kits and provide latrines to support emergency and transitional shelter assistance.

### Efficiencies & effectiveness of multi-year programming

Within the multi-year HRP strategy, the cluster will continue to provide life-saving assistance to newly-displaced people affected by conflict and natural disaster, as well as returnees. The cluster will continue to assist the most vulnerable families with one-off winterisation assistance and at the same time, build community resilience through alternative solutions such as passive, solarised verandas, where appropriate, to minimise the cost of heating and mitigate negative coping mechanisms. Moreover, the cluster will advocate for livelihoods opportunities, while supporting medium-term shelter solutions for the most vulnerable families, to mitigate the risk of eviction and foster peaceful co-existence with host communities. The challenges faced include limited job and livelihoods options to address medium- or longer-term shelter needs.

The number of local NGO partners participating in the cluster increased from 5 in 2017 to 13 in 2018 through sub-contracting arrangements with INGOs and UN agencies or direct engagement using support from the Afghanistan Humanitarian Fund and bilateral donors. This approach will continue to enhance the capacity of national partners and promote localisation. A gradual exit strategy will be initiated in 2019 with two Ministries: Afghanistan National Disaster

### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
78	58	90	86

The cost per beneficiary for 2019 is \$58 as compared to \$78 in 2018. This reduced cost is due to an increase in the use of cash modalities for rental assistance versus in-kind emergency shelter (tent + two tarps) in 2019 and the lower number of families targeted for transitional shelter assistance in 2019 (from 6,370 families in 2018 to 3,000 families in 2019). The average cost for transitional shelter per family is \$1,625 as compared to \$455 for emergency shelter assistance. 2020 and 2021 costs have been estimated based on projected targets and requirements.

Management Agency (ANDMA) and Ministry of Refugees and Repatriations (MoRR). This will include capacity-building through formal and on-site trainings, higher government involvement in cluster coordination functions through a coordinated shelter response and material support.

### Links to development programming

The cluster will continue to advocate with the Government and development actors, including UN Habitat, for more sustainable shelter solutions for IDPs, returnees and those affected by conflict or natural disasters. This includes empowering communities through resilience-building projects such as the CCNPP, and creating jobs and livelihoods opportunities. In addition, the land decree is one of the most vital processes to enabling a low-cost, durable housing solution. With the development of the National Housing Policy, it is hoped that vulnerable families will have greater access to adequate housing, complemented by other basic services, in line with the land allocation scheme.

2019 PEOPLE IN NEED



PEOPLE TO BE ASSISTED



REQUIREMENTS (US\$)



## FOOD SECURITY & AGRICULTURE



The objective of the FSAC is to improve the food security situation for disaster and conflict-affected, vulnerable people by providing access to nutritious food and protecting their livelihoods. Through regular assessments and gap analyses, FSAC leads an evidence-based, integrated response to assist those who are most vulnerable, especially women, children and people with disabilities. FSAC will continue to provide early warning information on food security to support the humanitarian community in developing contingency plans for a timely response to emerging needs. To ensure access to hard-to-reach areas, FSAC will provide trainings on assessments and response to local partners, engaging them in cluster activities.

focus on protecting vulnerable agriculture-based livelihoods by providing access to basic farming inputs, animal feed, animal vaccination, de-worming, small kitchen gardens and poultry farming to ensure food and nutrition security at the household-level. Food and agriculture-based livelihoods activities will help to ensure access to nutritious food.

### Response approach

Recognising that overall food security and livelihoods needs are much higher, FSAC has focused on those who are acutely in need by using strict vulnerability criteria. Vulnerable groups such as drought, conflict, and cross-border movement-affected communities are prioritised for the response. FSAC will coordinate its response with the WASH and Nutrition clusters to ensure the most urgent needs are met.

In 2019, FSAC partners will target just over 3.9 million people with food assistance and 1.8 million with livelihoods assistance, out of a total of 4.9 million people in need. People to be assisted have been identified based on findings from the recent EFSA, in the case of the drought and following findings from the WoA Assessment and FSAC-specific surveys for IDPs and returnees. Overall, 75 per cent of new conflict IDPs and 80 per cent of the returnees will be targeted for food assistance. The response to conflict and cross-border movements will be provided in

### Multi-year strategy

Humanitarian needs are widespread across the country. Almost 40 per cent of people in Afghanistan are experiencing either Crisis or Emergency levels of food insecurity according to the IPC system. FSAC's response will focus on immediate food assistance to avoid hunger, malnutrition and migration. A standard food basket has been designed to provide 2,100 Kcal per person per day for a family of 7 people. A similar cash amount of \$90 per month has also been set to match the cost of the agreed food basket in the local market. The FSAC response will favour cash where markets are functional and where transparent, secure cash transfer mechanisms are available. FSAC will also

### BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	-	0.35M	0.30M	0.20M	0.04M	0.11M	3.90M	-	59   20   21%
PEOPLE TO BE ASSISTED	-	0.35M	0.30M	0.20M	0.04M	0.11M	2.94M	-	59   20   21%
FINANCIAL REQUIREMENTS	SECTOR: \$278.9M			REFUGEE CHAPTER: -			TOTAL: \$278.9M		

\*Children (<18 years old), men, women (adult >18 years old)

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close coordination with OCHA, IOM and UNHCR and will be focused on reaching the most vulnerable people.

For 2019, FSAC is targeting 3.9 million people for food and livelihood assistance. To reach this target, FSAC is appealing for \$279 million (\$240 million for food and \$39 million for livelihoods) as its funding requirement. The funding requirement and number of people in need show a decreasing trend over the next three years, and this assumes that the current drought impact will decrease over time because of targeted assistance being provided and improved weather conditions, especially precipitation over the course of the next three years.

FSAC partners are increasingly using cluster vulnerability criteria to select people for assistance and avoid status-based assistance. The cluster will work with partners on further strengthening these needs-based tools, reflecting recent findings from the EFSA, in order to reach the most vulnerable as part of the response strategy for 2019. Recently-displaced people (within a six month period); people living in informal settlements without social support; large families with low incomes or reliant on volatile daily wages; those with a lack of productive assets; those with a high number of dependent children; those affected by major deficits in crop and livestock production; families with disabled heads-of-household, women-headed households, and families resorting to high food-based coping strategies such as limiting food portions and skipping meals, will be some of the criteria used to select people for assistance. Agriculture and livestock support will be provided only to subsistence farmers who are unable to afford to purchase it.

The FSAC priority is to use cash for the response, where appropriate. Currently, most of the response is provided through in-kind assistance. FSAC partners provide a combination of cash, in-kind and a mixed approach, as needed. To promote cash assistance as a modality for the response, FSAC is increasingly involved in market assessments and developing guidelines on cash responses for food and livelihoods packages. FSAC is also working closely with the CVWG to harmonise assessment and monitoring tools to support partners in conducting better response analysis. For the multi-year response strategy, FSAC established targets for the proportion of the response being delivered via cash modalities to push partners towards using cash where markets are functional, and where quality food and livelihoods packages, as well as transparent cash transfer mechanisms are available.

FSAC partners will continue to use the in-kind modality in

#### PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)

	2019	2020	2021
People in need	4.90M	2.63M	1.63M
People to be assisted	3.94M	2.14M	1.38M
Requirements (US\$)	278.8M	161.8M	104.1M
Target share of assistance in cash (%)	23%	31%	36%
Assistance to be provided in cash (US\$)	64.1M	50.1M	37.5M

rural areas, especially those where agriculture and livestock production remain significantly lower and where access to functional markets is challenging. FSAC partners, especially cluster lead agencies, are increasingly working with food producers to ensure quality nutritious food and livelihoods inputs are available in the local markets.

#### Inter-sector programming

The FSAC recognises the importance of an integrated, multi-sector approach to supporting affected populations. FSAC will focus on adopting an integrated response approach in 2019 and beyond. The cluster will work closely with the Nutrition, WASH and Health clusters to prevent malnutrition. Fully-aligned water, hygiene and nutrition support is necessary to achieve food security objectives. Most of the drought-affected areas have significant water and hygiene deficits and are lacking in health and nutrition services, so there is a clear need to design joint responses. FSAC is taking the lead in identifying the target locations where multiple needs exist through the EFSA.

Malnourished women and children identified by nutrition partners will receive food and agriculture assistance, including livestock support and kitchen garden activities. Additionally, FSAC will also link its activities with the WASH cluster through cash-for-work and asset-creation projects related to water, sanitation, and hygiene. By working closely with the Protection cluster, FSAC will strive to mainstream protection in all its activities. FSAC is committed to contributing to a standard integrated programming response package to avoid hunger and malnutrition. Currently, the ICCT is exploring



options to pilot an integrated response programme in four drought-affected districts of Badghis province to demonstrate the higher impact of joint programming.

### Efficiencies & effectiveness of multi-year programming

FSAC responses are more efficient and effective as a result of multi-year response planning, as most food security activities are seasonal, with spill-overs from one year to another. In 2018, FSAC faced serious challenges in the continuity of the response and compliance with reporting mechanisms, as most food responses were targeting assistance through peak hunger seasons which start from October and continue until the end of March the next year, while the winter cultivation season starts from November and continues until mid-February of the following year. Response planning and funding can now be better managed through the multi-year response plan.

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### Links to development programming

Food insecurity and poverty are on the rise in Afghanistan<sup>70</sup> because of continued conflict, climate change, cross-border movement and structural causes of food insecurity and poverty. Increases in both acute and chronic needs make collaboration between humanitarian and development actors inevitable. Based on the 2018 IPC analysis for November 2018-February 2019,<sup>71</sup> 9.9 million people are currently estimated to be in IPC phase 3 (Crisis); this is a 9 per cent increase in the number of people who were classified as being in IPC phase 3 last year (2017). In addition, a further 3.6 million people are now estimated to be in IPC phase 4 (emergency).

### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
60	72	76	75

The overall cost per person assisted has increased from \$60 per person to \$72 per person in 2019. This change is due to the multiple packages of assistance received as part of the drought response where, in most cases, the same beneficiaries are provided with food and agriculture or livestock assistance to avoid asset depletion, hunger and malnutrition. The cost of food assistance per person assisted per month, including support costs, remains at \$20 and the cost of the livelihoods package per person remained \$21, the same as last year. 2020 and 2021 costs have been estimated based on projected targets and requirements.

Development partners and the Government need to scale-up programmes, such as construction of irrigation channels, water reservoirs, Karez (underground irrigation), training of farmers through farmer field schools, natural resource management, pasture land management, and veterinary services. This work is especially urgent in vulnerable provinces with chronic food insecurity such as Badakhshan, Badghis, Daykundi, Farah, Faryab, Ghor Hilmand, Jawzjan, Kandahar, Nuristan and Uruzgan. FSAC will continue to advocate for these communities and guide its partners' efforts to link humanitarian activities with longer-term development programming for sustainable food security outcomes. FSAC will work closely with the Government (MAIL, the Department of Agriculture Irrigation and Livestock - DAIL and the Ministry of Rural Rehabilitation and Development - MRRD) and other development actors (e.g the World Bank, European Union, USAID) to coordinate its livelihoods programme.

## 2019 PEOPLE IN NEED



1.9M

## PEOPLE TO BE ASSISTED



1.5M

## REQUIREMENTS (US\$)



51.4M

## HEALTH

The aim of the Health cluster is to respond in a timely manner to immediate health needs in Afghanistan by ensuring access to critical and life-saving health services for acutely vulnerable people, particularly the provision of trauma care, rehabilitation and psychosocial support. The Health cluster also aims to strengthen health preparedness and resilience of the health system by focusing on disease surveillance and response to public health outbreaks, while reinforcing institutional and individual capacity to respond to disasters.

## Multi-year strategy

In 2019, the Health cluster will achieve its aims through four priority actions:

1. Ensuring 1.5 million vulnerable people in Afghanistan affected by conflict, natural disaster and population movement in districts are reached with quality, essential and life-saving healthcare services, including maternal and child health, reproductive health, mental health and psychosocial support, health services for the elderly and rehabilitation for people with disabilities. The Health cluster will work within the current health system to reach acceptable access to basic services for the population.
2. Ensuring that people affected by conflict receives life-saving trauma care in the 121 districts where there currently isn't any capacity to respond. The Health cluster will

aim to increase coverage and capacity for trauma care under the multi-year HRP to improve survival rates for victims of the conflict.

3. Responding to health emergencies and outbreaks through improved emergency preparedness, response and coordination by pre-positioning essential medicines and supplies, disease surveillance and assistance in conflict and disaster-prone areas that have limited capacity to respond.
4. Responding to immediate health needs in areas where health facilities have either been forcibly closed or damaged as a result of the conflict, through mobile services and provision of emergency medical supplies, as well as advocating with relevant parties on health violations of IHL.

## Response approach

Geographically, the cluster will primarily focus in the southern and eastern regions, with some additional programming in the west and north in response to the drought. The Health cluster's response prioritisation is guided by the ISSS under the thematic area 'Protection of Civilians and Armed Conflict'. The focus is on the two areas with the highest incidence of armed conflict, primarily Hilmand, Kandahar, Uruzgan and Zabul in the southern region, and Nangarhar and surrounding provinces in the east. Under the 'Population Movement and Forced Displacement' thematic area, provinces with

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## BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	0.25M	0.10M	0.09M	0.08M	0.03M	0.01M	0.17M	1.17M	59% children, women, 21% men*
PEOPLE TO BE ASSISTED	0.19M	0.08M	0.09M	0.07M	0.03M	0.01M	0.17M	0.88M	59% children, women, 21% men*
FINANCIAL REQUIREMENTS	SECTOR: \$51.4M			REFUGEE CHAPTER: -			TOTAL: \$51.4M		

\*Children (<18 years old), men, women (adult >18 years old)

**PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE,  
FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)**

	2019	2020	2021
People in need	1.90M	1.84M	1.75M
People to be assisted	1.51M	1.84M	1.75M
Requirements (US\$)	51.4M	58.5M	54.4M
Target share of assistance in cash (%)	0%	0%	0%
Assistance to be provided in cash (US\$)	0	0	0

the highest number of cross-border returns will be targeted: in order, Hirat, Nangarhar and Kandahar. Returnees from Iran have a very high burden of disease and often report multiple health issues upon their return to Afghanistan. These include trauma injuries, physical disabilities, mental health issues, drug addiction, communicable and non-communicable diseases. Finally, in 2019 the Health cluster will continue to respond to drought-affected people in the displacement sites, as well as areas of origin, primarily in the western and northern regions.

In 2020 and 2021, the number of conflict-affected people being targeted is expected to increase, given that the nature and severity of conflict-related injuries is deteriorating. The Health cluster also plans to increase coverage to address this need for expanded trauma care. Services for rehabilitation, mental health and psychosocial support will also need to increase given that trauma-related mortality is decreasing, while trauma-related morbidity and disability are rapidly increasing. Activities under the Health cluster for 2020 and 2021 will have the same focus and will aim to improve accessibility of essential health services to shock-affected people.

The Health cluster partners' response will include direct implementation services and in-kind support to people affected by conflict, forced displacement and natural disasters in order to increase access to essential life-saving health assistance. Through the provision of assistance by humanitarian actors and additional human resources to complement and support the health system during emergencies, partners will contribute to ensuring service continuity, reducing deaths and illness among shock-affected people. Other in-kind support will include materials such as medicines, medical supplies/equipment, and non-medical

equipment. In addition, the Health cluster will provide technical and resource support to strengthen the disease surveillance system. The Health cluster prefers to operate through fixed health facilities but will deploy mobile health teams (MHTs) as necessary. However, the Health cluster does recognise that a lack of medicine in health facilities is a frequent occurrence within the fragile health system in Afghanistan and patients will often require cash to purchase life-saving medicine. Market-based (cash) response options for health require further discussion and exploration before implementation. It is not expected that any significant share of beneficiaries will be assisted through cash in 2019-2021. The primary obstacle that remains to be addressed is the significant lack of accessible health services.

### Inter-sector programming

The Health cluster will integrate its programmes with other clusters at various levels and scales. In particular, the Health cluster will work with the Nutrition cluster to focus on shared resources and implementation modalities, while focusing on the medical treatment of SAM through therapeutic feeding units. In addition, the Health cluster collaborates with the Protection cluster to ensure the effective implementation of projects with activities spanning both sectors, addressing both mental health and psychosocial support, as well as responses to GBV. Gender will be mainstreamed to ensure that clinical management of GBV is improved. The cluster will work together with Protection colleagues and EiE partners to promote the protection of patients, health staff and health facilities in accordance with IHL. This will be achieved by developing improved monitoring tools and promoting joint advocacy initiatives. In collaboration with the WASH cluster, the Health cluster will ensure a WASH component in the assessment and rehabilitation of health facilities. The Health cluster will also engage with the WASH cluster to address water-borne disease outbreaks and joint information, education and communication activities related to hygiene behaviours.

### Efficiencies & effectiveness of multi-year programming

The Health cluster's strategy is aligned with the Ministry of Public Health (MoPH) National Health Strategy 2016-2020. Together with the MoPH and in coordination with Basic Package Health Services (BPHS) implementers, the Health cluster strategy will take advantage of the multi-year approach through direct service provision, as well as strengthening of national institutional partners. Contributing to long-term sustainability of the health system, the multi-year response

will target key drivers of vulnerability. This will include enhancing the capacity of health workers, establishing sustainable supplies of life-saving health resources and improving the resilience of health facilities and communities. Within the multi-year response, the Health cluster will aim to strengthen the capacity of national institutional partners and the MoPH to meet the critical and urgent health needs of the population.

### Links to development programming

In addition, the Health cluster contributes to the One-UN framework under the thematic groups of 'Health' and 'Return and Reintegration'. The Health cluster will strengthen links with development partners within this multi-year response by enhancing the capacity of health workers to respond in an emergency, establishing a sustainable supply of life-saving health resources and improving resilience of health facilities and communities. The Health cluster recognises the underlying driver of chronic needs remains the underdevelopment of a sustainable health system within Afghanistan.

The Health cluster will continue to advocate for durable solutions, increased capacity of health actors to respond to health emergencies through surveillance and monitoring

### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
26	35	32	31

The Health cluster requires \$51.9m in 2019 in order to assist 1.5 million people, which equates to \$34.60 per person assisted. The per capita cost for the upcoming year is higher than the amount for 2018 which was \$26.30 per person assisted. This change is due to several factors. In 2019, there is a higher caseload in terms of slow-onset natural disaster-affected people who will require emergency life-saving primary health services through rapid-response modalities such as MHTs. The cost of establishing MHTs is higher per person assisted than using existing health facilities. In addition, the increased need for rehabilitation among people with conflict-related injuries is now being included. The cost per person assisted for rehabilitation services is generally higher than other expenses given the technical nature of these services. 2020 and 2021 costs have been estimated based on projected targets and requirements.

systems, and increased rapid response capacity to reduce the underlying vulnerabilities that result in large humanitarian caseloads. The Health cluster aims to ensure that humanitarian and development activities are coherently aligned to provide sustainable and durable solutions to at-risk groups, effectively minimising vulnerabilities and subsequently reinforcing resilience.

2019 PEOPLE IN NEED



PEOPLE TO BE ASSISTED



REQUIREMENTS (US\$)



NUTRITION



The Nutrition cluster aims to ensure timely access to a package of life-saving emergency services to nutritionally-vulnerable and acutely malnourished children under five, as well as pregnant and lactating women (PLW) in provinces with a critical emergency-level nutrition situation. In addition, vulnerable children and PLW with heightened risk of malnutrition and mortality among IDPs, returnees, refugees and drought-affected communities, are also priorities for the nutrition response.

Multi-year strategy

The Nutrition sector is targeting almost a million boys, girls and women in 2019 with an overall funding requirements of \$57.6 million. The priority emergency nutrition response activities for 2019 include out-patient and in-patient treatment for SAM; case management of Moderate Acute Malnutrition (MAM) for children (6-59 months); targeted supplementary feeding for under-nourished PLW; emergency blanket supplementary feeding for children (6-23 months); Infant and young child feeding practices in emergency (IYCF-E) services for mothers and children; and the provision of micro-nutrient supplements to children (6-59 months). The cluster is working to strengthen referrals between the various components of emergency nutrition services and ensure a continuum of care for patients with acute malnutrition.

It is important to note that children with

MAM have an increased risk of mortality, infections and impaired physical and cognitive development compared to well-nourished children. Therefore, not having targeted nutrition-specific activities to address MAM in this context places children with MAM at excessive risk of adverse outcomes.

Nutrition needs in 2020 and 2021 are expected to remain more or less the same as in 2019 with just marginal increases in the number of acutely malnourished children and PLWs in line with population growth. Although the drought situation is expected to subside, evidence suggests that the basic/ underlying causal factors of malnutrition (i.e. poverty, food insecurity, poor health infrastructure etc.) are likely to deteriorate or remain unimproved in the coming years. The nutrition programme is mainly treatment-oriented and has low coverage when compared to overall need. Unless it is complemented with other multi-sector preventive programmes, it will not have significant impact in reducing burden.

It is anticipated that the same priority activities will continue to be implemented in 2020 and 2021, with an annual increase of about 15 per cent of the target. The number of nutrition facilities providing integrated management of acute malnutrition (IMAM), with both SAM and MAM treatment services, will be progressively increased.

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BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	-	0.09M	0.05M	0.05M	0.02M	0.03M	-	1.89M	81   19   0%
PEOPLE TO BE ASSISTED	-	0.08M	0.05M	0.05M	0.01M	0.03M	-	0.74M	78   22   0%
FINANCIAL REQUIREMENTS	SECTOR: \$57.6M		REFUGEE CHAPTER: -			TOTAL: \$57.6M			

\*Children (<18 years old), men, women (adult >18 years old)



## Response approach

The Nutrition cluster has prioritised provinces with a GAM rate of 10 per cent and above for emergency nutrition services; and over 70 per cent of nutritionally-at-risk PLW and children under five in emergency-affected population groups (returnees, refugees, disaster-affected communities and IDPs). A total of 22 provinces (Badakhshan, Badghis, Bamyan, Daykundi, Farah, Faryab, Ghazni, Ghor, Hilmand, Jawzjan, Kandahar, Khost, Kunar, Nangarhar, Nuristan, Paktika, Paktya, Parwan, Takhar, Uruzgan, Wardak, Zabul) are prioritised for emergency response with more than 1.1 million people to be assisted. The Nutrition cluster targets are set with an aim of achieving at least 50 per cent coverage of the people in need for most nutrition in emergencies (NiE) services. This is in line with the SPHERE standard minimum coverage for most NiE services in predominantly rural populations.

Sixty per cent of children with SAM are targeted for out-patient treatment services and 10 per cent of all out-patient SAM cases are ultimately expected to need in-patient treatment. Thirty per cent of MAM children under five and 40 per cent of under-nourished PLW benefit from the targeted supplementary feeding programme (TSFP). In addition, more than 70 per cent of children and PLW affected by rapid-onset crises are targeted for emergency nutrition services such as IYCF-E support, micronutrient supplementation or the blanket supplementary feeding programme (BSFP). Emergency nutrition services (IYCF-E, BSFP, micronutrient supplementation) are planned for the initial phase (three to six months) of the emergency response for people affected by rapid-onset crises. Thereafter these groups will receive assistance through BPHS partners' routine preventative and treatment services.

The Nutrition cluster aims to progressively increase the coverage of emergency nutrition services during the next three years. The ongoing scale-up of IMAM services through de-centralised delivery mechanisms such as basic health centres (BHC) and sub-health centres (SHC); the roll-out of the nutrition counsellor's package (a new cadre of nutrition workers assigned to health facilities), as well as capacity-development on monitoring and reporting will enable the attainment of progressively increased coverage of treatment and preventive services in the coming years.

The Nutrition cluster will explore the possibility of employing cash as an alternative and complementary modalities of assistance in 2019. Drawing from experiences in nutrition-sensitive cash programming in global humanitarian emergencies, the Nutrition cluster will adopt a cash modality,

## PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)

	2019	2020	2021
People in need	2.13M	2.12M	2.16M
People to be assisted	1M	0.92M	0.93M
Requirements (US\$)	57.6M	57.6M	58.9M
Target share of assistance in cash (%)	0%	0%	0%
Assistance to be provided in cash (US\$)	0	0	0

wherever appropriate, over subsequent years of the HRP. In the meantime, the Nutrition cluster will coordinate with the CVWG to determine the feasibility and appropriateness of cash modalities during the first phases of an emergency. Where food assistance is substituted with cash transfers, social and behavioural change communications (SBCC) activities on appropriate feeding will be implemented to influence and encourage the expenditure preference of families towards nutritious food for young children and nursing women.

## Inter-sector programming

Nutrition cluster partners will continue to engage with other nutrition-sensitive sectors (e.g. WASH, Health, FSAC and EiE) to maximise optimal nutritional outcomes. Emergency nutrition services are typically delivered either through the existing health facility platforms and/or through emergency mobile teams. The mobile nutrition teams in hard-to-reach areas have started to evolve into 'Nutrition-plus' mobile teams by integrating essential child healthcare services like immunisation, integrated management of childhood illnesses (IMCI) for children, maternal care services, and nutritional care. Acutely malnourished children with medical complications are referred to higher-level health facilities for better diagnosis and treatment. In coordination with the WASH cluster, emergency hygiene kits will be provided to acutely malnourished children and their care-givers wherever resources permit, while minimum handwashing facilities will also be set-up at in-patient and out-patient nutrition service centres. Health and nutrition staff and volunteers provide messages and health education sessions

**COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)**

2018	2019	2020	2021
89	60	62	63

The nutrition cluster requires \$57.5 million to respond to the needs of almost a million people. Last year, the cluster required \$63.4 million to reach 700,000 people. The cost per person assisted has now reduced from \$89.40 to \$60 per person. The cost reduction is attributed to an expected decline in prices of ready-to-use supplementary food commodities in 2019, already observed since the second quarter of 2018. 2020 and 2021 costs have been estimated based on projected targets and requirements.

on appropriate nutrition and health practices both at facility and community-level. Integration with food security and livelihoods, as well as cash-based programming will further be strengthened through co-location and convergence of blanket supplementary food distributions, alongside the provision of emergency food assistance.

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**Efficiencies & effectiveness of multi-year programming**

The multi-year nutrition response strategy provides an opportunity to gradually scale-up nutrition services in priority locations in order to reach the most needy and vulnerable populations. This will also enable partners to build the capacity of facility and community-based health and nutrition staff to provide quality nutrition services by progressively increasing coverage and effectiveness. Mobile teams providing emergency nutrition care for children and women will gradually hand-over these ongoing services to the nearest health facilities for greater sustainability and ownership. Joint monitoring and supervision visits will regularly be

conducted together with provincial and national-level MoPH counterparts to ensure quality services, as well as on-the-job training for field staff. The multi-year response plan is also expected to ease logistics constraints and improve the supply of nutrition treatment such as ready-to-use therapeutic and supplementary food through long-term planning and pre-positioning in priority provinces.

Meeting funding requirements through long-term commitments from donors may remain a potential challenge. An exit and expansion strategy for each province/district will be made through informed decision-making processes, based on the severity of the nutrition situation and caseloads identified through nutrition surveys (Standardised Monitoring and Assessment of Relief and Transition or SMART survey, Rapid SMART surveys), surveillance (Health Management Information System or HMIS) and monthly nutrition reports.

**Links to development programming**

Malnutrition is a multi-causal problem which requires an integrated, holistic programming approach. Therefore, the package of emergency nutrition activities is designed in such a way that it takes advantage of and complements the ongoing, longer-term health and nutrition service delivery mechanisms such as the BPHS. Prevention-oriented One-UN framework programmes complement the Nutrition cluster's more treatment-focused emergency programmes by strengthening referral linkages between prevention and treatment services, as well as contributing to enhancement of recovery, minimising the risk of relapse for acutely malnourished children and PLW enrolled in treatment programmes.

## 2019 PEOPLE IN NEED



## PEOPLE TO BE ASSISTED



## REQUIREMENTS (US\$)



## PROTECTION



The Protection cluster will focus on strengthening strategic and operational protection frameworks, capacity-building for internal and external actors (including communities and authorities on planning and implementing protection); resource mobilisation, and advocacy, all with the ultimate aim of contributing to reducing exposure of crisis-affected communities to physical and psychological violence and abuse. The goal is to better equip them to pursue dignified solutions to address the consequences of conflict and displacement through strengthened respect for IHL and IHRL, enhanced access to basic services and increased capacities, and resilience to prevent and mitigate protection threats. The Protection cluster will continue to pursue better integration and protection mainstreaming in the activities of other clusters and governmental counterparts.

## Multi-year strategy

The cluster will focus on the following priority activities from 2019 to 2021:

- Protection monitoring, including incident monitoring, to inform the response (expansion of protection services, including through referrals to specialised service providers) and evidence-based advocacy targeting both conflict and drought-affected communities (displaced and non-displaced);
- Humanitarian negotiation, engagement

and capacity-building targeted at armed actors, authorities and conflict-affected communities (with a focus on hard-to-reach areas) to enhance the protection of civilians and respect for IHL (including enhanced protection of education and healthcare facilities and personnel);

- Provision of community-based psychosocial support, with a focus on women and children;
- Legal assistance around housing, land and property (HLP) and legal documentation issues, with a focus on vulnerable displaced and returnee households;
- Landmine clearance, explosive ordinance disposal, surveying and mine risk education (MRE);
- An effort to ensure that at-risk GBV survivors who are IDPs, returnees and other conflict- and disaster-affected people receive assistance through a multi-sector response (legal, safety, health and psychosocial support);
- Strengthening of community-based child protection systems, awareness-raising and sensitisation, capacity-building, psychosocial support, case management and referral pathways; and
- Durable solutions, in the context of the humanitarian/development nexus, following an area-based approach.

Services are expected to remain largely the same in 2019, as the conflict is expected to continue, with an assumption that violence

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## BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	1.39M	0.25M	0.12M	0.22M	0.05M	0.02M	0.34M	-	66   17   17%
PEOPLE TO BE ASSISTED	0.49M	0.25M	0.10M	0.11M	0.03M	0.02M	0.34M	-	71   16   13%
FINANCIAL REQUIREMENTS	SECTOR: \$51.4M			REFUGEE CHAPTER: -			TOTAL: \$51.4M		

\*Children (<18 years old), men, women (adult >18 years old)

## PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)

	2019	2020	2021
People in need	2.40M	1.92M	1.68M
People to be assisted	1.34M	0.82M	0.78M
Requirements (US\$)*	44.7M	33.9M	29.1M
Target share of assistance in cash (%)	0%	0%	0%
Assistance to be provided in cash (US\$)	0	0	0

may intensify in the run-up to the presidential elections and in advance of any peace talks, but that this may subside in 2020 and 2021 along with the effects of the drought. As such 2020 and 2021 may see lower numbers of people in need of protection and, as such, lower sector targets for 2020-2021.

### Response approach

In 2019, the Protection cluster is targeting 1.3 million persons of concern (POCs) with protection services, while the number is expected to decrease to 820,000 in 2020 and 780,000 in 2021. Priority geographic areas for the Protection Cluster response in 2019 and beyond are provinces which have been, and will continue to be, particularly affected by outstanding protection risks due to active conflict, drought, displacement and returns. This prioritisation has been based on the analysis of results produced by country-wide needs assessments and related severity mapping exercises. As such, the Protection cluster will prioritise the following provinces, in order of need, throughout the period 2019-2021: Nangarhar, Kunar, Kandahar, Uruzgan, Hilmand, Hirat, Badghis, Faryab, Kunduz, Kabul, Ghazni, Zabul, Farah, Sar-e-Pul, Laghman, Ghor and Balkh.

Based on current and projected protection analysis, conflict-affected communities (both displaced and non-displaced) will continue to be considered the first priority group for the Protection cluster response; while drought-displaced, drought-affected non-displaced, and returnees (both documented and undocumented) will be the other categories of PoCs to be assisted by the cluster. The cluster will be prioritising particularly vulnerable groups across the above-mentioned categories for tailored assistance: women, children, people with disabilities, minorities and other people with specific needs (PSNs) such as female heads-of-household, elderly heads-of-household, child heads-of-household, and people with critical

\*Figures for 2020 and 2021 do not yet include IOM and UNHCR cash grant requirements.

medical conditions. Based on conflict and natural disaster dynamics, the above-mentioned targeting will be reviewed periodically throughout the HRP period. The Protection cluster will continue to analyse the protection environment and subsequent humanitarian needs in order to maintain flexibility in the response.

The Protection cluster only has cash engagement with returnees (refugees or undocumented), in the form of a cash grant, largely implemented by UNHCR and IOM. All other types of engagement are not focused on distribution, apart from the GBV sub-cluster's distribution of dignity kits, which will remain in-kind, due to its purpose and components. The other implemented activities are not suited to cash as a modality, for example protection monitoring, referrals, explosive ordnance disposal (EOD) and advocacy. These are either soft response components or are implemented through specific modalities which partner organisations cannot deviate from.

### Inter-sector programming

Protection considerations will be reflected throughout the humanitarian response at different levels. While all humanitarian actors involved in the response will be supported in order to help them fulfil their obligations to deliver safe programming (do no harm, conflict sensitivity, accountability, participation, etc.), specific protection components will be integrated, when relevant and appropriate, into multi-sectoral responses to achieve broader protective outcomes. In order to mitigate obstacles and risks associated to the implementation of sensitive, stand-alone protection activities, the Protection cluster will be strengthening collaboration with other humanitarian actors to integrate protection components into the work of other sectors, which it is hoped will improve access, increase community acceptance and outreach. The cluster will also continue to provide guidance on how other sectoral work can be improved in order to contribute to protection outcomes, and how to increase the accountability of all humanitarian action.

As such, field protection staff with complementary competencies (e.g. protection monitors, psychosocial support counsellors, case managers) will be integrated into emergency assessment and response teams (especially ES-NFI, Health, Nutrition, WASH), which will allow timely and conflict-sensitive identification and referral of protection cases. Moreover, protection advocacy and community-based engagement and response will be integrated into health and education responses with specific reference to IHL violations, especially attacks against health and education facilities, personnel and civilians accessing those services, as per the previously outlined common strategy in 2018.

### Efficiencies & effectiveness of multi-year programming

It is envisaged that large-scale conflict, coupled with the negative impact of natural disasters, will remain the main driver of protection needs throughout 2021. PoCs are often in need of more than one kind of protection support, due to their particular situation, and the Protection cluster will continue to target PoCs with multiple services, exercising caution to avoid duplication and assess the necessity of response on a case-by-case basis.

Protection capacities in Afghanistan are very weak and the presence of actors is not always best configured in areas of predictably-high conflict around the country. Also, insufficient funding and an inadequate focus on durable solutions by the international community at large are challenges that are expected to remain largely unaddressed, despite ongoing efforts. These efforts include advocacy with relevant government authorities around land allocation for local integration and principled relocation processes (versus forced evictions and forced returns); technical support to relevant government authorities on the reform of the land allocation scheme carried out by the Housing, Land, and Property Taskforce (HLP-TF); legal assistance and counselling around legal documentation, including personal IDs and security of tenure carried out by specialised cluster partners which contributes to enhanced access to services and job opportunities; ICCT guidance on durable solutions in the drought response; and community-based outreach and services aimed at enhancing social cohesion and co-existence.

Focusing on multi-year service delivery enables more appropriate capacity development, remedial action, and environment-building work to be undertaken. Better integration with development programming continues to be needed in order to achieve these tasks, as well as closer coordination and advocacy with the authorities at both central and local levels. Given this, the cluster is not envisaging a realistic possibility of de-activation by 2021, as the conflict will probably remain a major driver of needs in the Protection sector, combined with large-scale poverty.

### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
40	30	37	32

The average cost per person assisted in 2019 is \$30.18 compared to \$39.60 in 2018. This slight variation results from better targeting of activities, as well as from the fact that the numbers of conflict-related IDPs and refugee returnees are generally reduced compared to last year and the budgetary requirements are correspondingly being reduced.

### Links to development programming

While the Protection cluster will continue to be mainly focused on humanitarian protection assistance to address the most outstanding safety issues arising from crisis, it will be crucial to closely work with development actors to facilitate systemic work allowing for a transition towards peace-building, stabilisation, durable solutions and development. Poverty, socio-economic and ethnic discrimination, as well as a lack of access to basic services will have to be structurally addressed through development funding, while humanitarian protection should be better bridged to development through the provision of durable solutions aimed at ending the disadvantageous effects of displacement.

In particular, peace and reconciliation will need to be built through human rights-focused engagement, the implementation of and insistence on the rule of law, as well as the expansion of services for facilitation of durable solutions and social cohesion. From this perspective, a political solution to the ongoing conflict, the establishment of appropriate transitional justice mechanisms (peace and reconciliation, prosecution of criminal cases, etc.), expansion of public services, creation of job opportunities, the establishment and expansion of government safety nets for particularly vulnerable categories of people, sustainable housing solutions (starting with land allocation and the provision of security of tenure to displaced and returning communities) should be considered priorities by development actors, in close collaboration with humanitarian actors.



2019 PEOPLE IN NEED



PEOPLE TO BE ASSISTED



REQUIREMENTS (US\$)



## WATER, SANITATION & HYGIENE



The overall objective of the WASH cluster during 2019-2021 is to contribute to improving the health and dignity of people affected by emergencies, through the effective and timely implementation of emergency preparedness and response activities in water, sanitation and hygiene, with a priority of reaching the most vulnerable families first.

### Multi-year strategy

Key humanitarian WASH activities in 2019 will include: the provision of sufficient safe water, emergency sanitation, and hygiene awareness promotion, supported with a means of improving hygiene. A total of 1.3 million people will be assisted by WASH partners in 2019, of whom 49 per cent are women. With the forecast of El Niño weather conditions bringing above average precipitation in 2019-2020, ameliorating the impact of the drought, and the potential for a negotiated political settlement, the WASH cluster estimates a slight reduction in related humanitarian needs in 2020 and 2021. As such there will be lower HRP targets moving forward: 860,000 people for 2020 and 720,000 people for 2021.

### Response approach

For 2019, the top priority will be the provision of WASH packages (water supply by tankering, sanitation and hygiene) for drought-displaced families in Badghis and

Hirat. Drought-affected families in their place of origin will be assisted with durable water supply solutions. Immediate relief activities (water tankering, expansion/rehabilitation of water systems, emergency latrines and hygiene promotion) to save the lives of natural disaster-affected and conflict-displaced people will also be a priority. The WASH cluster is committed to maintaining services for returnees at the border (the zero point and transit centres). Based on needs assessments,<sup>72</sup> about 70 per cent of returnees end-up living in informal settlements or with host communities with limited or no WASH services where they face elevated risks of disease and will need intermediate to long-term solutions including rehabilitation or installation of new water points and the provision of emergency latrines.

Communities hosting IDPs/returnees, those living in hard-to-reach districts and Pakistani refugees living in Khost will also need assistance with durable solutions. Given the trend over recent years, the needs of all the above-mentioned categories, apart from slow-onset emergency (drought) still need to be prioritised for 2020 and 2021, albeit with progressively reduced caseloads.

Western region provinces such as Badghis, Ghor and Hirat are facing severe drought conditions. Drought IDPs living in informal settlements in Hirat and Qala-e-Naw will need continuous assistance until the middle of 2019. There is an urgent need to scale-up the response with durable solutions in places

### BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster-displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	-	0.40M	0.20M	0.16M	0.05M	0.14M	0.37M	0.83M	59   20   21%
PEOPLE TO BE ASSISTED	-	0.30M	0.16M	0.13M	0.04M	0.10M	0.30M	0.27M	59   20   21%
FINANCIAL REQUIREMENTS	SECTOR: \$36.4M		REFUGEE CHAPTER: -			TOTAL: \$36.4M			

\*Children (<18 years old), men, women (adult >18 years old)

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of origin, not only in Badghis, Ghor and Hirat, but also in the southern and northern regions which are affected by drought in places such as Balkh, Faryab, Hilmand, Jawzjan, Kunduz, Nimroz and Zabul. The timely supply of water by tankering in 2018 in many of these provinces prevented displacement. Hence, it is critical to build new water points or to rehabilitate existing ones to enable displaced people to stay and prevent further displacement. People displaced by conflict have been experiencing acute shortages of WASH services and needs are more immediate in provinces with higher IDP caseloads which include Badakhshan, Badghis, Balkh, Faryab, Hilmand, Kunduz, Nangarhar, Takhar and Zabul.

People affected by rapid-onset emergencies (especially floods) also need immediate assistance. Past trends indicate that Badghis, Sar-e-Pul and Takhar provinces usually face more natural disasters. Families of both documented and undocumented returnees, especially those from Pakistan, face a higher risk of lack of access to WASH services: Kabul, Kandahar and Nangarhar are the provinces with highest need. Pakistani refugees living in Khost continue to suffer from limited WASH services and high risk of disease outbreaks. Diarrhoeal and under-five child malnutrition rates are much higher than the national average among conflict-affected communities living in hard-to-reach districts, due to limited WASH services and hence also need to be prioritised.

In 2015-2016, ERM partners used cash-for-WASH NFI (cash was given instead of hygiene kits). Post-distribution monitoring found that more than two-thirds of women reported that they did not get any benefit from cash compared to in-kind hygiene kits which they could control in terms of distribution and use. Partner feedback also suggests that over 80 per cent of IDP or returnee households are headed by men who do not consider hygiene to be a major issue and so do not prioritise hygiene supplies for spending. In general, according to the Danish Committee for Aid to Afghan Refugees (DACAAR),<sup>73</sup> female beneficiaries do not have any control over the money they receive and do not have sufficient market access to use the cash. On the other hand, experience shows that providing in-kind kits, coupled with hygiene messages, makes an impact on women and encourages them to adopt safer hygiene behaviours which prevent illness. Given cultural beliefs and barriers around the use of water and sanitation, the WASH cluster concludes that it is still too early to replace in-kind with cash for WASH services.

### Inter-sector programming

Nationally, more than a quarter of health facilities lack basic water and sanitation services, including a place for hand-washing for medical staff where there is soap and water available. Such conditions compromise the efficacy of health

### PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)

	2019	2020	2021
People in need	2.14M	1.48M	1.27M
People to be assisted	1.3M	0.86M	0.72M
Requirements (US\$)	36.4M	27.2M	25.5M
Target share of assistance in cash (%)	0%	0%	0%
Assistance to be provided in cash (US\$)	-	-	-

and nutrition activities, especially during emergencies when the facilities are overcrowded. WASH in schools is an essential element of creating an enabling environment for children to attend classes, including protection from infectious diseases (40 per cent of school-going children contract diarrhoeal diseases in schools). With over half of formal schools lacking WASH services in their yard, additional caseloads resulting from returnee/IDP children and the absence of WASH services mean an exposure to a highly contagious environment.

The WASH cluster will coordinate with Health, Nutrition and Education in Emergencies partners to provide WASH services in health facilities, therapeutic feeding centres, child-friendly spaces and temporary learning centres in a systematic way. An inter-sector strategy will be developed to ensure such integration is done in a strategic manner. Collaboration will be enhanced with FSAC to ensure that both drought IDPs and families receiving food assistance in informal settlements or places of origin also receive sufficient quantity of safe water and hygiene promotion messages. Even the highest quality WASH services become ineffective if families are living in makeshift shelters (or in the open air), exposing children and women to hostile environments (cold, wind and dust). The WASH cluster will work closely with Shelter colleagues to ensure that quality WASH services are provided for all families in conjunction with quality shelter.

### Efficiencies & effectiveness of multi-year programming

The multi-year HRP is a positive development that is expected to allow more time for improving the quality of response and collaboration with development partners. The cluster database shows that a sizable number of IDPs and returnees live with

## COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
31	29	32	35

The WASH cluster requires \$36.44m in 2019 in order to assist 1.28 million people. The per capita cost for 2019 (\$28.50) is slightly lower than HRP 2018 (\$31.30) where a total of 800,000 people were targeted for an estimated budget of \$24 million. The reason for the lower cost per person in 2019 is due to the fact that more than 20 per cent of the caseload in 2019 (an estimated 274,000 people) are as a result of the slow-onset emergency (drought) who will only need water supply assistance, which is just one component of WASH services. In addition, 12 per cent of the caseload are drought-displaced people (160,000) living in Hirat and Qala-e-Naw. For the purposes of the WASH cluster's calculations, it is assumed at least 40 per cent of this caseload, particularly from Qala-e-Naw, are expected to return to their place of origin, and therefore would only need services for the first two-three months of 2019. Considering this, the estimated per capita cost of \$28.50 for 2019 is comparable with that of previous years and is in line with the global and regional inflation rate. 2020 and 2021 costs have been estimated based on projected targets and requirements.

host communities and share water sources. With the increased number of people sharing water points, which are often in a dilapidated condition, there is a risk of water shortages and high wear-and-tear on functioning water points due to over-use. Over-crowded facilities are also a major source of contamination and assist in spreading disease. In addition, over-crowding can trigger tension among users leading to conflict between new arrivals and host communities.

The multi-year HRP provides opportunities to focus on durable solutions that can cater to the needs of both IDP/returnees and host communities and hence create an enabling environment for integration. Likewise, there are many communities, especially in hard-to-reach districts of Badghis, Faryab and Jawzjan that live in areas deprived of improved water sources and have limited underground or surface water

sources. These are also the areas with highest food insecurity, needing food assistance for most of the year. These areas need water tankering every year during the summer. With a multi-year HRP, the cluster hopes that there will be donor support for partners to plan integrated and longer-term projects in these areas, thus reducing vulnerabilities and ongoing dependency on humanitarian food and water assistance. Such longer-term projects provide opportunities for more intense community consultation and for better utilisation of local resources.

### Links to development programming

A tailored humanitarian response in the place of origin will help improve the displacement situation, but in order to reverse the phenomenon, there is a need for strong, integrated, multi-sectoral development action that not only addresses the immediate survival needs of the population but also creates livelihoods opportunities looking ahead. People affected by slow-onset (drought) and protracted crises, returnees and IDPs among the host communities, as well as conflict-affected communities who suffer from chronic shortages of basic services, all lack sufficient presence of humanitarian and development actors in their area to assist. This remains an ongoing problem. Focused and prioritised programming by both development and humanitarian actors in these areas to build resilient WASH infrastructure and enhance community awareness (e.g. improved hygiene and sanitation knowledge) will contribute to reducing the disease burden and will improve nutrition. Resilient communities are also better able to cope with rapid-onset emergencies like natural disaster.

PEOPLE TO BE ASSISTED



REQUIREMENTS (US\$)



MULTI-PURPOSE CASH ASSISTANCE



Multi-purpose cash (MPC) assistance is primarily used by humanitarian partners in Afghanistan as a short-term, emergency support for recently-displaced households - either conflict IDPs or returnees from Iran or Pakistan. MPC is seen as a more flexible and efficient way of covering the various needs of displaced people (e.g. shelter, NFI, food, transport etc.) compared to sector-specific, in-kind or cash grants. MPC allows people to choose how to allocate the assistance package they receive to meet their specific needs which vary depending on household-level characteristics, as well as their location and the cause of their displacement/needs.

provided to documented and undocumented returnees from Iran and Pakistan by UNHCR and IOM. The value of these grants is not based on the SMEB but rather is calculated to cover specific needs (e.g. transport and re-integration support in the case of documented returnees and transport and NFI for undocumented returnees). The IOM cash grant is, on average, \$275 per household,<sup>74</sup> while the UNHCR grant is on average \$200 per person (\$1,400 for a household of 7 people which is the average household size used for all other MPC grants).

Multi-year strategy

There are two main types of MPC assistance provided by partners in Afghanistan. Firstly, emergency MPC grants are provided through the ERM and other NGO partners to recently-displaced conflict IDPs, to cover their needs for one or two months. The value of these emergency MPC grants is based on the SMEB approach - i.e. the estimated amount of cash needed for a displaced household in Afghanistan to cover all of its basic needs for one month (including food, shelter, NFI, transport and basic health). This is currently set at 17,000 AFN (\$227) per household for the first month and 11,000 AFN (\$147) for the second month (total of 28,000 AFN or \$373 for two months). Secondly, post-arrival cash grants are also

Emergency MPC assistance for conflict IDPs is provided across the country in accordance with needs. In 2018, this included Ghazni, Farah, Faryab and Kunduz provinces - although smaller-scale displacement (and an associated MPC response) occurred across most of the country (with the exception of the Central Highland region). While displacement is expected to continue in 2019 and beyond, given the volatility and fluidity of the current political and security situation it is difficult to predict with certainty the areas which will be most affected or the exact numbers which will be generated. As such, an agile and flexible response will therefore be required. In 2019, partners plan to assist 350,000 conflict IDPs through MPC (the projected target caseloads for 2020 and 2021 are 315,000 people and 280,000, respectively - based on the assumption that the conflict may subside over time given new-found opportunities for peace and that the current

BREAKDOWN OF PEOPLE IN NEED AND PEOPLE TO BE ASSISTED BY VULNERABLE GROUP, SEX AND AGE

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE
	Conflict-affected	Conflict-displaced	Natural disaster displaced	Afghan returnees	Pakistani Refugees	Sudden-onset	Slow-onset	Access to basic services	
PEOPLE IN NEED	-	-	-	-	-	-	-	-	% children, women, men*
PEOPLE TO BE ASSISTED	-	0.35M	-	0.16M	-	-	-	-	59   20   21%
FINANCIAL REQUIREMENTS	SECTOR: \$23.9M			REFUGEE CHAPTER: -			TOTAL: \$23.9M		*Children (<18 years old), men, women (adult >18 years old)

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**PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)**

	2019	2020	2021
People in need	-	-	-
People to be assisted	0.51M	0.48M	0.45M
Requirements (US\$)*	23.9M	22.3M	20.6M
Target share of assistance in cash (%)	100%	100%	100%
Assistance to be provided in cash (US\$)	23.9M	22.3M	20.6M

\* Financial requirements for MPC reflect transfer values only and implementation costs will be factored in at a later date.

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character of the conflict will continue to result in lower numbers of IDPs.

Post-arrival MPC assistance for returnees is concentrated in IOM and UNHCR's transit/encashment centres located at the border (e.g. Spin Boldak, Zaranj) or in main cities (e.g. Hirat, Kabul, Mazar). In 2019, IOM plans to assist 163,000 undocumented returnees from Iran and Pakistan. The projected target caseload for 2020 and 2021 is just over 165,000 people and almost 168,000 people, respectively – based on the assumption that in the coming three years, returns from Iran will increase slightly, while those from Pakistan will decrease slightly.

### Response approach

MPC grants are meant to cover most of the basic needs of a displaced household in a single, consolidated grant, and thus avoid the artificial distinctions of sector-specific cash grants. However, it is important to note that there are some needs that cannot be addressed through MPC (or cash more generally), and can only be addressed through an in-kind provision of specific services or infrastructure, such as many health, education, protection or WASH-related needs. No amount of cash given to households will ensure that local clinics are staffed and stocked with medical supplies, that schools are open and safely accessible to students, or that latrines or drinking water are available nearby.

MPC should therefore complement, rather than substitute, such sectoral activities. Under the ERM for example, WASH activities are systematically provided as in-kind support, along with the MPC assistance. In 2019, more concerted effort will be invested into ensuring that MPC activities - particularly for conflict IDPs - are better linked with sector-specific services and other in-kind assistance (e.g. better referral systems to health programmes for conflict IDPs who have received MPC assistance).

All MPC programmes in Afghanistan at the moment are one-off, emergency grants meant to cover immediate survival needs of displaced households, and thus do not aim to be sustainable or to reduce the need for assistance in subsequent years. However, emphasis will be placed in 2019 on ensuring better linkages between this short-term MPC assistance and longer-term durable solutions initiatives. Better linkages are needed at two levels: (a) on the prevention side, ensuring that longer-term development programmes (in particular WASH, durable shelter and livelihoods-related activities) target key areas of origin from which many of the IDPs who receive MPC assistance typically come. It is hoped that this will help prevent displacement and therefore reduce the number of people who need to be supported with MPC; and (b) on the early-recovery side, where the aim will be to connect households that have received one-off emergency MPC assistance with longer-term recovery assistance (in particular related to livelihoods and shelter), either in their place of displacement or their place of origin, depending on the context. The aim is to ensure that displaced households do not fall into chronic poverty and so do not return to the humanitarian portfolio in subsequent years.

### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
73	47	46	46

The average cost per person assisted for MPC activities in 2019 is projected to be \$47, compared to \$73 in 2018. This reduction in cost per person assisted is due to the reduction in the average size of the MPC cash grant for conflict IDPs under the ERM, with only the most vulnerable households now receiving two-months assistance, while less vulnerable households only receive one month of assistance, thus decreasing the average MPC cash grant size across all conflict IDPs from \$429 in 2018 to \$373 in 2019. 2020 and 2021 costs have been estimated based on projected targets and requirements.

## 2019 PEOPLE IN NEED



## PEOPLE TO TO BE ASSISTED



## REQUIREMENTS (US\$)



## REFUGEE CHAPTER



UNHCR's strategy for Pakistani refugees in Khost and Paktika will focus on scaling-down direct activities and responsibly handing-over coordination of the response to the MoRR. UNHCR will continue to ensure the protection of refugees of other nationalities in urban areas, together with the Government. Key emphasis will be placed on promoting self-reliance through community-based protection measures and the provision of targeted assistance to people with specific needs. UNHCR will advocate for enactment of a National Refugee Law and for the inclusion of refugees in national priority programmes to facilitate their access to essential services, particularly healthcare and education, while continuing to monitor the situation and providing support to the Government.

## Multi-year strategy

UNHCR's multi-year strategy for 2019-2021 focuses on four foundations: protection

monitoring and data analysis; policy support and capacity development; engaging the humanitarian-development-peace nexus; and facilitating durable solutions through coordination and innovation. The strategy reinforces the centrality of protection in the humanitarian response, with advocacy, coordination and partnership based on a protection risk analysis, as well as effective information management.








UNHCR will work in partnership with local and international NGOs, other UN agencies, and the Government, with a focus on the following protection goals: (1) building the capacity of the Government to assume responsibility for coordinating the refugee response; (2) effectively responding to the protection risks faced by refugees; (3) empowering communities to mitigate protection risks and fostering integration and peaceful co-existence through community-based protection measures; and (4) engaging the Government, partners and diverse actors to achieve sustainable solutions.

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## BREAKDOWN OF PEOPLE IN AND PEOPLE TO BE ASSISTED BY SEX AND AGE

\*Children (<18 years old), men, women (adult >18 years old)

\*\*the total figure is not the total of the column, as the same people may appear several times

	PEOPLE IN NEED			PEOPLE TO BE ASSISTED			US\$
	Total	% children, female, male*		Total	% children, female, male*	Financial requirements	
 EDUCATION IN EMERGENCIES	20K	100   0   0%		20K	100   0   0%	\$0.4M	
 EMERGENCY SHELTER & NON-FOOD ITEMS	50K	59   22   19%		50K	59   22   19%	\$4.1M	
 FOOD SECURITY & AGRICULTURE	40K	59   22   19%		40K	59   22   19%	-	
 HEALTH	30K	59   22   19%		30K	59   22   19%	-	
 NUTRITION	20K	74   26   0%		15K	76   24   0%	-	
 PROTECTION	50K	59   22   19%		30K	96   2   2%	\$4.3M	
 WATER, SANITATION & HYGIENE	50K	59   22   19%		40K	59   22   19%	-	
<b>TOTAL</b>	<b>50K**</b>	<b>59   22   19%</b>		<b>50K**</b>	<b>59   22   19%</b>	<b>\$8.8M</b>	

## CONTACT

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## PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE, FINANCIAL REQUIREMENTS & CASH ASSISTANCE (2019-21)

	2019	2020	2021
People in need	0.05M	0.05M	0.05M
People to be assisted	0.05M	0.05M	0.05M
Requirements (US\$)	8.8M	8.8M	8.8M
Target share of assistance in cash (%)	3%	3%	3%
Assistance to be provided in cash (US\$)	0.2M	0.2M	0.2M

\* Requirements for 2020 and 2021 are estimates only and assume that refugee numbers will remain unchanged.

### Response approach

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UNHCR will continue advocating for a principled approach to ensure the eventual voluntary repatriation or local integration of the refugee population in safety and dignity, making links between regional and national frameworks for coherence and complementarity. Activities with the refugee population will focus mainly on Khost and Paktika provinces, where some 75,000 refugees from Pakistan are currently residing. Activities will also be implemented for about 500 refugees and asylum-seekers of various nationalities living in Kabul and other major cities.

The focus in the coming years will be on promoting self-reliance through community-based protection measures that target the most vulnerable, including cash-for-work initiatives, rehabilitation of basic community and productive infrastructure, market-driven technical and vocational training, as well as self-help group approaches. The provision of assistance, including food, shelter and NFI, will target refugees with specific needs, while referrals to appropriate service providers will be made to take advantage of complementary programmes.

### Inter-sector programming

UNHCR will advocate with government counterparts at the national and provincial levels to increase refugees' freedom of movement and access to public services, with particular emphasis on health and education. UNHCR and its partners will implement activities that support vocational training in marketable skills to refugee women and girls and others who are particularly vulnerable, in addition to conditional cash-for-school assistance to increase the number of refugee

girls who have access to primary and secondary education. UNHCR will continue targeted advocacy with resettlement countries on behalf of refugees with specific protection needs, including refugees with serious medical conditions, female-headed households, refugees from minority communities, and others with protection needs.

UNHCR and its partners will continue to address the immediate concerns of refugees with specific needs through the provision of cash, NFI, and livestock support to mitigate exposure to protection risks and negative coping mechanisms. While Pakistani refugees in Khost and Paktika generally benefit from the support of host communities and well-established support networks within the population, many among the urban caseload face heightened protection risks due to isolation and having either limited or no community support. This results in barriers to accessing basic services. In this context, the support provided by UNHCR and its partners is critical to ensuring a dignified existence and the realisation of basic rights.

UNHCR provides cash to cover food, rental subsidies and other basic needs to families who present with specific vulnerabilities (approximately 10 per cent of the refugee population). The amount is tailored to family composition and specific circumstances, with needs re-assessed annually, taking into account coping mechanisms that families have developed and other sources of income they may have (e.g. remittances). While structural and systematic challenges are addressed, cash grants to support primary and secondary education will continue to be provided, as needed. Cash-based medical assistance will be provided to support refugees, especially those with life-saving or chronic needs. All activities will be addressed through a comprehensive process of identification, assessment, verification, delivery of assistance, and monitoring. While UNHCR has provided winterisation assistance for many years, this programme will be discontinued in 2019.

### Efficiencies & effectiveness of multi-year programming

Partnership is key to UNHCR's multi-year strategy for Afghanistan that aims, first and foremost, to provide protection and solutions for refugees and others of concern. Over the coming three years, UNHCR will expand engagement with relevant government ministries, UN agencies, NGOs and development partners to facilitate integration, while advocating for the inclusion of refugees in national services. By the end of 2021, UNHCR hopes to achieve durable solutions for the majority of the refugee population from Pakistan's North Waziristan Agency, with the ultimate aim of facilitating their return to Pakistan in safety and dignity or their formal integration into Afghanistan's



society. In this regard, UNHCR will engage with the Government and refugee-hosting communities, particularly through community development councils, (CDCs), shuras and civil society organisations, to promote inclusion and participation, especially of youth, girls and women, and to support development through a ‘whole of community’ approach.

### Links to development programming

Some 20 UN agencies and NGOs are involved in responding to the needs of refugees in Afghanistan. The main governmental counterpart is MoRR at the national level and DoRR at provincial levels. UNHCR and its partners continue to strengthen engagement with other line ministries and departments that have a role in refugee protection. Collaboration with relevant government counterparts, development actors and the private sector is underway to bridge the gap between humanitarian assistance and medium- to long-term development support for refugees as well as returnees and IDPs. The Durable Solutions Working Group (DSWG) – led by MoRR and co-chaired on rotational basis by UNHCR, UNDP and IOM – promotes sustainable solutions through inter-agency initiatives, joint and complementary

### COST COMPARISON PER PERSON ASSISTED 2018-21 (US\$)

2018	2019	2020	2021
132	176	-	-

Roughly \$176 will be spent on each refugee assisted in 2019, compared to \$132 in 2018. As UNHCR does not yet have an indication of its budget for 2020 and 2021 it is not possible at this stage to predict any changes in this figure moving forward.

programmes, as well as targeted advocacy.

The Government has already laid out its vision for national development in its Mutual Accountability Framework (MAF) and in the Afghanistan National Peace and Development Framework (ANPDF). Initiatives have begun toward integrating the needs of refugees, returnees and IDPs in national priority programmes across different sectors, with strategies being developed by respective line ministries. This will need to be further developed and expanded in 2019 and subsequent years, and UNHCR will continue to engage through the One-UN framework to ensure refugees have access to integration programmes and eventual durable solutions.

# PART III: ANNEXES



Logframe

Participating organisations by sector

Planning figures

Acronyms

References

What if? ...we fail to respond

Guide to giving

## LOGFRAME\*




## Strategic Objective 1 (SO1): Save lives in the areas of highest need

1.1	HEALTH	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>• People suffering from conflict-related trauma injuries receive life-saving treatment within the province where the injury was sustained.</li> </ul>	<ul style="list-style-type: none"> <li>• % of victims who receive life-saving trauma care within the province where the injury was sustained.</li> <li>• # of trauma cases treated within 24 hours.</li> </ul>	<ul style="list-style-type: none"> <li>• &lt;35 %</li> <li>• 95,000</li> </ul>	<ul style="list-style-type: none"> <li>• &lt;45%</li> <li>• 75,000</li> </ul>	<ul style="list-style-type: none"> <li>• &lt;45%</li> <li>• 80,000</li> </ul>	<ul style="list-style-type: none"> <li>• &lt;&lt;45%</li> <li>• 90,000</li> </ul>	<ul style="list-style-type: none"> <li>• Compare the number of cases in the province with the number of cases treated in health facilities in the same province and/or First Aid Trauma Posts (FATPs)</li> <li>• Compare admissions with treatments</li> </ul>
	<ul style="list-style-type: none"> <li>• Additional FATPs are accessible to treat people with traumatic injuries.</li> </ul>	<ul style="list-style-type: none"> <li>• # of trauma cases treated through FATPs (m/w/b/g).</li> <li>• # of new FATPs established in high-risk provinces.</li> </ul>	<ul style="list-style-type: none"> <li>• 110,000</li> <li>• 20</li> </ul>	<ul style="list-style-type: none"> <li>• 65,000</li> <li>• 25</li> </ul>	<ul style="list-style-type: none"> <li>• 70,000</li> <li>• 30</li> </ul>	<ul style="list-style-type: none"> <li>• 80,000</li> <li>• 35</li> </ul>	<ul style="list-style-type: none"> <li>• Reported number of beneficiaries from FATPs and numbers reported from other health facilities to total number of beneficiaries</li> <li>• WHO data</li> </ul>
Activities	<ol style="list-style-type: none"> <li>1. Establishment of FATPs, stabilisation of FATP services and referral of patients in conflicted-affected areas.</li> <li>2. Provision of out-patient care and consultations</li> <li>3. Provision of rehabilitation care to trauma-affected patients, including victim of landmines.</li> <li>4. Provision of psychosocial support for people affected by conflict.</li> <li>5. Major and minor surgeries.</li> </ol>						
1.2	HEALTH	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>• People exposed to GBV, experiencing mental health or psychosocial issues, and pregnant women in conflict areas receive appropriate, professional support.</li> </ul>	<ul style="list-style-type: none"> <li>• # of health facilities providing clinical management of rape (CMR) to survivors</li> </ul>	<ul style="list-style-type: none"> <li>• N/A</li> </ul>	<ul style="list-style-type: none"> <li>• 20</li> </ul>	<ul style="list-style-type: none"> <li>• 20</li> </ul>	<ul style="list-style-type: none"> <li>• 15</li> </ul>	<ul style="list-style-type: none"> <li>• WHO and HMIS data</li> </ul>
	<ul style="list-style-type: none"> <li>• Health staff can provide services according to the national GBV protocol.</li> <li>• People with mental health and psychosocial problems access appropriate, focused care.</li> </ul>	<ul style="list-style-type: none"> <li>• # of health staff trained on national GBV protocol</li> <li>• # of women, men, girls and boys who receive focused psychosocial and psychological care.</li> </ul>	<ul style="list-style-type: none"> <li>• 3,979</li> <li>• 750,000</li> </ul>	<ul style="list-style-type: none"> <li>• 1,030</li> <li>• 810,000</li> </ul>	<ul style="list-style-type: none"> <li>• 1,030</li> <li>• 850,000</li> </ul>	<ul style="list-style-type: none"> <li>• 50</li> <li>• 800,000</li> </ul>	<ul style="list-style-type: none"> <li>• WHO and HMIS</li> <li>• HMIS</li> </ul>
Outputs	<ul style="list-style-type: none"> <li>• # of women provided with antenatal care in high-risk provinces.</li> </ul>	<ul style="list-style-type: none"> <li>• # of women provided with antenatal care in high-risk provinces.</li> </ul>	<ul style="list-style-type: none"> <li>• 20,000</li> </ul>	<ul style="list-style-type: none"> <li>• 15,000</li> </ul>	<ul style="list-style-type: none"> <li>• 17,000</li> </ul>	<ul style="list-style-type: none"> <li>• 20,000</li> </ul>	<ul style="list-style-type: none"> <li>• Partner reports and HMIS</li> </ul>
Activities	<ol style="list-style-type: none"> <li>1. Provision of training on the national GBV protocol</li> <li>2. Provision of focused psychosocial and psychological care</li> <li>3. Provision of antenatal care by trained staff</li> </ol>						

\*This logframe has been revised for 2019 to reflect the current operating environment and improve effective tracking of results/gaps. While not currently reflected here, indicators and results will be disaggregated by sex, and age as well where available, when clusters report against these at the end of the first quarter of 2019.


1.3	 FSAC	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>Conflict IDP, returnee, refugee women, men and children of all ages have a minimum household food consumption score above 42.5.</li> </ul>	<ul style="list-style-type: none"> <li>% of households with poor food consumption.</li> </ul>	<ul style="list-style-type: none"> <li>35%</li> </ul>	<ul style="list-style-type: none"> <li>&lt;15%</li> </ul>	<ul style="list-style-type: none"> <li>&lt;15%</li> </ul>	<ul style="list-style-type: none"> <li>&lt;15%</li> </ul>	<ul style="list-style-type: none"> <li>Post-distribution monitoring reports and end line surveys.</li> </ul>
	<ul style="list-style-type: none"> <li>Necessary food assistance is provided to affected households in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li># of conflict affected IDP, returnee, refugee women, men and children of all ages who receive adequate food/ cash responses, in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li>800,000</li> </ul>	<ul style="list-style-type: none"> <li>591,000</li> </ul>	<ul style="list-style-type: none"> <li>62,400</li> </ul>	<ul style="list-style-type: none"> <li>533,600</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly reports of partners.</li> </ul>
		<ul style="list-style-type: none"> <li># of affected people receiving in-kind food assistance.</li> </ul>	<ul style="list-style-type: none"> <li>500,000</li> </ul>	<ul style="list-style-type: none"> <li>216,000</li> </ul>	<ul style="list-style-type: none"> <li>209,450</li> </ul>	<ul style="list-style-type: none"> <li>202,800</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly reports of partners.</li> </ul>
		<ul style="list-style-type: none"> <li># of affected people receiving cash transfers.</li> </ul>	<ul style="list-style-type: none"> <li>300,000</li> </ul>	<ul style="list-style-type: none"> <li>375,000</li> </ul>	<ul style="list-style-type: none"> <li>352,950</li> </ul>	<ul style="list-style-type: none"> <li>330,800</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly reports of partners.</li> </ul>
		<ul style="list-style-type: none"> <li># of calls related to food assistance responded to and resolved within a week</li> </ul>	<ul style="list-style-type: none"> <li>811</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>AWAAZ Afghanistan dashboard.</li> </ul>
Outputs	<ul style="list-style-type: none"> <li>Livelihoods are protected and rehabilitated for vulnerable people at risk of hunger and malnutrition.</li> </ul>	<ul style="list-style-type: none"> <li># of returnees, women, men and children of all ages who receive adequate livelihoods responses, in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	<ul style="list-style-type: none"> <li>35,000</li> </ul>	<ul style="list-style-type: none"> <li>35,000</li> </ul>	<ul style="list-style-type: none"> <li>35,000</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly reports of partners.</li> </ul>
		<ul style="list-style-type: none"> <li># of drought-affected people receiving in-kind livelihoods assistance</li> </ul>	<ul style="list-style-type: none"> <li>287,527</li> </ul>	<ul style="list-style-type: none"> <li>1,440,000</li> </ul>	<ul style="list-style-type: none"> <li>1,054,165</li> </ul>	<ul style="list-style-type: none"> <li>527,082</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly reports of partners.</li> </ul>
Activities	<ol style="list-style-type: none"> <li>Conduct food security and livelihoods needs assessments.</li> <li>Timely provision of food assistance (food, cash-for-food or combination) to meet the immediate needs of affected people (conflict-affected IDPs, returnees and refugees).</li> <li>Timely provision of emergency livelihoods protection assistance (poultry, kitchen gardening and agriculture inputs) to vulnerable people.</li> <li>Improve cluster coordination and analysis.</li> </ol>						


1.4	 NUTRITION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>Decline in GAM among IDP, returnee, refugee and non-displaced, conflict-affected children under 5 (g/b) and a decline in PLW suffering from acute malnutrition.</li> </ul>	<ul style="list-style-type: none"> <li># of IDP, returnee, refugee and non-displaced children under five with SAM who are cured.</li> </ul>	• 200,600	• 232,478	• 267,350	• 307,452	<ul style="list-style-type: none"> <li>National Nutrition database, IMAM reports</li> </ul>
		<ul style="list-style-type: none"> <li># of IDP, returnee, refugee and non-displaced children under five with MAM who are cured.</li> </ul>	• 201,000	• 250,625	• 250,625	• 250,625	<ul style="list-style-type: none"> <li>National Nutrition database, IMAM reports</li> </ul>
	<ul style="list-style-type: none"> <li>More boys and girls (6-59 months) with SAM and MAM are enrolled in therapeutic feeding programmes.</li> </ul>	<ul style="list-style-type: none"> <li># of boys and girls (6-59 months) with SAM and MAM enrolled in therapeutic feeding programmes.</li> </ul>	• 504,000	• 607,671	• 648,697	• 695,875	<ul style="list-style-type: none"> <li>National Nutrition database, IMAM reports</li> </ul>
Outputs	<ul style="list-style-type: none"> <li>More PLW are enrolled in targeted supplementary feeding programmes (TSFP)</li> </ul>	<ul style="list-style-type: none"> <li># of PLW with acute malnutrition enrolled in TSFP.</li> </ul>	• 145,335	• 128,159	• 128,159	• 128,159	<ul style="list-style-type: none"> <li>National Nutrition database, IMAM reports</li> </ul>
		<ul style="list-style-type: none"> <li># of BPHS clinics supplied with ready-to-use therapeutic foods (RUTF) over 12 months.</li> </ul>	• 1,193	• 1,200	• 1,380	• 1,380	<ul style="list-style-type: none"> <li>National Nutrition database, IMAM reports</li> </ul>
Activities	<ol style="list-style-type: none"> <li>Out-patient and in-patient treatment of SAM children under five years</li> <li>Treatment of MAM children aged 6-59 months</li> <li>Out-patient and in-patient treatment of SAM children under five years, and treatment of MAM children aged 6-59 months</li> <li>Targeted supplementary feeding for PLW</li> <li>Out-patient treatment of SAM children under five years</li> </ol>						

1.5	 WASH	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>Affected people have access to the water and sanitation services and facilities they need.</li> </ul>	<ul style="list-style-type: none"> <li># of affected people receiving water assistance as per cluster standard.</li> </ul>	• 400,000	• 1,100,000	• 700,000	• 500,000	<ul style="list-style-type: none"> <li>WASH cluster reports, partners reports</li> </ul>
		<ul style="list-style-type: none"> <li># of affected people with access to functioning and gender-segregated sanitation facilities</li> </ul>	• 200,000	• 450,000	• 350,000	• 300,000	<ul style="list-style-type: none"> <li>WASH cluster reports, partners reports</li> </ul>
Outputs	<ul style="list-style-type: none"> <li>Necessary hygiene assistance is provided to affected communities and people in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li># of affected people receiving hygiene promotion as per cluster standard.</li> </ul>	• 550,000	• 1,200,000	• 800,000	• 700,000	<ul style="list-style-type: none"> <li>WASH cluster reports, partners reports</li> </ul>
		<ul style="list-style-type: none"> <li># of affected people receiving hygiene kits as per cluster standard.</li> </ul>	• 250,000	• 400,000	• 350,000	• 300,000	<ul style="list-style-type: none"> <li>WASH cluster reports, partners reports</li> </ul>

1.5	 WASH	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION	
Activities	1.Provision of emergency sanitation and bathing facilities to displaced families close to their settlements. 2.Provision of safe drinking water by tankering, rehabilitation of existing water system or the installation of new infrastructure. 3.Provision of safe water by supplying water treatment chemicals and training on their use (incl provision of water kits). 4.Hygiene promotion activities with a focus on the importance of handwashing with soap at critical times and proper use of toilets by emergency-affected people. 5.Distribution of Family Hygiene Kits to the affected population (especially families displaced due to conflict or drought) 6.Carry-out rapid needs assessment of the affected population/communities to determine the WASH assistance to be provided. 7.Monitoring of and reporting on the WASH response including identification of gaps and implementation of measures to overcome them							
	1.6	 ES-NFI	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
	Outcomes	<ul style="list-style-type: none"> <li>IDP, returnee, refugee and non-displaced conflict-affected women, men and children of all ages are protected from the elements through safe emergency shelter interventions which reduce the likelihood of disease and death.</li> </ul>	<ul style="list-style-type: none"> <li>Proportion of IDP, returnee and non-displaced conflict-affected women, men and children of all ages receiving shelter assistance who express satisfaction about this support.</li> </ul>	<ul style="list-style-type: none"> <li>80%</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> </ul>	<ul style="list-style-type: none"> <li>PDM reports</li> </ul>
		<ul style="list-style-type: none"> <li>Necessary ES-NFI assistance is provided to affected communities and people in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li># of people receiving emergency shelter assistance, including through cash-for-rent support.</li> </ul>	<ul style="list-style-type: none"> <li>48,119</li> </ul>	<ul style="list-style-type: none"> <li>208,980</li> </ul>	<ul style="list-style-type: none"> <li>177,633</li> </ul>	<ul style="list-style-type: none"> <li>167,184</li> </ul>	<ul style="list-style-type: none"> <li>ES-NFI cluster monitoring reports, ReportHub</li> </ul>
			<ul style="list-style-type: none"> <li># of people receiving the winterisation standard package for insulation.</li> </ul>	<ul style="list-style-type: none"> <li>16,145</li> </ul>	<ul style="list-style-type: none"> <li>332,604</li> </ul>	<ul style="list-style-type: none"> <li>282,713</li> </ul>	<ul style="list-style-type: none"> <li>266,083</li> </ul>	<ul style="list-style-type: none"> <li>ES-NFI Cluster monitoring reports, ReportHub</li> </ul>
			<ul style="list-style-type: none"> <li># of people receiving basic household items (NFI) to meet their immediate needs.</li> </ul>	<ul style="list-style-type: none"> <li>440,641</li> </ul>	<ul style="list-style-type: none"> <li>766,238</li> </ul>	<ul style="list-style-type: none"> <li>651,302</li> </ul>	<ul style="list-style-type: none"> <li>612,990</li> </ul>	<ul style="list-style-type: none"> <li>ES-NFI Cluster monitoring reports, ReportHub</li> </ul>
			<ul style="list-style-type: none"> <li># of people whose shelter was upgraded, allowing for safer and more dignified living conditions.</li> </ul>	<ul style="list-style-type: none"> <li>29,109</li> </ul>	<ul style="list-style-type: none"> <li>66,144</li> </ul>	<ul style="list-style-type: none"> <li>58,772</li> </ul>	<ul style="list-style-type: none"> <li>55,315</li> </ul>	<ul style="list-style-type: none"> <li>ES-NFI Cluster monitoring reports, ReportHub</li> </ul>
Outputs		<ul style="list-style-type: none"> <li>Estimated % of PiN covered with the ES-NFI stocks that are pre-positioned in strategic locations.</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	<ul style="list-style-type: none"> <li>75%</li> </ul>	<ul style="list-style-type: none"> <li>75%</li> </ul>	<ul style="list-style-type: none"> <li>75%</li> </ul>	<ul style="list-style-type: none"> <li>Stock analysis report, ReportHub</li> </ul>	





1.6	 ES-NFI	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Activities	<ul style="list-style-type: none"> <li>1. Conduct joint assessments to identify humanitarian needs and improve targeting.</li> <li>2. Improve communication with communities on shelter programmes.</li> <li>3. Distribute emergency shelter (tents and tarpaulins) to people in need, as identified by needs assessments.</li> <li>4. Provide cash-for-rent support where appropriate.</li> <li>5. Distribute winterisation package.</li> <li>6. Upgrade shelters allowing for safer and more dignified living conditions.</li> <li>7. Conduct post-distribution monitoring.</li> </ul>						


1.7	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>• The incidence of death and injury among IDP, returnee and non-displaced, conflict-affected women, men and children of all ages from mines and Explosive Remnants of War (ERW) is reduced.</li> </ul>	<ul style="list-style-type: none"> <li>• % reduction in victims from mines and ERW, compared to the same time last year</li> </ul>	<ul style="list-style-type: none"> <li>• 582</li> </ul>	<ul style="list-style-type: none"> <li>• 5-10%</li> </ul>	<ul style="list-style-type: none"> <li>• 5-10%</li> </ul>	<ul style="list-style-type: none"> <li>• 5-10%</li> </ul>	<ul style="list-style-type: none"> <li>• Information Management System for Mine Action (IMSMA) database and UNAMA Reports on Protection of Civilians in Armed Conflict</li> </ul>

Outputs	<ul style="list-style-type: none"> <li>• Land is cleared of known explosive hazards.</li> </ul>	<ul style="list-style-type: none"> <li>• # of people living within one kilometre of a known explosive hazard benefitting from the removal of those explosive hazards.</li> </ul>	<ul style="list-style-type: none"> <li>• N/A</li> </ul>	<ul style="list-style-type: none"> <li>• 130,303</li> </ul>	<ul style="list-style-type: none"> <li>• 130,303</li> </ul>	<ul style="list-style-type: none"> <li>• 130,303</li> </ul>	<ul style="list-style-type: none"> <li>• Information Management System for Mine Action (IMSMA) database</li> </ul>	
		<ul style="list-style-type: none"> <li>• Square metres of area cleared from known explosive hazards</li> </ul>	<ul style="list-style-type: none"> <li>• N/A</li> </ul>	<ul style="list-style-type: none"> <li>• 5,094,917</li> </ul>	<ul style="list-style-type: none"> <li>• 5,094,917</li> </ul>	<ul style="list-style-type: none"> <li>• 5,094,917</li> </ul>	<ul style="list-style-type: none"> <li>• Information Management System for Mine Action (IMSMA) database</li> </ul>	
	<ul style="list-style-type: none"> <li>• MRE programmes are provided to vulnerable populations affected by the conflict.</li> </ul>	<ul style="list-style-type: none"> <li>• # of IDPs, returnees and non-displaced conflict-affected people receiving MRE.</li> </ul>	<ul style="list-style-type: none"> <li>• 462,476</li> </ul>	<ul style="list-style-type: none"> <li>• 409,047</li> </ul>	<ul style="list-style-type: none"> <li>• 409,047</li> </ul>	<ul style="list-style-type: none"> <li>• 409,047</li> </ul>	<ul style="list-style-type: none"> <li>• 409,047</li> </ul>	<ul style="list-style-type: none"> <li>• Information Management System for Mine Action (IMSMA) database</li> </ul>
	<ul style="list-style-type: none"> <li>• Conflict-affected communities are searched for explosive hazards</li> </ul>	<ul style="list-style-type: none"> <li>• Number of conflict-affected communities visited by crossed-trained teams for EOD, survey and Mine/ERW risk education.</li> </ul>	<ul style="list-style-type: none"> <li>• 250</li> </ul>	<ul style="list-style-type: none"> <li>• 280</li> </ul>	<ul style="list-style-type: none"> <li>• 280</li> </ul>	<ul style="list-style-type: none"> <li>• 280</li> </ul>	<ul style="list-style-type: none"> <li>• 280</li> </ul>	<ul style="list-style-type: none"> <li>• Information Management System for Mine Action (IMSMA) database</li> </ul>

Activities	<ul style="list-style-type: none"> <li>1. Provision of Mine/ERW risk education including for returnees at UNHCR Encashment Centres and IOM Transit Centres, as well as to affected communities</li> <li>2. Carry out mine/ERW clearance operations – including EOD</li> <li>3. Improve community awareness of ERW risks</li> <li>4. Advocacy on ERW risks</li> <li>5. Carry-out technical and non-technical surveys of hazards</li> <li>6. Distribution of mine/ERW risk education materials</li> <li>7. Dissemination of Mine/ERW risk education through mass media (TV and Radio)</li> </ul>						
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1.8	 MPC	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>Recent conflict-IDPs and returnees are able to meet their basic needs in the first phase of displacement, without having to resort to severe negative coping strategies.</li> </ul>	<ul style="list-style-type: none"> <li>% of households who receive MPC assistance who have medium or low reduced coping score (as measured by the reduced Coping Strategies Index - rCSI).</li> </ul>	<ul style="list-style-type: none"> <li>84%</li> </ul>	<ul style="list-style-type: none"> <li>85%</li> </ul>	<ul style="list-style-type: none"> <li>85%</li> </ul>	<ul style="list-style-type: none"> <li>85%</li> </ul>	<ul style="list-style-type: none"> <li>Inter-cluster cash PDM results</li> </ul>
	<ul style="list-style-type: none"> <li>Vulnerable, recent conflict-IDPs are provided with timely multi-purpose cash grants to meet their basic needs.</li> </ul>	<ul style="list-style-type: none"> <li># of recent conflict IDPs in need who receive multi-purpose cash grants to cover their basic emergency requirements.</li> </ul>	<ul style="list-style-type: none"> <li>200,000</li> </ul>	<ul style="list-style-type: none"> <li>350,000</li> </ul>	<ul style="list-style-type: none"> <li>315,000</li> </ul>	<ul style="list-style-type: none"> <li>280,000</li> </ul>	<ul style="list-style-type: none"> <li>ReportHub</li> </ul>
Outputs	<ul style="list-style-type: none"> <li>Vulnerable, undocumented returnees from Iran and Pakistan are provided with IOM multi-purpose cash grants upon arrival, to meet their transport and NFI needs.</li> </ul>	<ul style="list-style-type: none"> <li># of returnees from Iran or Pakistan who receive multi-purpose cash grants upon arrival to cover their transport and NFI needs.</li> </ul>	<ul style="list-style-type: none"> <li>42,577</li> </ul>	<ul style="list-style-type: none"> <li>163,000</li> </ul>	<ul style="list-style-type: none"> <li>165,247</li> </ul>	<ul style="list-style-type: none"> <li>167,509</li> </ul>	<ul style="list-style-type: none"> <li>ReportHub</li> </ul>
	Activities	1.Provision of timely multi-purpose cash grants to vulnerable recent conflict-induced IDPs 2.Provision of timely multi-purpose cash grants to undocumented returnees upon arrival					

1.9	 MULTI-SECTOR	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>WASH, shelter, health and food security assistance is delivered to IDP women, men, boys and girls living in hard-to-reach (HTR) areas.</li> </ul>	<ul style="list-style-type: none"> <li>Total # of HTR districts where IDPs have received assistance.</li> </ul>	<ul style="list-style-type: none"> <li>84</li> </ul>	<ul style="list-style-type: none"> <li>86</li> </ul>	<ul style="list-style-type: none"> <li>88</li> </ul>	<ul style="list-style-type: none"> <li>90</li> </ul>	<ul style="list-style-type: none"> <li>Cluster reporting</li> </ul>
		<ul style="list-style-type: none"> <li># of HTR districts where IDPs have received health assistance.</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>25</li> </ul>	<ul style="list-style-type: none"> <li>35</li> </ul>	<ul style="list-style-type: none"> <li>40</li> </ul>	<ul style="list-style-type: none"> <li>Number of people reached with health services with the total number of IDPs</li> </ul>
		<ul style="list-style-type: none"> <li># of HTR districts where IDPs have received WASH assistance</li> </ul>	<ul style="list-style-type: none"> <li>20</li> </ul>	<ul style="list-style-type: none"> <li>25</li> </ul>	<ul style="list-style-type: none"> <li>25</li> </ul>	<ul style="list-style-type: none"> <li>25</li> </ul>	<ul style="list-style-type: none"> <li>WASH cluster reports, partners reports</li> </ul>
		<ul style="list-style-type: none"> <li># of HTR districts where IDPs and vulnerable affected people have received ES-NFI assistance.</li> </ul>	<ul style="list-style-type: none"> <li>25</li> </ul>	<ul style="list-style-type: none"> <li>44</li> </ul>	<ul style="list-style-type: none"> <li>44</li> </ul>	<ul style="list-style-type: none"> <li>44</li> </ul>	<ul style="list-style-type: none"> <li>ReportHub data, ES/NFI monitoring reports</li> </ul>
		<ul style="list-style-type: none"> <li># of HTR districts where IDPs have received FSAC assistance (food or livelihoods)</li> </ul>	<ul style="list-style-type: none"> <li>15</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly reports of partners.</li> </ul>


1.9	 MULTI-SECTOR	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outputs	<ul style="list-style-type: none"> <li>The humanitarian system facilitates a timely and effective response to people in need.</li> </ul>	<ul style="list-style-type: none"> <li># of IDPs in HTR districts receiving emergency health services from MHTs.</li> </ul>	• 195,000	• 210,000	• 220,000	• 225,000	<ul style="list-style-type: none"> <li>Number of people reached with health services against the total number of IDPs and number of MHT</li> </ul>
		<ul style="list-style-type: none"> <li># of MHTs deployed to areas where fixed health facilities have been closed.</li> </ul>	• 41	• 40	• 45	• 50	<ul style="list-style-type: none"> <li>Attacks on health facilities database and ReportHub</li> </ul>
		<ul style="list-style-type: none"> <li># of IDPs in HTR districts receiving WASH assistance.</li> </ul>	• 100,000	• 250,000	• 200,000	• 150,000	<ul style="list-style-type: none"> <li>WASH cluster reports, partners reports</li> </ul>
		<ul style="list-style-type: none"> <li># of IDPs and vulnerable affected people in HTR districts receiving NFI, emergency shelter or cash-for-rent assistance.</li> </ul>	• 75,401	• 229,871	• 195,391	• 183,897	<ul style="list-style-type: none"> <li>ReportHub data</li> </ul>
		<ul style="list-style-type: none"> <li>Total # of IDPs in HTR districts receiving WASH, food, emergency shelter, SMEB and cash-or-rent assistance.</li> </ul>	• 282,000	• 300,000	• 320,000	• 340,000	<ul style="list-style-type: none"> <li>Cluster reporting</li> </ul>

Activities


1. Emergency health provision by MHTs in hard-to-reach districts.
2. Provision of safe drinking water by tankering, rehabilitation of existing systems or installation of new infrastructure.
3. Provision of safe water by supplying water treatment chemicals and training on their use (including provision of water kits).
4. Distribution of in-kind food, cash-for-food, livelihoods support and agricultural inputs
5. Provision of emergency shelter and other NFI (tents and tarpaulins), as well as cash-for-rent support where appropriate
6. Conduct emergency needs assessments and post-distribution monitoring to identify gaps and get community feedback






### Strategic Objective 2 (SO2): Protection violations are reduced and increase respect for International Humanitarian Law

2.1	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>Impact of armed conflict and natural disasters on civilians and civilian facilities is reduced.</li> </ul>	<ul style="list-style-type: none"> <li>% reduction in civilian casualties compared to the same period of the previous year.</li> </ul>	<ul style="list-style-type: none"> <li>10,453 in 2017 - 3,438 deaths &amp; 7,015 injured. (To be updated when 2018 full year data is available).</li> </ul>	• 10%	• 15%	• 20%	<ul style="list-style-type: none"> <li>UNAMA Protection of Civilians in Armed Conflict quarterly reports</li> </ul>

2.1	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outputs	<ul style="list-style-type: none"> <li>Humanitarian negotiation and advocacy initiatives are conducted with parties to the conflict in order to enhance the level of respect for IHL and IHRL.</li> </ul>	<ul style="list-style-type: none"> <li># of conflict-affected schools and healthcare facilities that have been re-opened following a military presence, as a result of protection negotiation and advocacy.</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	<ul style="list-style-type: none"> <li>100</li> </ul>	<ul style="list-style-type: none"> <li>140</li> </ul>	<ul style="list-style-type: none"> <li>180</li> </ul>	<ul style="list-style-type: none"> <li>MRM reports, UNAMA reports, PIMS and Protection Monitoring reports, Health cluster IMS</li> </ul>
	<ul style="list-style-type: none"> <li>Enhanced protection analysis of the environment.</li> </ul>	<ul style="list-style-type: none"> <li># protection monitoring visits conducted countrywide.</li> </ul>	<ul style="list-style-type: none"> <li>382</li> </ul>	<ul style="list-style-type: none"> <li>400</li> </ul>	<ul style="list-style-type: none"> <li>450</li> </ul>	<ul style="list-style-type: none"> <li>500</li> </ul>	<ul style="list-style-type: none"> <li>Protection Monitoring, PIMS</li> </ul>
		<ul style="list-style-type: none"> <li># people reached through protection monitoring visits.</li> </ul>	<ul style="list-style-type: none"> <li>252,327</li> </ul>	<ul style="list-style-type: none"> <li>252,327</li> </ul>	<ul style="list-style-type: none"> <li>201,862</li> </ul>	<ul style="list-style-type: none"> <li>176,629</li> </ul>	<ul style="list-style-type: none"> <li>Protection Monitoring, PIMS</li> </ul>
Activities	<ol style="list-style-type: none"> <li>Conduct protection needs assessments and monitoring missions</li> <li>Carry-out protection monitoring (UNAMA PoC monitoring, PIMS).</li> <li>Train and sensitise actors, communities and authorities on IHL, particularly with regard to schools and health facilities and protection outcomes.</li> <li>Conduct advocacy with authorities, humanitarian actors and parties to the conflict on IHL.</li> <li>Capacity-building of partners and community leaders on protection of civilians issues.</li> <li>Development of community-based early warning and contingency plans</li> <li>Support for negotiation of safe passage of civilians</li> <li>Security upgrades for schools and clinics</li> </ol>						
2.2	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>An appropriate, coordinated response provides necessary protection assistance to affected communities and people, including children, in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li># of at-risk IDP, returnee and non-displaced conflict or natural disaster-affected GBV survivors receiving multi-sectoral assistance (psychosocial, legal, safety, health and dignity kits).</li> </ul>	<ul style="list-style-type: none"> <li>375,575</li> </ul>	<ul style="list-style-type: none"> <li>235,722</li> </ul>	<ul style="list-style-type: none"> <li>410,250</li> </ul>	<ul style="list-style-type: none"> <li>407,716</li> </ul>	<ul style="list-style-type: none"> <li>Sub-cluster reporting</li> </ul>

2.2	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outputs	<ul style="list-style-type: none"> <li>Increased community awareness of and capacity to respond to GBV.</li> </ul>	<ul style="list-style-type: none"> <li># of community members mobilised through community dialogues to prevent and respond to GBV.</li> </ul>	<ul style="list-style-type: none"> <li>128,924</li> </ul>	<ul style="list-style-type: none"> <li>226,784</li> </ul>	<ul style="list-style-type: none"> <li>413,594</li> </ul>	<ul style="list-style-type: none"> <li>423,980</li> </ul>	<ul style="list-style-type: none"> <li>Sub-cluster reporting</li> </ul>
	<ul style="list-style-type: none"> <li>Boys and girls affected by humanitarian crises are provided with psychosocial support and structured play through child-friendly spaces in order to acquire the basic social and communication skills they need.</li> </ul>	<ul style="list-style-type: none"> <li># of targeted girls and boys benefiting from age- and gender-sensitive psychosocial support activities.</li> </ul>	<ul style="list-style-type: none"> <li>143,555</li> </ul>	<ul style="list-style-type: none"> <li>82,451</li> </ul>	<ul style="list-style-type: none"> <li>100,000</li> </ul>	<ul style="list-style-type: none"> <li>90,000</li> </ul>	<ul style="list-style-type: none"> <li>Monthly reports from Implementing partners</li> </ul>
	<ul style="list-style-type: none"> <li>Boys and girls affected by humanitarian crises benefit from age and gender-sensitive case management services.</li> </ul>	<ul style="list-style-type: none"> <li># of targeted girls and boys benefiting from age- and gender-sensitive case management services.</li> </ul>	<ul style="list-style-type: none"> <li>6,744</li> </ul>		<ul style="list-style-type: none"> <li>11,000</li> </ul>	<ul style="list-style-type: none"> <li>10,000</li> </ul>	<ul style="list-style-type: none"> <li>Monthly reports from Implementing partners</li> </ul>
Activities	<ol style="list-style-type: none"> <li>Provision of survivor-centred psychosocial, health, safety and legal/justice services including distribution of dignity kits through women-friendly health spaces, family protection centres, psychosocial outreach teams and referrals for response services.</li> <li>Mobilisation of communities to raise awareness on GBV-related issues and impacts through community dialogues with men, boys, religious leaders and community elders.</li> <li>Build capacity and train health workers on appropriate GBV response.</li> <li>Identify, register and provide family tracing and reunification services for unaccompanied and separated children</li> <li>Provide case management and referrals to the most vulnerable children in need</li> <li>Provide psychosocial support and victim assistance to children, particularly those affected by conflict</li> <li>Train child protection specialists on the norms and standards of child protection</li> <li>Advocate against and respond to cases of child recruitment</li> <li>Carry-out community-based awareness raising on child protection issues</li> </ol>						

2.3	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>Displacement-affected communities are able to claim HLP rights and possess legal identity, including civil documentation (LCD).</li> </ul>	<ul style="list-style-type: none"> <li>% of people receiving HLP services who report that they have civil documentation.</li> </ul>	<ul style="list-style-type: none"> <li>80%</li> </ul>	<ul style="list-style-type: none"> <li>80%</li> </ul>	<ul style="list-style-type: none"> <li>80%</li> </ul>	<ul style="list-style-type: none"> <li>80%</li> </ul>	<ul style="list-style-type: none"> <li>NRC - ICLA database, internal/external evaluations</li> </ul>
		<ul style="list-style-type: none"> <li>% of people who received HLP support (awareness raising, advocacy and legal counselling) who then went on to access land, security of tenure, adequate housing or civil documentation, in line with their legal rights.</li> </ul>	<ul style="list-style-type: none"> <li>74%</li> </ul>	<ul style="list-style-type: none"> <li>75%</li> </ul>	<ul style="list-style-type: none"> <li>75%</li> </ul>	<ul style="list-style-type: none"> <li>75%</li> </ul>	<ul style="list-style-type: none"> <li>NRC - ICLA database, internal/external evaluations</li> </ul>

2.3	 PROTECTION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outputs	<ul style="list-style-type: none"> <li>Displacement-affected communities receive information, counselling and legal assistance on HLP and LCD rights.</li> </ul>	<ul style="list-style-type: none"> <li># of individuals receiving information on HLP and LCD rights.</li> </ul>	• 28,639	• 45,531	• 40,000	• 40,000	<ul style="list-style-type: none"> <li>NRC - ICLA database, internal/external evaluations</li> </ul>
		<ul style="list-style-type: none"> <li># of individual receiving counselling and legal assistance on HLP and LCD rights.</li> </ul>	• 26,244	• 25,170	• 25,000	• 20,000	<ul style="list-style-type: none"> <li>NRC - ICLA database, internal/external evaluations</li> </ul>
		<ul style="list-style-type: none"> <li># of displaced people with improved access to land and security of tenure as a result of humanitarian activities.</li> </ul>	• 14,930	• 14,937	• 15,000	• 15,000	<ul style="list-style-type: none"> <li>NRC - ICLA database, internal/external evaluations</li> </ul>
Activities	1.Information-sharing, individual counselling, and individual legal assistance on HLP/LCD issues for people in need.						
	2.Information sharing, individual counselling, individual legal assistance, advocacy and capacity-building for duty-bearers about HLP/LCD rights.						
	3.Community sensitisation, information sessions, and individual counselling.						
	4.Train displaced people on HLP rights and provide advice to decision-makers on HLP/LCD principles.						
2.4	 EDUCATION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>School-aged girls and boys affected by emergencies can access quality, basic education.</li> </ul>	<ul style="list-style-type: none"> <li># of school-aged girls and boys affected by emergencies have access to quality, basic education.*</li> </ul>	• 147,718	• 349,372	• 255,331	• 256,055	<ul style="list-style-type: none"> <li>EiEWG 5Ws data and snapshot, student enrolment numbers from government schools</li> </ul>
		<ul style="list-style-type: none"> <li>Formal and/or non-formal quality learning opportunities are provided for emergency-affected, school-aged children.</li> </ul>	<ul style="list-style-type: none"> <li># of TLS (CBE, ALC, TLS) established and maintained.</li> </ul>	• 4,924	• 11,646	• 8,511	• 8,535
Outputs	<ul style="list-style-type: none"> <li>Formal and/or non-formal quality learning opportunities are provided for emergency-affected, school-aged children.</li> </ul>	<ul style="list-style-type: none"> <li># of school-aged children (b/g) benefitting from teaching and learning materials (student kits, teaching kits, classroom kits).</li> </ul>	• 147,718	• 349,372	• 255,331	• 256,055	<ul style="list-style-type: none"> <li>EiEWG 5Ws data and monthly snapshot</li> </ul>
		<ul style="list-style-type: none"> <li># of teachers (f/m) recruited.</li> </ul>	• 2,736	• 11,646	• 8,511	• 8,535	<ul style="list-style-type: none"> <li>EiEWG 5Ws data and monthly snapshot</li> </ul>
		<ul style="list-style-type: none"> <li># of teachers (f/m) trained on EiE.</li> </ul>	• 6,567	• 15,000	• 10,950.00	• 11,000	<ul style="list-style-type: none"> <li>EiEWG 5Ws data and monthly snapshot</li> </ul>
		<ul style="list-style-type: none"> <li># of community members (including school management shuras) sensitised on the importance of EiE.</li> </ul>	• 6,884	• 11,646	• 8,511	• 8,535	<ul style="list-style-type: none"> <li>EiEWG 5Ws data and monthly snapshot</li> </ul>
Activities	1.Establish TLS (tents and/or community-based education, accelerated learning classes).						
	2.Provide learning kits for students, teaching kits for teachers and classroom kits for each class						
	3.Recruit female and male teachers to run classes						
	4.Provide teacher training using the EiE harmonised teacher training package						
	5.Provide trainings for school management shura members in the target areas						
	6.Enrol children in CBE, ALC or formal schools. This will include extra-curricular activities such as language and catch-up classes if not counted as part of TLS.						


\*This includes extra-curricular classes including language, catch-up and PSS etc if not part of TLS.






### Strategic Objective 3 (SO3): People struck by sudden- and slow-onset crises get timely assistance

3.1	MULTI-SECTOR	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION	
Outcomes	<ul style="list-style-type: none"> <li>• People affected by natural disasters, including severe weather conditions, receive timely assistance, preventing loss of life and minimising the risk of disease.</li> </ul>	<ul style="list-style-type: none"> <li>• # of people affected by natural disasters who received assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 2,692,000</li> </ul>	<ul style="list-style-type: none"> <li>• 3,360,000</li> </ul>	<ul style="list-style-type: none"> <li>• 159,000,000</li> </ul>	<ul style="list-style-type: none"> <li>• 850,000</li> </ul>	<ul style="list-style-type: none"> <li>• Cluster reporting</li> </ul>	
	<ul style="list-style-type: none"> <li>• Disaster-affected and disaster-displaced people are provided with the food and livelihoods assistance they need.</li> </ul>	<ul style="list-style-type: none"> <li>• Total # of disaster-affected and disaster-displaced people (sudden and slow-onset) receiving any type of food assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 1,355,282</li> </ul>	<ul style="list-style-type: none"> <li>• 3,352,016</li> </ul>	<ul style="list-style-type: none"> <li>• 1,579,619</li> </ul>	<ul style="list-style-type: none"> <li>• 851,309</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly reports of partners.</li> </ul>	
Outputs		<ul style="list-style-type: none"> <li>• # of disaster-affected and disaster-displaced people (sudden and slow-onset) receiving cash-for-food assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 178,000</li> </ul>	<ul style="list-style-type: none"> <li>• 335,202</li> </ul>	<ul style="list-style-type: none"> <li>• 157,962</li> </ul>	<ul style="list-style-type: none"> <li>• 85,131</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly reports of partners.</li> </ul>	
		<ul style="list-style-type: none"> <li>• # of disaster-affected and disaster-displaced people (sudden and slow-onset) receiving in-kind food assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 1,177,282</li> </ul>	<ul style="list-style-type: none"> <li>• 3,016,814</li> </ul>	<ul style="list-style-type: none"> <li>• 1,421,657</li> </ul>	<ul style="list-style-type: none"> <li>• 766,178</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly reports of partners.</li> </ul>	
		<ul style="list-style-type: none"> <li>• Overall # of disaster-affected people receiving any kind of emergency livelihoods assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 108,353</li> </ul>	<ul style="list-style-type: none"> <li>• 1,782,500</li> </ul>	<ul style="list-style-type: none"> <li>• 1,356,796</li> </ul>	<ul style="list-style-type: none"> <li>• 774,898</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly reports of partners.</li> </ul>	
		<ul style="list-style-type: none"> <li>• # of disaster-affected people receiving cash-based emergency livelihoods assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 0</li> </ul>	<ul style="list-style-type: none"> <li>• 171,250</li> </ul>	<ul style="list-style-type: none"> <li>• 135,680</li> </ul>	<ul style="list-style-type: none"> <li>• 77,490</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly reports of partners.</li> </ul>	
		<ul style="list-style-type: none"> <li>• # of disaster-affected people receiving in-kind emergency livelihoods assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 108,353</li> </ul>	<ul style="list-style-type: none"> <li>• 1,611,250</li> </ul>	<ul style="list-style-type: none"> <li>• 1,221,116</li> </ul>	<ul style="list-style-type: none"> <li>• 697,408</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly reports of partners.</li> </ul>	
		<ul style="list-style-type: none"> <li>• Disaster-affected and disaster-displaced people are provided with the WASH support they need.</li> </ul>	<ul style="list-style-type: none"> <li>• # of natural disaster-affected people receiving WASH assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 50,000</li> </ul>	<ul style="list-style-type: none"> <li>• 250,000</li> </ul>	<ul style="list-style-type: none"> <li>• 100,000</li> </ul>	<ul style="list-style-type: none"> <li>• 100,000</li> </ul>	<ul style="list-style-type: none"> <li>• WASH cluster reports, partner reports</li> </ul>
		<ul style="list-style-type: none"> <li>• There is an effective and timely emergency response to sudden-onset disasters.</li> </ul>	<ul style="list-style-type: none"> <li>• Total # of sudden-onset disaster-affected people receiving WASH, Food, and SMEB assistance.</li> </ul>	<ul style="list-style-type: none"> <li>• 68,000</li> </ul>	<ul style="list-style-type: none"> <li>• 117,000</li> </ul>	<ul style="list-style-type: none"> <li>• 120,000</li> </ul>	<ul style="list-style-type: none"> <li>• 124,000</li> </ul>	<ul style="list-style-type: none"> <li>• Cluster reporting</li> </ul>









3.1	 MULTI-SECTOR	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Activities							<ul style="list-style-type: none"> <li>1. Conduct timely multi-sectoral assessments to identify people in need and deliver assistance to people affected by natural disasters.</li> <li>2. Distribution of in-kind food, cash-for-food, emergency livelihoods, WASH, emergency shelter and NFI support/services.</li> <li>3. Analysis of country-wide stocks to identify gaps.</li> <li>4. Arrange warehouse facilities and transport stocks in strategic locations as per gaps identified.</li> <li>5. Monitoring of seasonal weather forecasts so that partners are prepared to act in affected areas.</li> <li>6. Integrated cross-sectoral programming is pursued wherever possible to ensure a holistic response to the full range of people's needs.</li> <li>7. Contingency and response planning is carried out through the ICCT at the national and sub-national level.</li> </ul>

3.2	 COORDINATION	INDICATORS	BASELINE	TARGET 2019	TARGET 2020	TARGET 2021	MEANS OF VERIFICATION
Outcomes	<ul style="list-style-type: none"> <li>The coordination structure is fit for purpose and facilitates a timely and effective response to people in need.</li> </ul>	<ul style="list-style-type: none"> <li># of IASC-led peer-to-peer reviews of the humanitarian architecture completed in Afghanistan.</li> </ul>	<ul style="list-style-type: none"> <li>0</li> </ul>	<ul style="list-style-type: none"> <li>1</li> </ul>	<ul style="list-style-type: none"> <li>0</li> </ul>	<ul style="list-style-type: none"> <li>0</li> </ul>	<ul style="list-style-type: none"> <li>Peer-to-peer mission report</li> </ul>
Outputs	<ul style="list-style-type: none"> <li>The annual HNO is evidence-based with data drawn from a range of coordinated, inter-sectoral needs assessments which accurately identify people in need.</li> </ul>	<ul style="list-style-type: none"> <li># of provinces where baseline mobility community assessments were conducted.</li> <li># of rapid (HEAT) assessments completed in relation to displaced populations.</li> </ul>	<ul style="list-style-type: none"> <li>15</li> <li>481</li> </ul>	<ul style="list-style-type: none"> <li>34</li> <li>700</li> </ul>	<ul style="list-style-type: none"> <li>34</li> <li>700</li> </ul>	<ul style="list-style-type: none"> <li>34</li> <li>700</li> </ul>	<ul style="list-style-type: none"> <li>Cluster reporting.</li> <li>Assessments published on Humanitarian Response or shared with partners as relevant.</li> </ul>
	<ul style="list-style-type: none"> <li>Decision-makers have access to robust and rigorous data on internal and cross-border population movements, needs, response and gaps enabling them to make informed funding and programme decisions.</li> </ul>	<ul style="list-style-type: none"> <li># of sector-specific and inter-sectoral needs assessments completed.</li> <li># of households assessed as part of the annual WoA Assessment</li> </ul>	<ul style="list-style-type: none"> <li>107</li> <li>22,135</li> </ul>	<ul style="list-style-type: none"> <li>164</li> <li>26,000</li> </ul>	<ul style="list-style-type: none"> <li>164</li> <li>26,000</li> </ul>	<ul style="list-style-type: none"> <li>164</li> <li>26,000</li> </ul>	<ul style="list-style-type: none"> <li>Assessments published on Humanitarian Response or shared with partners as relevant.</li> <li>Assessment report is published and data is reflected in the HNO.</li> </ul>
	<ul style="list-style-type: none"> <li>Needs, response and gap overviews are carried-out regularly by the clusters and the ICCT to inform strategic decision-making and funding decisions.</li> </ul>	<ul style="list-style-type: none"> <li># of cluster reports on needs, response and gaps provided to the HCT per year</li> </ul>	<ul style="list-style-type: none"> <li>4</li> </ul>	<ul style="list-style-type: none"> <li>4</li> </ul>	<ul style="list-style-type: none"> <li>4</li> </ul>	<ul style="list-style-type: none"> <li>4</li> </ul>	<ul style="list-style-type: none"> <li>Periodic monitoring reports are published.</li> </ul>
	Activities						

# PLANNING FIGURES: PEOPLE TO BE ASSISTED

## BY REGION (2019)

### PEOPLE TO BE ASSISTED

	CONFLICT		POPULATION MOVEMENT			NATURAL DISASTERS		ACCESS	BY SEX & AGE	TOTAL
	Conflict affected	Conflict displaced	Natural disaster displaced	Afghan returnees <sup>2</sup>	Pakistani refugees	Sudden onset	Slow onset	Access to basic services	% children, women, men <sup>1</sup>	Total <sup>2</sup>
 CAPITAL	0.07M	0.02M	-	0.04M	-	0.01M	0.004M	0.10M	67   19   14%	0.2M
 CENTRAL HIGHLAND	0.01M	0.002M	-	0.001M	-	0.002M	0.33M	0.05M	59   21   21%	0.3M
 EASTERN	0.11M	0.06M	-	0.05M	-	0.01M	0.18M	0.11M	61   21   18%	0.4M
 NORTH EASTERN	0.04M	0.08M	-	0.02M	-	0.02M	0.47M	0.21M	59   21   20%	0.6M
 NORTHERN	0.04M	0.05M	-	0.01M	-	0.03M	0.40M	0.16M	59   21   20%	0.5M
 SOUTH EASTERN	0.05M	0.02M	-	0.01M	0.05M	0.00M	-	0.17M	75   15   10%	0.3M
 SOUTHERN	0.11M	0.05M	0.002M	0.08M	-	0.01M	0.33M	0.32M	59   20   21%	0.6M
 WESTERN	0.07M	0.06M	0.30M	0.07M	-	0.02M	1.23M	0.19M	58   21   21%	1.7M
	0.50M	0.35M	0.30M	0.21M	0.05M	0.11M	2.94M	1.31M	60   20   20%	4.5M

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1.Children (<18 years old), women, men (adults >18 years old)

2. The overall total for returnees is not the sum of returnees in need across the region, as there is an overlap between the returnees at the border and at the place of return.

## PLANNING FIGURES: PEOPLE TO BE ASSISTED (2020)

### PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE AND FINANCIAL REQUIREMENTS FOR 2020

#### PEOPLE IN NEED



#### PEOPLE TO BE ASSISTED



#### REQUIREMENTS (US\$)



#### BREAKDOWN OF PEOPLE TO BE ASSISTED

	TOTAL		CONFLICT	POPULATION MOVEMENT				DISASTERS		ACCESS	SEX & AGE	REQUIREMENTS	
	People in need	People to be assisted	Conflict affected	Conflict displaced	Natural disaster displaced	Afghan returnees	Pakistani refugees	Sudden onset	Slow onset	Access to basic services	% children, women, men*	Refugee chapter	Total (US\$)
EiE	0.4M	0.3M	0.11M	0.05M	-	0.03M	0.02M	0.03M	-	0.06M	100   0   0%	0.4M	25.7M
ES-NFI	0.6M	0.5M	-	0.27M	-	0.06M	0.05M	0.08M	-	-	62   19   19%	4.1M	41.7M
Food Security	2.6M	2.1M	-	0.32M	-	0.21M	0.04M	0.12M	1.46M	-	59   20   21%	-	161.8M
Health	1.8M	1.8M	0.26M	0.09M	-	0.08M	0.02M	0.01M	0.17M	1.02M	59   20   21%	-	58.5M
Nutrition	2.1M	0.9M	-	0.08M	-	0.05M	0.01M	0.03M	-	0.75M	79   21   0%	-	57.6M
Protection	1.9M	0.8M	0.34M	0.12M	-	0.05M	0.02M	0.02M	0.28M	-	71   16   13%	4.3M	33.9M
WASH	1.5M	0.9M	-	0.27M	-	0.14M	0.04M	0.10M	0.08M	0.22M	59   20   21%	-	27.2M
MP Cash	-	0.5M	-	0.32M	-	0.17M	-	-	-	-	59   20   21%	-	22.3M
<b>TOTAL</b>	<b>4.3M**</b>	<b>3M**</b>	<b>0.41M</b>	<b>0.32M</b>	<b>-</b>	<b>0.22M</b>	<b>0.05M</b>	<b>0.12M</b>	<b>1.47M</b>	<b>1.57M</b>	<b>60   20   20%</b>	<b>8.8M</b>	<b>***465.5</b>

\*Children (<18 years old), men, women (adults, >18 years). \*\*Total figure is not the total of the column, as the same people may appear several times. \*\*\*Total also includes UNHAS & Coordination.

## PLANNING FIGURES: PEOPLE TO BE ASSISTED (2021)

### PEOPLE IN NEED, PEOPLE TO RECEIVE ASSISTANCE AND FINANCIAL REQUIREMENTS FOR 2021

#### PEOPLE IN NEED



#### PEOPLE TO BE ASSISTED



#### REQUIREMENTS (US\$)



#### BREAKDOWN OF PEOPLE TO BE ASSISTED

	TOTAL		CONFLICT	POPULATION MOVEMENT				DISASTERS		ACCESS	SEX & AGE	REQUIREMENTS	
	People in need	People to be assisted		Conflict affected	Conflict displaced	Natural disaster displaced	Afghan returnees	Pakistani refugees	Sudden onset			Slow onset	Refugee chapter
EiE	0.3M	0.3M	0.11M	0.05M	-	0.03M	0.02M	0.03M	-	0.06M	100   0   0%	0.4M	25.8M
ES-NFI	0.6M	0.5M	-	0.27M	-	0.06M	0.05M	0.08M	-	-	62   19   19%	4.1M	39.5M
Food Security	1.6M	1.4M	-	0.28M	-	0.21M	0.04M	0.12M	0.73M	-	59   20   21%	-	104.1M
Health	1.7M	1.7M	0.27M	0.08M	-	0.08M	0.02M	0.01M	0.04M	1.24M	59   20   21%	-	54.4M
Nutrition	2.2M	0.9M	-	0.07M	-	0.05M	0.01M	0.03M	-	0.77M	80   20   0%	-	58.9M
Protection	1.7M	0.8M	0.34M	0.12M	-	0.04M	0.02M	0.02M	0.24M	-	70   16   14%	4.3M	29.1M
WASH	1.3M	0.7M	-	0.24M	-	0.15M	0.04M	0.11M	-	0.19M	59   20   21%	-	25.5M
MP Cash	-	0.4M	-	0.28M	-	0.17M	-	-	-	-	59   20   21%	-	20.6M
<b>TOTAL</b>	<b>3.7M**</b>	<b>2.4M**</b>	<b>0.42M</b>	<b>0.28M</b>	<b>-</b>	<b>0.22M</b>	<b>0.05M</b>	<b>0.12M</b>	<b>0.73M</b>	<b>1.61M</b>	<b>62   19   19%</b>	<b>8.8M</b>	<b>***394.9</b>

\*Children (<18 years old), men, women (adults, >18 years). \*\*Total figure is not the total of the column, as the same people may appear several times. \*\*\*Total also includes UNHAS & Coordination.

## PARTICIPATING ORGANISATIONS BY SECTOR

Education in Emergencies	AWEC, COAR, INTERSOS, IRC, NRC, SCA, SCI, UNICEF, WADAN, WC-CANADA, WC-UK, WVI	12
Emergency Shelter and Non-Food Items	ACF, ACTED, ADRA, AFGHAN AID, AIESO, ARCS, CARE, CARITAS GERMANY, CHRISTIAN AID, CoAR, CONCERN, CORDAID, CRDSA, DRC, FOCUS, HI, HRDA, IFRC, IMC, IMMAP, IOM, IRC, ISLAMIC RELIEF, MISSION EAST, NAC, NCA, NCRO, NOMAD CONCEPT GROUP (PRIVATE SECTOR), NRC, PIN, PU-AMI, QRCS, REACH, RELIEF INT, SAMUEL HALL, SCI, SHELTER FOR LIFE, SOLIDARITE INT, UN-HABITAT, UNHCR, UNICEF, WC, WHH, WSTA, ZOA	45
Food Security and Agriculture	ACF, ACTED, AFGHANAID, ANCC, AOAD, APA, AREA, CARE, CARITAS-G, CD, CHA, COAR, CORDAID, CRS, DRC, FAO, FGA, HRDA, IRC, JOHANNITER, MADERA, ME, MEDAIR, NAC, NCRO, NEI, NRC, OHW, ORCD, OXFAM, PAC, PIN, RI, SAMUEL HALL, SCI, SOFAR, WFP, WHH, WVA, ZOA	40
Health	AADA, ACF, ACTD, AHDS, ARCS, BARAN, BDN, CARE, CHA, DAO, EMERGENCY, HADAA, HEWAD, HI, HN-TPO, IMC, IMMAP, INTERSOS, IOM, JOHANNITER, MEDAIR, MMRCA, MRCA, OHPM, ORCD, PU-AMI, RI, SAF, SAVE THE CHILDREN, SDO, TERRES DES HOMMES, UNFPA, UNICEF, WHO, WORLD VISION, YHDO	36
Nutrition	AADA, ACF, AHDS, AKF, AKHS, ARCS, AYSO, BARAN, BDN, BRAC, CAF, CAI, CHA, CORDAID, HEWAD, HN-TPO, HNTPO, IMC, MEDAIR, MMRCA, MOPH, MOVE, MRCA, OCCD, OHDP, OHPM, OHPM, ORCD, PU-AMI, SAF, SCA, SHRO, TIKA, UNICEF, WFP, WHO, WV	38
Protection	AADA, ACBAR, ACF, ACTED, ACTED, ACTIONAID, ADA, AHDA, AHDS, AHEAD, ANCC, ARCS, ATVO, AWEC, AYSO, BARAN, CHRISTIANAID, CIC, CORDAID, DACAAR, DANISH PEOPLE'S AID, DRC, EPD, HEALTHNET TPO, HRDA, IMC, IOM, IRC, MADERA, MEDAIR, NCA, NCRO, NPO/RRAA, NRC, OHPM, OHW, ORD, OXFAM, PACO, PIN, PUI, RRAA, SC NETHERLANDS, SDO, SHPOUL, SI, TDH, THE JOHANNITER, TLO, TURQUOISE MOUNTAIN TRUST, UNAMA, UNFPA, UNHABITAT, UNHCR, UNICEF, UNMAS, WC-UK, WCC, WFP, WHH, WVI, YHDO, ZOA	64
Water, Sanitation and Hygiene	ACBAR, ACF, ACTED, ADA, AHDA, APA, ARCS, CARITAS-G, CHRISTIAN AID, COAR, CRDSA, DACAAR, HAPA, HRDA, ICRC, IMC, INTERSOS, IOM, IRC, MADERA, MEDAIR, MERCY CROPS, MISSION EAST, MRRD, NCA, NCRO, NPO/RRAA, NRC, OXFAM, RI, SAVE THE CHILDREN, SDO, SI, UNHCR, UNICEF, WHH, WHO, WVI, ZOA	40
Multi-Purpose Cash	ACF, ACTED, CARE, CORDAID, DRC, IOM, IRC, MEDAIR, NRC, ORD, OXFAM, PIN, SI	13
Refugee Chapter	ACTD, APA, CARE, COAR, DACAAR, ICRC, INSO-SE, IRC, MADERA, MORR, MSF, NRC, O-HASA, OHPM, ORCD, SI, TLO, UNHCR, UNICEF, WFP	20



## ACRONYMS

AADA	Agency for Assistance and Development of Afghanistan	DoRR	Department of Refugee and Repatriation
AAP	Accountability to Affected Populations	DPG	Development Partners Group
ACBAR	Agency Coordinating Body for Afghan Relief & Development	DRC	Danish Refugee Council
ACF	Action contre la Faim/Action Against Hunger	DSWG	Durable Solutions Working Group
ACTD	Afghanistan Center for Training and Development	EFSA	Emergency Food Security Assessment
ACTED	Agency for Technical Cooperation and Development	EiE	Education in Emergencies
ADA	Afghanistan Development Association	EIEWG	Education in Emergencies Working Group
ADRA	Adventist Development and Relief Agency	EOD	Explosive Ordnance Disposal
AFN	Afghani (currency)	EPD	Equality for Peace and Democracy
AHDAA	Agency For Humanitarian and Development Assistance For Afghanistan	EPHS	Essential Package of Hospital Services
AHDS	Afghan Health & Development Services	EQRA	Education Quality Reform in Afghanistan
AHEAD	Assistance for Health Education and Development	ERC	Emergency Relief Coordinator
AHF	Afghanistan Humanitarian Fund	ERM	Emergency Response Mechanism
AIESO	Afghanistan Independent Educational and Services Organization	ERP	Emergency Response Preparedness
AKF	Aga Khan Foundation	ERW	Explosive Remnants of War
ALC	Accelerated Learning Class	ESNFI	Emergency Shelter and Non-Food Items
ANCC	Afghanistan National Re-Construction Co-ordination	FAM	Famine Action Mechanism
ANDMA	Afghanistan National Disaster Management Authority	FAO	Food and Agriculture Organization
ANPDF	Afghanistan National Peace and Development Framework	FATP	First Aid Treatment Posts
AOAD	Accessibility Organization for Afghan Disable	FEWSNET	Famine Early Warning Systems Network
APA	Afghan Planning Agency	FGA	Future Generation Afghanistan
APAPPS	Afghanistan-Pakistan Action Plan for Peace and Stability	FSAC	Food Security and Agriculture Cluster
ARCS	Afghan Red Crescent Society	FTS	Financial Tracking Service
AREA	Agency for Rehabilitation & Energy-Conservation in Afghanistan	GAM	Global Acute Malnutrition
ATVO	Afghanistan Technical Vocational Organisation	GAM	Gender and Age Marker
AWEC	Afghan Women's Educational Center	GBV	Gender-Based Violence
AWEC	Afghan Woman's Education Center	GiHATF	Gender in Humanitarian Action Task Force
AYSO	Afghan Youth Service Organization	HADAAF	Humanitarian Assistance and Development Association for Afghanistan
BARAN	Bu Ali Rehabilitation and Aid Network	HAG	Humanitarian Access Group
BDN	Bakther Development Network	HAPA	Humanitarian Action for the People Of Afghanistan
BHC	Basic Health Centre	HCAWG	Humanitarian Coordinated Assessment Working Group
BPHS	Basic Package of Health Services	HCT	Humanitarian Country Team
BSFP	Blanket Supplementary Feeding Programme	HEAT	Household Emergency Assessment Tool
CAF	Care of Afghan Familie	HEWAD	Hewad Reconstruction Health And Humanitarian Assistance Committee
CAI	Comfort Aid International	HH	Household
CARE	Cooperative for Assistance and Relief Everywhere	HI	Handicap International
Caritas G	Caritas Germany	HLP	Housing, Land and Property
CBE	Community-Based Education	HLP-TF	Housing, Land, and Property Taskforce
CBPF	Country-Based Pooled Fund	HMIS	Health Management Information System
CCNPP	Citizens' Charter National Priority Programme	HNO	Humanitarian Needs Overview
CDC	Community Development Council	HN-TPO	Health Net International Transcultural Psychosocial Organization / Health Works
CERF	Central Emergency Response Fund	HRDA	Human Resource Development Agency
CEWG	Community Engagement Working Group	HRP	Humanitarian Response Plan
CHA	Coordination of Humanitarian Assistance	HRT	Humanitarian Regional Team
CIC	Children in Crisis	HTR	Hard-to-reach
CMR	Clinical+E18 Management of Rape	ICCT	Inter-Cluster Coordination Team
CoAR	Coordination of Afghan Relief	ICRC	International Committee of the Red Cross
CORDAID	Catholic Organization for Relief and Development Aid	IDP	Internally Displaced Person
CPiE	Child Protection in Emergencies	IFRC	International Federation of Red Cross and Red Crescent Societies
CRDSA	Coordination Of Rehabilitation & Development Services For Afghanistan	IHL	International Humanitarian Law
CRS	Catholic Relief Services	IHRL	International Human Rights Law
CVWG	Cash and Vouchers Working Group	IM	Information Management
DACAAR	Danish Committee for Aid to Afghan Refugees	IMAM	Integrated Management of Acute Malnutrition
DAIL	Department of Agriculture Irrigation and Livestock	IMC	International Medical Corps
DAO	Development and Ability Organization	IMCI	Integrated Management of Childhood Illnesses
DED	District Education Department	IMMAP	Information Management and Mine Action Programs
DFID	Department for International Development	INGO	International Non-Governmental Organisation
		INSO-SE	International NGO Safety Organisation - South East
		IOM	International Organisation for Migration

IPC	Integrated Food Security Phase Classification	QRCS	Qatar Red Crescent Society
IRC	International Rescue Committee	RC	Resident Coordinator
ISK	Islamic State of Khorasan/Daesh	RELIEF INT	Relief International
ISSS	Inter-Sector Severity Scale	RRAA	Rural Rehabilitation Association for Afghanistan
IYCF-E	Infant and Young Child feeding practices in Emergency	RUTF	Ready-to-use therapeutic food
LCD	Legal Civil Documentation	SADD	Sex and Age Disaggregated Data
MADERA	Mission d'Aide au Développement des Economies Rurales en Afghanistan / Mission to Support the Development of Rural Economies in Afghanistan	SAF	South Asia Foundation
MAF	Mutual Accountability Framework	SAM	Severe Acute Malnutrition
MAIL	Ministry of Agriculture, Irrigation and Livestock	SBCC	Social and Behavioural Change Communication
MAM	Moderate Acute Malnutrition	SC	Save the Children
ME	Mission East	SCA	Swedish Committee for Afghanistan
MHT	Mobile Health Team	SCI	Save the Children International
MMRCA	Medical Management and Research Courses for Afghanistan	SDG	Sustainable Development Goal
MoPH	Ministry of Public Health	SDO	Sanayee Development Organization
MoRR	Ministry of Refugees and Repatriations	SEA	Sexual Exploitation and Abuse
MoU	Memorandum of Understanding	SGBV	Sexual and Gender-Based Violence
MOVE	Move Welfare Organization	SHC	Sub-Health Centre
MPC	Multi Purpose Cash	SHPOUL	Sound Humanitarian, Participatory and Organisational Uplift
MRCA	Medical Refresher Courses for Afghans	SHRO	Shahamat Health and Rehabilitation Organization
MRE	Mine Risk Education	Sida	Swedish International Development Cooperation Agency
MRRM	Monitoring and Reporting Mechanism	SMART	Standardised Monitoring and Assessment of Relief and Transition
MRRD	Ministry of Rural Rehabilitation and Development	SMEB	Survival Minimum Expenditure Basket
MSF	Médecins Sans Frontières / Doctors Without Borders	SO	Strategic Objective
N/A	Not Available	SOFAR	Salam Organisation For Afghanistan Rehabilitation
NAC	Norwegian Afghanistan Committee	SI	Solidarités International
NCA	Norwegian Church Aid	TDH	Terre Des Hommes
NCRO	New Consultancy and Relief Organization	TIKA	Turkish Cooperation and Coordination Agency
NEI	Nutrition & Education International	TLO	The Liaison Office
NFI	Non-Food Items	TLS	Temporary Learning Spaces
NGO	Non-Governmental Organisation	TSPF	Targeted Supplementary Feeding Programme
NiE	Nutrition in Emergencies	UN	United Nations
NPO/RRAA	Norwegian Project Office/Rural Rehabilitation Association for Afghanistan	UNAMA	United Nations Assistance Mission in Afghanistan
NRC	Norwegian Refugee Council	UNCT	United Nations Country Team
NSAG	Non-State Armed Group	UNDP	United Nations Development Program
NWOW	New Way of Working	UNFPA	United Nations Population Fund
OSCD	Organization for Community Coordination Development	UNHAS	United Nations Humanitarian Air Service
OCHA	Office for the Coordination of Humanitarian Affairs	UNHCR	United Nations High Commissioner for Refugees
O-HASA	Organization for Humanitarian Assistance & Services for Afghanistan	UNICEF	United Nations Children's Fund
OHPM	Organization for Health Promotion and Management	UNMAS	United Nations Mine Action Service
OHW	Organization of Human Welfare	UNOPS	The United Nations Office for Project Services
ORCD	Organization For Research and Community Development	US\$	United States dollar
ORD	Organization For Relief Development	USAID	United States Agency for International Development
PAC	People Action for Change	UXO	Unexploded Ordnance
PACO	People Action For Change organization	WADAN	Welfare Association for the Development of Afghanistan
PED	Provincial Education Department	WASH	Water Sanitation and Hygiene
PIMS	Protection Incident Monitoring System	WC	War Child
PIN	People In Need (org)	WCC	War Child Canada
PiN	People in Need	WC-Canada	War Child - Canada
PLW	Pregnant and Lactating Women	WC-UK	War Child - United Kingdom
PMT	Programme Management Team	WFP	World Food Programme
PoC	Protection of Civilians	WHH	Welthungerhilfe
PoC	Persons of Concern	WHO	World Health Organisation
PSEA	Protection from Sexual Exploitation and Abuse	WoA	Whole of Afghanistan Assessment
PSN	People with Specific Needs	WSTA	Watan Social and Technical service Association
PU-AMI	Première Urgence Internationale	WVA	World Vision Afghanistan
PUI	Première Urgence Internationale	WVI	World Vision International
		YHDO	Youth Health and Development Organisation
		ZOA	South East Asia (Dutch)

## REFERENCES

1. 106 districts scored 4 or 5 in a severity scale from 0 to 5. The scales are based on three indicators: i) IDPs at district of origin; ii) civilian casualties; iii) armed conflict incidents and air strikes. Each of these indicators was normalised to a scale of 0 to 5 on a logarithmic scale using the min-max method (as outlined on page 12 here: [http://hdr.undp.org/sites/default/files/hdi\\_training.pdf](http://hdr.undp.org/sites/default/files/hdi_training.pdf)) The scales were reversed (5 – score), and a geometric mean (cube root of the three scores multiplied together) of the three was used to calculate the overall severity score. This is the same method used in the INFORM index (<http://www.inform-index.org/>), and the severity scores will be comparable over time.
2. UNAMA Human Rights, Quarterly Report on the Protection of Civilians in Armed Conflict: 1 January to 30 September 2018, [https://unama.unmissions.org/sites/default/files/unama\\_protection\\_of\\_civilians\\_in\\_armed\\_conflict\\_3rd\\_quarter\\_report\\_2018\\_10\\_oct.pdf](https://unama.unmissions.org/sites/default/files/unama_protection_of_civilians_in_armed_conflict_3rd_quarter_report_2018_10_oct.pdf)
3. *ibid*
4. Access Monitoring and Reporting Framework (AMRF), compiled by OCHA Access Unit. Between January and September 2018 there were 38 aid workers injured and 20 killed. In the same period of 2017, there were nine aid workers injured and 14 killed.
5. *ibid*
6. Afghanistan Health Cluster, September 2018
7. REACH Initiative, Whole of Afghanistan (WoA) Assessment, August 2018, <https://data.humdata.org/dataset/whole-of-afghanistan-assessment-household-dataset-august-2018>
8. Crabtree, Afghans' Misery Reflected in Record-Low Well-Being Measures, 26 October, 2018, <https://news.gallup.com/poll/244118/afghans-misery-reflected-record-low-measures.aspx>
9. 262,165 people or 38,143 families displaced as of 30 October 2018, OCHA Afghanistan interactive dashboard, Internal displacement due to conflict.
10. OCHA Afghanistan, Afghanistan Humanitarian Bulletin Issue 78, 1 July – 30 September 2018, <https://reliefweb.int/report/afghanistan/afghanistan-humanitarian-bulletin-issue-78-1-july-30-september-2018>
11. REACH Initiative, Whole of Afghanistan (WoA) Assessment, *loc. cit.*
12. Ministry of Education, Islamic Republic of Afghanistan, and UNICEF, Global initiative on children out of school – Afghanistan Country Study, June 2018, <https://www.unicef.org/afghanistan/reports/global-initiative-out-school-children>
13. IOM Afghanistan, Return of undocumented Afghans - Weekly situation report, 21-27 October 2018, [https://afghanistan.iom.int/sites/default/files/Reports/iom\\_afghanistan-return\\_of\\_undocumented\\_afghans- situation\\_report\\_21-27\\_october\\_2018.pdf](https://afghanistan.iom.int/sites/default/files/Reports/iom_afghanistan-return_of_undocumented_afghans- situation_report_21-27_october_2018.pdf)
14. OCHA Afghanistan, 2018 Afghanistan Humanitarian Needs Overview, pg. 8, <https://www.humanitarianresponse.info/en/operations/afghanistan/document/afghanistan-humanitarian-needs-overview-2018>
15. IOM DTM Afghanistan, Baseline Mobility Assessment Summary Results (July – Sep 2018)
16. This includes 12,811 registered refugee returnees from Pakistan and circa. 25,150 undocumented returnees. IOM Afghanistan, Return of undocumented Afghans - Weekly situation report, 16-22 September 2018, [https://afghanistan.iom.int/sites/default/files/Reports/iom\\_afghanistan-return\\_of\\_undocumented\\_afghans- situation\\_report- 16 - 22 september 2018.pdf](https://afghanistan.iom.int/sites/default/files/Reports/iom_afghanistan-return_of_undocumented_afghans- situation_report- 16 - 22 september 2018.pdf)
17. NRC, Escaping War: Where to Next? The Challenges of IDP Protection in Afghanistan, January 2018 <https://www.nrc.no/resources/reports/escaping-war-where-to-next-the-challenges-of-idp-protection-in-Afghanistan/>
18. Fewsnet, Afghanistan Food Security Outlook, October 2018 to February 2019, <http://fews.net/central-asia/afghanistan>
19. Integrated Food Security Phase Classification, Afghanistan IPC Acute Food Insecurity Analysis, August 2018-February 2019, Report #10, Issued November 2018. [http://www.ipcinfo.org/fileadmin/user\\_upload/ipcinfo/docs/IPC\\_Afghanistan\\_AcuteFI\\_Nov2018\\_Final.pdf](http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC_Afghanistan_AcuteFI_Nov2018_Final.pdf)
20. UNICEF, Child Marriage in Afghanistan, July 2018, [https://www.unicef.it/Allegati/Child\\_Marriage\\_in\\_Afghanistan.pdf](https://www.unicef.it/Allegati/Child_Marriage_in_Afghanistan.pdf)
21. Protection cluster monitoring, Western Region, September 2018
22. Mugali, Mansoor, Parwiz, Ahmad, Safi, Higgins-Steele & Varkey, Improving immunization in Afghanistan: results from a cross-sectional community-based survey to assess routine immunization coverage, 4 April 2017, <https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-017-4193-z>
23. NRC, Afghanistan, Trader Survey, April/May 2018.
24. Afghanistan health indicators, WHO Afghanistan Country Office 2018
25. Afghanistan Health cluster, Country Task Force on Monitoring and Reporting Data, October 2018
26. Contini, Taqdeer, Cherian, Shokohmand, Gosselin, Graaff and Noe, Emergency and Essential Surgical Services in Afghanistan: Still a Missing Challenge, World Journal of Surgery ,20 January 2010 <http://www.who.int/surgery/publications/eesc-afghanistan.pdf>
27. Since 2016 humanitarian funding has supported the establishment of 62 first aid trauma posts.
28. UNICEF data, 2018. 203,000 girls; 341,000 boys.
29. UNAMA Human Rights, Quarterly Report on the Protection of Civilians in Armed Conflict, *loc. cit.*
30. Christian Children's Fund, Children in Conflict: Afghanistan, April 2003, [https://reliefweb.int/sites/reliefweb.int/files/resources/AEE6B74580699E2B4925759400066977-Full\\_Report.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/AEE6B74580699E2B4925759400066977-Full_Report.pdf)
31. Asia Foundation, Afghanistan in 2017 - a survey of the Afghan people, November 2017, <https://asiafoundation.org/publication/afghanistan-2017-survey-afghan-people/>
32. Save the Children, From Europe to Afghanistan: Experiences of Child Returnees, October 2018, <https://reliefweb.int/report/afghanistan/europe-afghanistan-experiences-child-returnees>
33. FEWSNET, Drought Update, 20 September 2018, <http://fews.net/central-asia/afghanistan/key-message-update/september-2018>
34. Integrated Food Security Phase Classification, Afghanistan IPC Acute Food Insecurity Analysis, August 2018-February 2019, Report #10, Issued November 2018. [http://www.ipcinfo.org/fileadmin/user\\_upload/ipcinfo/docs/IPC\\_Afghanistan\\_AcuteFI\\_Nov2018\\_Final.pdf](http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC_Afghanistan_AcuteFI_Nov2018_Final.pdf)
35. See Response Parameters section (pp. 12-13) of the 2018-2021 Afghanistan Humanitarian Response Plan, December 2017: <https://www.humanitarianresponse.info/en/operations/afghanistan/document/afghanistan-humanitarian-response-plan-2018-2021>
36. The One UN for Afghanistan programme is the UN Country Team's (UNCT) equivalent to the United Nations Development Assistance Framework (UNDAF). One UN for Afghanistan (2018-2021), <https://www.af.one.un.org/enigma-service/lorem-ipsu-2/>
37. See pp. 17-18 of the 2019 Afghanistan HNO for further details: [https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/afg\\_2019\\_humanitarian\\_needs\\_overview.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/afg_2019_humanitarian_needs_overview.pdf)
38. These include armed conflict/protection of civilians; population movement/forced displacement; slow and sudden onset natural disasters and access to basic services.
39. The operational arm of the UNCT.
40. The PIMS serves as a central repository for data collected vis-à-vis protection violation
41. The objectives of the HCT protection strategy are: i) The mitigation of protection risks and reducing the exposure of civilians to violence and life threatening conditions; ii) Emergency humanitarian protection and assistance is extended to all persons in need, particularly in hard to reach areas, on the basis of their vulnerabilities, in safety and dignity, in accordance with the principles of equity, accountability and 'do no harm,' and in a conflict-sensitive manner; iii) The Government of Afghanistan, supported by humanitarian and development partners, addresses the protection of IDPs in protracted displacement, and of returnees, focusing on the implementation of the National IDP Policy, the DiREC Policy Framework for Returnees and IDPs and 'the whole of community approach' at the nexus between humanitarian and development programming, to achieve durable solutions.
42. Perfidious acts are those in which the attacker feigns protected civilian status to carry out an attack, such as using an ambulance to conceal bombs.
43. Other priority advocacy topics include: urging the Afghan Air Forces and International Military Forces to review their targeting criteria and pre-engagement precautionary measures given the increasing civilian casualties from airstrikes, as well as additional financial support for EOD teams under Protocol V to ensure that the Government meets its obligations for clearance as soon as possible after fighting in locations where they have taken/re-gained control.

44. This forum last met in February 2016 and February 2017.
45. Human Rights Watch, No Safe Place: Insurgent Attacks on Civilians in Afghanistan, May 2018, <https://www.hrw.org/report/2018/05/08/no-safe-place/insurgent-attacks-civilians-afghanistan>
46. Eight out of ten female-headed households are food insecure compared to seven out of ten male-headed households. FSAC & Government of Afghanistan, Emergency Food Security Assessment, 2018.
47. REACH Initiative, Whole of Afghanistan (WoA) Assessment, loc. cit.
48. World Bank, Afghanistan to 2030: Priorities for Economic Development Under Fragility, 6 August, 2018. <https://www.worldbank.org/en/country/afghanistan/publication/afghanis>
49. IOM Afghanistan, DTM Data, Feb - September through the Nimroz and Islam Qala border crossings.
50. United States Institute of Peace, Redefining Masculinity in Afghanistan, February 2018, <https://www.usip.org/publications/2018/02/redefining-masculinity-afghanistan>
51. Malikiyar, H, Al Jazeera, Afghanistan: Pity the children, February 2016 <https://www.aljazeera.com/indepth/opinion/2016/02/afghanistan-pity-children-160210082008267.html>
52. World Bank, Afghanistan to 2030: Priorities for Economic Development Under Fragility, loc cit.
53. REACH Initiative, Whole of Afghanistan (WoA) Assessment, loc. cit.
54. FSAC & Government of Afghanistan, Emergency Food Security Assessment, loc cit.
55. REACH Initiative, Whole of Afghanistan (WoA) Assessment, loc. cit.
56. Awaaz Afghanistan is an inter-agency platform through which complaints and feedback received from affected people are received and resolved.
57. This includes cash grants and vouchers. In 2018, cash transfers accounted for 95 per cent (\$20 million) of the total value of funds transferred though cash-based interventions in Afghanistan and 5 per cent accounted for vouchers (\$1 million).
58. The SMEB is the cash value equivalent of a selected group of basic goods, services or items that are necessary to ensure household survival for two months. Less vulnerable households receive 17,000 AFN for one month covering the following needs: food [6,000 AFN]; NFI (kitchen Kits) [4,000 AFN]; Shelter/WASH [2,000 AFN]; fuel [2,000 AFN]; health expenditures [2,000 AFN] and transportation [1,000 AFN]. More vulnerable households receive a top-up of 11,000 AFN in the second month covering: food [6,000 AFN]; NFI (kitchen Kits) [N/A]; Shelter/WASH [1,000 AFN]; fuel [2,000 AFN]; health expenditures [2,000 AFN] and transportation [N/A].
59. In May 2018, ERM partners moved towards stricter targeting criteria, aiming to reach people displaced within the preceding three months, down from six months under the previous ERM rules, and who meet specific vulnerability criteria (specific household food security indicators and debt levels). Furthermore, a two-tier assistance package was introduced, with households that were classified as extremely vulnerable receiving the full survival minimum expenditure basket (SMEB) covering needs for two months (\$375 per HH), and less vulnerable households receiving assistance for one month only (\$225).
60. Overview of cash transfers and vouchers in 2018 Humanitarian Response Plan, September 2018, <https://www.humanitarianresponse.info/en/operations/afghanistan/document/afghanistan-humanitarian-response-plan-2018-2021>
61. The AMRF captured 278 incidents from January - September 2018, comparable to the 251 incidents tracked from May 2017 to the end of that year.
62. Afghanistan is currently ranked 8th of 170 in the coming 30 years for vulnerability to climate change impacts. World Bank, Famine Action Mechanism Concept Note, November 2018.
63. IOM Afghanistan, DTM data, September 2018.
64. Afghanistan Health cluster, September 2018.
65. 49,000 from Pakistan and 119,000 from Iran.
66. This is particularly the case following the recent decision of the Afghanistan and Pakistan governments to agree on a timeline for the repatriation of people from Afghanistan living in Pakistan under the APAPPS. As it stands, 50,000 undocumented people from Afghanistan - out of a total of 400,000 undocumented people- may be repatriated between March and June 2019.
67. For double shifting classes, a teacher runs one class of students in the morning and the other class in the afternoon. Similarly, for triple shifts, the teacher divides the day into three and runs three separate classes with measures in place to minimise the impact on teaching quality. As per CBE policy, for primary school grades, the normal teaching time should be three hours.
68. Global Initiative on Out-Of-School Children, Afghanistan Country Study, 2018, Ministry of Education and UNICEF, <https://www.unicef.org/afghanistan/reports/global-initiative-out-school-children>
69. Joint Education and Child Protection (JENA) handbook, a study conducted by REACH and other EiE assessments.
70. Afghanistan Central Statistics Organisation, Afghanistan Living Conditions Survey, 2016/17, <http://cso.gov.af/Content/files/ALCS/ALCS%202016-17%20Analysis%20report%20-%20Full%20report23%2009%202018-ilovepdf-compressed.pdf>
71. Integrated Food Security Phase Classification, Afghanistan IPC Acute Food Insecurity Analysis, August 2018-February 2019, Report #10, Issued November 2018. Note: Flowminder population estimates have been used as the basis for IPC calculations in the HRP.
72. WASH cluster partners' needs assessment reports 2016-2017
73. DACCAR conducted post-distribution surveys among the ERM partner-assisted projects in North in 2016
74. \$25 to \$55 per person for transportation - depending on travel distance - and \$100 per household for NFI.

# WHAT IF?

## ...WE FAIL TO RESPOND

### EDUCATION IN EMERGENCIES



Education contributes to restoring normality in the lives of children through a return to familiar routines, instilling hope for the future, and mitigating the psychosocial impact of violence and displacement. If we fail to provide on time education support, children's protection, development and life would be at risk.

### EMERGENCY SHELTER & NFI



A lack of shelter assistance and essential household items would mean that people would be forced to live with limited or no privacy and dignity, exposing vulnerable families including women, children and older people to harsh weather conditions, which may lead to mortality and negative coping mechanisms such as early marriages, child labour and other protection risks.

### FOOD SECURITY & AGRICULTURE



If the timely food and livelihoods supports are not provided to the 4.9 million people in need of humanitarian support, their livelihoods will be lost, they will resort to negative coping strategies. The absence of timely food and livelihoods support may lead to widespread migration, disease, malnutrition and deaths.

### HEALTH



In light of the ongoing conflict and chronic under-development, increased death and suffering will occur. Up to 250,000 people with trauma-related injuries will not receive essential care and disability support and 270,000 IDPs will be denied access to essential life-saving health services, including 120,000 women of reproductive age who will not receive essential reproductive health care.

### NUTRITION



Children under five affected by malnutrition, particularly severe acute malnutrition (SAM), will die unless they receive help. Children who are suffering from SAM are nine times as likely to die when compared to apparently healthy children who aren't affected by SAM.

### PROTECTION



Abuses will increase, displacement will continue and development gains will be reversed, exacerbating existing vulnerabilities and contributing to the adoption of negative coping mechanisms and potentially migration. Persons of concern will remain unable to access remedies for protection violations, and their safety and dignity will continue to be at risk.

### WATER, SANITATION, HYGIENE



The basic human rights of more than 1.3 million people will be violated; the lives of nearly 300,000 children under-five will be at risk of disease and even death; and the dignity of over 350,000 women and adolescent girls compromised due to exposure to potential abuse and harassment in the absence of these basic services.

### REFUGEE CHAPTER



Without humanitarian action, a generation of refugee children and youth are at risk of permanent disruption to their well-being and education, threatening their future prospects. Food insecurity for refugees could lead to malnutrition and use of negative coping mechanisms.

### MULTI-PURPOSE CASH ASSISTANCE



Without the cash needed to survive, conflict IDPs and returnees will be unable to meet their basic needs during the first few weeks of displacement, and frequently resort to negative coping strategies with devastating long-term impacts on the households, especially children.



# GUIDE TO GIVING

## CONTRIBUTING TO THE HUMANITARIAN RESPONSE PLAN



To see the country's humanitarian needs overview, humanitarian response plan and monitoring reports, and donate directly to organisations participating to the plan, please visit :

[www.humanitarianresponse.info/operations/afghanistan](http://www.humanitarianresponse.info/operations/afghanistan)

## DONATING THROUGH THE CENTRAL EMERGENCY RESPONSE FUND (CERF)



The CERF provides rapid initial funding for life-saving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises. The OCHA-managed CERF receives contributions from various donors – mainly governments, but also private companies, foundations, charities and individuals – which are combined into a single fund. This is used for crises anywhere in the world. Find out more about the CERF and how to donate by visiting the CERF website:

[www.unocha.org/cerf/our-donors/how-donate](http://www.unocha.org/cerf/our-donors/how-donate)

## DONATING THROUGH THE AFGHANISTAN HUMANITARIAN FUND (AHF)



The AHF is a country-based pooled fund (CBPF). CBPFs are multi-donor humanitarian financing instruments established by the Emergency Relief Coordinator and managed by OCHA at the country level under the leadership of the Humanitarian Coordinator. Find out more about CBPFs and how to make a contribution by visiting:

[www.unocha.org/what-we-do/humanitarian-financing/country-based-pooled-funds](http://www.unocha.org/what-we-do/humanitarian-financing/country-based-pooled-funds)

For information about the AHF, please contact:

[ahf-afg@un.org](mailto:ahf-afg@un.org)

## IN-KIND RELIEF

The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure the supplies that are most needed are the ones delivered. If you can make only in-kind contributions in response to disasters and emergencies, please contact:

[logik@un.org](mailto:logik@un.org)



## REGISTERING AND RECOGNISING YOUR CONTRIBUTIONS



OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its purpose is to give credit and visibility to donors for their generosity, to show the total amount of funding, and to expose gaps in humanitarian plans. Please report yours to FTS, either by email to [fts@un.org](mailto:fts@un.org) or through the online contribution report form at <http://fts.unocha.org>





This document is produced on behalf of the Humanitarian Country Team and partners.

This document provides the Humanitarian Country Team's shared understanding of the crisis, including the most pressing humanitarian needs, and reflects its joint humanitarian response planning.

The designation employed and the presentation of material on this report do not imply the expression of any opinion whatsoever on the part of the Humanitarian Country Team and partners concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

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