

Afghanistan



Rogier Lemoyne/UNICEF/2010

2011

Consolidated Appeal



UNITED NATIONS

Consolidated Appeals Process (CAP) Aid agencies working together to:



<http://www.humanitarianappeal.net>

SAMPLE OF ORGANIZATIONS PARTICIPATING IN CONSOLIDATED APPEALS

ACF	GOAL	MACCA	TEARFUND
ACTED	GTZ	Malteser	Terre des Hommes
ADRA	Handicap International	Medair	UNAIDS
Afghanaid	HELP	Mercy Corps	UNDP
AVSI	HelpAge International	MERLIN	UNDSS
CARE	Humedica	NPA	UNESCO
CARITAS	IMC	NRC	UNFPA
CONCERN	INTERSOS	OCHA	UN-HABITAT
COOPI	IOM	OHCHR	UNHCR
CRS	IRC	OXFAM	UNICEF
CWS	IRIN	Première Urgence	WFP
DRC	Islamic Relief Worldwide	Save the Children	WHO
FAO	LWF	Solidarités	World Vision International

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Please note that appeals are revised regularly. The latest version of this document is available on <http://www.humanitarianappeal.net>.

Full project details, continually updated, can be viewed, downloaded and printed from <http://fts.unocha.org>.



Legend

- ⊗ National capital
- ⊙ Provincial capital
- Populated place
- International boundary
- - - Provincial boundary

Provinces

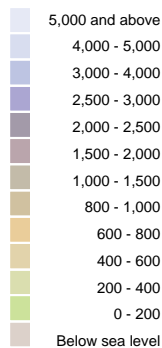
1. Kunduz, 2. Panisher, 3. Nuristan, 4. Kapisa, 5. Laghman, 6. Parwan, 7. Kabul, 8. Khost

Disclaimers: The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

*Dotted line represents approximately the Line of Control in Jammu & Kashmir agreed upon by India and Pakistan. The final status of Jammu & Kashmir has not yet been agreed upon by the parties.

Map data sources: CGIAR, United Nations Cartographic Section, ESRI, Europa Technologies, UN OCHA.

Elevation (meters)



1. EXECUTIVE SUMMARY

As a result of the violent conflict, humanitarian needs in Afghanistan remain high, in particular for the chronically vulnerable rural population with low coping capacities. Humanitarian needs include food and nutrition security, forced displacement, access to water, sanitation and hygiene, livelihood assistance, and social protection, in particular for women and children. In addition, natural disasters and extreme weather combined with limited infrastructure further hamper effective recovery and development.

This complex combination of violent conflict and natural disasters will leave an estimated 7.8 million people in need of food assistance in 2011, and a further one million in need of emergency agricultural assistance. An estimated 68% of the Afghan population has no access to safe water and sanitation facilities. Humanitarian actors must also ensure emergency assistance and protection for the estimated 440,647 internally displaced people (IDPs), 60% of whom fled due to conflict.

Natural disasters have similar impacts. For example, summer flash floods in July and August 2010 left some 200,000 homeless, adding to the number requiring emergency humanitarian and recovery assistance in 2011. According to a UNIFEM report issued in April 2010, an estimated 60.7% of Afghan women are exposed to physical and psychological violence, while an estimated 25% suffer from sexual violence. Sexual violence and other protection concerns increase in situations of displacement.

The safety and security of both civilians and humanitarian aid workers is of high concern in Afghanistan. From January 2010 to September 2010, the United Nations Assistance Mission in Afghanistan (UNAMA) Human Rights office recorded a total of 2,412 civilian casualties, an increase of 14% from the same period in 2009. According to the United Nations Department of Safety and Security (UNDSS), security incidents that affected the UN directly were 133% higher in September 2010 compared to the same period last year. While attacks predominantly occur in or near anti-government strongholds in the southern, northern, and eastern regions of the country, the 28 October 2009 attack on the Baktar guesthouse in Kabul and the 26 October 2010 assault on the UNAMA compound in Herat indicate no area is immune to violence. In fact, trend analysis indicates that in 2010 violent attacks affecting civilians and the aid community have spread to areas that traditionally were relatively calm.

The 2011 Consolidated Appeal (CAP) focuses on life-saving and livelihood-saving activities, strengthened with emergency preparedness and contingency planning to ensure common strategies. The Humanitarian Country Team (HCT) identified the following strategic objectives:

- To provide humanitarian assistance and protection to populations affected by conflict and natural disaster.
- To respond to humanitarian needs resulting from situations of chronic vulnerability.
- To develop contingency planning on recognized hazards (with reference to Hyogo Framework Priority 5).

2011 Consolidated Appeal for Afghanistan: Key parameters	
Duration:	12 months (January – December 2011)
Key milestones in 2011:	Planting seasons: March, October Winter: October-November Spring: March Harvest: June-September
Target beneficiaries:	7.8 million food assistance beneficiaries 440,647 IDPs 515,000 refugee returnees 1,000,000 farmers Vulnerable populations
Total funding request:	Funding request per beneficiary:
\$679 million	\$87

Some basic facts about Afghanistan

Type		Most recent data	Previously
Demographics	Total population	26,000,000 ¹ (Government of Afghanistan, Central Statistics Office, 2010 estimate based on 2007/8 National Risk and Vulnerability Assessment)	14,606,400 (UNFPA 1990)
	Under-five mortality (probability of dying between birth and five years of age per 1,000 live births)	191 per 1,000 (Ministry of Public Health / World Health Organization/United Nations Children's Fund, 2008)	260 per 1,000 (UNICEF 1990)
Health	Maternal mortality	1,600 per 100,000 live births – second-highest in the world (UNICEF 2000-2006)	N/A
	Life expectancy	43 years (UNICEF 2006)	41 years (UNICEF 1990)
	Tuberculosis B incidence	72,000 cases per year	N/A
	Main causes of morbidity	Diarrhoeal diseases; 18.5%; fever 18.9%; respiratory illness 12%	N/A
Nutrition	Acute malnutrition in children 6 to 59 months	16.7% global acute malnutrition (GAM), of which: 12% moderate acute malnutrition (MAM); 4.7% severe acute malnutrition (SAM) (Rapid Nutrition Assessment covering 22 provinces of the country, MoPH, 2008)	7% acute malnutrition, 54% chronic malnutrition (National Nutrition Survey, MoPH, 2004)
	Malnutrition in children 6 to 59 months	40% underweight 54% stunting (National Nutritional Survey, 2004, MoPH)	N/A
Food Security	Food security	68% of the Afghan population is affected by some form of food insecurity (31% food-insecure and 37% borderline food-insecure) (NRVA 2008)	Increasing food insecurity (WFP, 2008)
	Cereal consumption and production	Total cereal requirement in 2010: 6.5 million metric tons (MTs) Total cereal production in 2010: 5.7 million MTs → Predicted cereal deficit in 2010: 753,000 MTs	Total production slightly above average (WFP FEWSNET)
Economic Status	Gross domestic product per capita	\$964 in 2005 (Afghan Human Development Report 2007, UNDP)	\$683 in 2002
	Percent of population living on less than \$1 per day	42% (UNDP)	
Population Movement	Total IDPs	319,747 people across the country includes protracted, conflict- and natural-disaster - induced (UNHCR, September 2010) with an additional 220,000 estimated displaced by natural disasters (Afghanistan Natural Disaster Management Authority / ANDMA, estimate, August 2010)	295,000 (UNHCR, 2009)
	Protracted IDPs prior to 31 December 2002	117,011 people displaced due to conflict (76,422) and natural disaster (40,589)	
	Conflict-induced internal displacement	Total 177,169, of which an estimated 121,385 people displaced from June 2009 – September 2010 ² (UNHCR)	
	Natural disaster-induced displacement	Total accounted is 25,567 with an additional 220,000 estimated affected by flash floods in July/August 2010; 30% reportedly displaced (ANDMA)	

¹ Estimates vary greatly for population. The second draft of the National Education Strategic Plan (NESPII) in March 2010 uses a total population estimate for Afghanistan of 33 million people for 1387/2008, also using data from the UN Population Division. The figure of 29.12 million appears on the World Population Prospects: 2008 Revision Population Database. <http://esa.un.org/unpp/p2k0data.asp>. And the Human Development Index 2010 reports 29 million.

² All data according to Ministry of Agriculture, Irrigation and Livestock (MAIL) – Agriculture Prospect Report, 2010

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Type		Most recent data	Previously
	Refugee returnees	More than 6 million since 2002, including 4.5 million assisted directly for voluntary repatriation by UNHCR (29 May 2010)	5.6 million (UNHCR, 2009)
Protection	Civilian casualties as a result of conflict	Total civilians killed as a result of conflict is 2,412 from January to September 2010 (UNAMA Human Rights Unit)	14% increase from 2009
	Contamination of mines and explosive remnants of war (ERW)	6,776 hazards remain affecting 650 km ² and 2,110 communities throughout Afghanistan (as of 30 Sept 2010) ³ (Mine Action Coordination Center of Afghanistan / MACCA) ERW killed or injured 42 people on average per month in 2009 (MACCA)	2,150 communities affected (MACCA, 2009)
	Other populations of concern	30.7% of Afghan women suffer from physical violence; 30.1% suffer psychological violence and 25.2% from sexual violence (UNIFEM, 2010)	N/A
Education	School attendance	42% of school-age children (< 5 million) out of school (Ministry of Education /UNESCO Draft Interim Plan for Fast Tract Initiative funding)	N/A
	Adult illiteracy	88% adult women non-literate, 61% adult men non-literate (Ministry of Education/UNESCO Draft Interim Plan for Fast Tract Initiative funding)	N/A
WASH	Proportion of population without sustainable access to an improved drinking water source	Water 27%, sanitation 5% (NRVA2007/2008)	68% (UNDP)
Other Vulnerability Indices	ECHO Vulnerability and Crisis Index score (V/C)	3/3 (most severe)	3/3 (ECHO 2009)
	2010 UNDP Human Development Index score	Ranked 155 of 169 countries (UNDP)	Ranked 181 of 182 (2007 UNDP HDI)

³ Data from the Information Management System of Mine Action (IMSMA) which is the national database.

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Table I: Summary of requirements (grouped by cluster)

Consolidated Appeal for Afghanistan 2011 as of 15 November 2010 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by appealing organizations.

Cluster	Requirements (\$)
COMMON SERVICES (LOGISTICS)	19,985,980
COORDINATION	15,615,286
EDUCATION	172,723,819
EMERGENCY SHELTER AND NFIs	48,350,479
EMERGENCY TELECOMMUNICATIONS	510,000
FOOD SECURITY AND AGRICULTURE	230,657,599
HEALTH	40,875,494
MULTI-SECTOR	90,324,074
NUTRITION	27,417,503
PROTECTION	7,489,089
WATER,SANITATION AND HYGIENE	24,683,661
Grand Total	678,632,984

Table II: Summary of requirements (grouped by priority)

Consolidated Appeal for Afghanistan 2011 as of 15 November 2010 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by appealing organizations.

Priority	Requirements (\$)
A. IMMEDIATE	527,494,224
B. HIGH	141,352,301
C. MEDIUM	9,786,459
Grand Total	678,632,984

Table III: Summary of requirements (grouped by appealing organization)

Consolidated Appeal for Afghanistan 2011 as of 15 November 2010 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by appealing organizations.

Appealing Organization	Requirements (\$)
AADA	810,388
ABR	2,098,000
ACF	3,070,254
ACT-Afghanistan	4,115,710
ACTD	161,600
ACTED	942,970
Action Aid	1,217,200
ADEO [Afghanistan]	1,795,000
Afghanaid	5,837,000
AREA	1,856,450
CAF	307,973
CARE International	3,533,045
Caritas Germany (DCV)	983,182
CCA	145,000
CHA	96,214
DHSA	2,250,000
DWHH	500,000
FAO	25,906,848
HAPA	2,100,000
HDO	606,016
HELVETAS	736,000
IBN SINA	287,064
IMC UK	98,774
INTERSOS	212,995
IOM	18,879,322
Johanniter Unfallhilfe e.V.	935,000
MADERA	2,021,026
MEDAIR	4,012,350
MERLIN	1,270,327
MI	361,660
MM	460,100
MTDO	129,000
NRC	2,231,648
NRDOAW	345,000
OCHA	10,073,410
OHCHR	176,491
OXFAM GB	7,254,000
OXFAM Netherlands (NOVIB)	2,155,727
RWDOA	142,800

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Appealing Organization	Requirements (\$)
SC	1,480,444
SCA	578,200
SHA	990,000
SHRDO	206,378
SUWA	445,000
TEARFUND	5,923,989
UNFPA	903,897
UN-HABITAT	590,000
UNHCR	100,136,137
UNICEF	27,860,328
UNIDO	850,000
UNMAS	4,952,000
WFP	412,195,165
WHO	9,041,902
ZCO	674,000
ZOA Refugee Care	1,690,000
Grand Total	678,632,984

2. 2010 IN REVIEW

2.1 Changes in the context

The 2011 Consolidated Appeal notes that the root causes of the humanitarian crisis in Afghanistan are related to conflict and insecurity, displacement, human rights violations, slow economic recovery and development, natural disasters, and a difficult political situation. Although the context has not undergone major changes per se, insecurity has worsened and the negative impact on the lives of vulnerable populations continues to increase.

Security and Access

The safety and security of both civilians and humanitarian aid workers is a preeminent concern in Afghanistan. UNAMA Human Rights reports⁴ estimate 2,412 civilian deaths from January 2010 to September 2010, an increase of 14% from the same period in 2009. Over the first six months of 2010 the number of civilian casualties (both deaths and injuries) increased by 31% compared to the same period last year.

According to UNDSS, security incidents that affected the UN directly were 133% higher in September 2010 compared to the same period last year. While attacks predominantly occur in or near anti-government strongholds in the southern, northern, and eastern regions of the country, the 28 October 2009 attack on the Baktar Guesthouse in Kabul, which resulted in six UN staff members killed, and the 26 October 2010 assault on the UNAMA compound in Herat indicate no area is immune to violence.

The Afghanistan NGO Safety Office (ANSO) reported in 2009 there were 172 incidents in which 19 NGO staff were killed and 18 injured, of which all were Afghan nationals.⁵ Over the first three quarters of 2010, ANSO reports⁶ indicate that the number of NGO staff abducted by AGE has increased by 60% over 2009, overwhelmingly concentrated in the north, with 64 taken in 26 separate cases. To date, all staff have been released without harm following a process of negotiation.

Trend analysis indicates that in 2011 violent attacks affecting civilians and the aid community have spread to areas that were previously relatively calm. Widespread insecurity has led to reductions in access for humanitarian organizations concurrent with significant increases in humanitarian need. For example, operations conducted by international military forces (IMF), particularly in the south, such as "Operation Moshtarak" in February 2010 or "Operation Hamkari" in August 2010 led to significant population displacements and civilian casualties in the south with little humanitarian opportunity to respond due to insecurity. According to the United Nations High Commissioner for Refugees (UNHCR), from June 2009 and September 2010, conflict-induced displacements reached 121,385 people.

Natural disasters

Natural hazards endemic to Afghanistan include floods epidemics and pandemics, earthquakes, landslides, windstorms, sandstorms, avalanches, drought, rockslides, and extreme weather patterns. The Afghan National Disaster Management Authority (ANDMA) reports that natural hazards affect over half a million people annually; and from July and August 2010, ANDMA reported more than 220,000 individuals as affected by flash floods alone. To date, flood-affected communities require humanitarian assistance, particularly as many floods rendered many homeless and/or without critical food stocks. This is particularly important, given more than 80% of the population relying on agriculture for their livelihoods.

⁴ Much of the data and people of concern (PoC) trends are based on the UNAMA HR Mid-Year Report on the Protection of Civilians August 2010. Another report also indicated the broad trend is the Afghan Independent Human Rights Commission (AIHRC) Mid Year Report July 2010. Both documents are public and available.

⁵ ANSO, Quarterly Data Report, Q4, 2009.

⁶ ANSO, Quarterly Data Report, Q3, 2010.

Political context

In June 2010, the government formed a “High Peace Council,” comprising senior government and civil society representatives to engage in a dialogue with anti-government (AGE) elements. It is unclear whether all AGEs are willing to participate in formal or informal talks. This uncertain political environment presents difficulties and challenges of humanitarian access, security of humanitarian community, government partnership and collaboration in humanitarian action.

Human rights

Gross violations of human rights remain a principal concern in Afghanistan. This is perhaps best evidenced by targeted violent attacks on civilians and the aid community, a trend which continues to rise.

Between January and June 2010 civilian casualties (deaths and injuries) increased by 31% compared to the same period in 2009.⁷ The number of civilians assassinated and executed surged by more than 95% as compared to 2009 with more than half occurring in the south, killing more than one hundred Afghan civilians. The spread of the conflict, from ‘traditional’ zones to more stable provinces in the north-west and the west, has shrunk humanitarian space and resulted in loss of livelihood, destruction of property and personal assets of civilians. The increasing conflict must be placed in the context of endemic poverty in Afghanistan linked to chronic lack of development and accountability including corruption and abuse of power by the state authorities. Additionally, discrimination and social exclusion of ethnic minority groups compound the problem. The longstanding effects of drought (despite a good harvest in 2009), continued impact from seasonal flooding and inaccessibility to food (especially in the winter) is the cause of food insecurity in remote areas and as well for the most vulnerable segments of the population, leading to migration.

Economy

There has been little change to the Afghanistan economy over past year, aside from the infusion of international assistance and development programmes. According to the 2009 Human Development Index report (HDI), only 39% of the population has access to safe drinking water and the under five mortality rate is 191 per 1,000 live births, the second-highest in the world.

In mid-2010, the price of basic commodities sharply increased, in part due to the devastating floods in Pakistan in July, which severely disrupted trade supply routes. Some 90% of commodity supplies come from Pakistan. The Afghan population obtains more than half of their caloric intake from wheat, and Pakistan, Kazakhstan, and the Black Sea region are the main suppliers of wheat to the country. According to the World Food Programme (WFP) Vulnerability Analysis and Mapping (VAM) market survey report for September 2010, Afghanistan is likely to be affected by rising prices in 2011, mainly due to the post-flooding situation in Pakistan (prices have doubled in many places) and the reduction in exportable wheat of the Black Sea region producers. From the Consumer Price Index, US Department of Bureau Statistics reports the Afghanistan CPI for 2009 at 30.5%. The Afghan Human Development Report for 2007 reports that 42% of the population live on \$1 a day (UNDP). The lack of economic opportunity, limited access to markets and distribution points, and high unemployment rates compromise livelihoods and health and nutrition status, and leave vulnerable communities highly susceptible to other shocks like natural disasters or conflicts.

⁷ Much of the data and PoC trends are based on the UNAMA HR Mid-Year Report on the Protection of Civilians August 2010. Another report also indicated the broad trend is the Afghan Independent Human Rights Commission (AIHRC) Mid-Year Report July 2010. Both documents are public and available.

2.2. 2010 Strategic Objectives – Achievements and Challenges

2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
Education	<ul style="list-style-type: none"> Increase access to and retention of education for children and youth affected by natural disasters and conflict, including support of psycho-social needs for children and youth in vulnerable communities, with an emphasis on groups vulnerable to marginalization and gender equality 	<ul style="list-style-type: none"> Number of schools supported with essential teaching/ learning materials 	<ul style="list-style-type: none"> 5,000 	<ul style="list-style-type: none"> No funds received from Humanitarian Action Plan (HAP) 2010. Schools reached through other funding sources from individual cluster member organizations 	<ul style="list-style-type: none"> 5,000
		<ul style="list-style-type: none"> Number of classrooms repaired/rehabilitated/newly established 	<ul style="list-style-type: none"> None under 2010 HAP (12 classroom buildings repaired from other sources) 	<ul style="list-style-type: none"> No funds received from HAP 2010. The two projects (International Organization [IOM] and UNOPS) for schools repairs were unfunded under HAP 2010 	<ul style="list-style-type: none"> None under HAP (12 classroom buildings repaired from other sources)
		<ul style="list-style-type: none"> Number and percentage of children enrolled in formal education in targeted areas 	<ul style="list-style-type: none"> 17,839 children from marginalized groups (including girls, children in remote areas, children of nomadic families, working children, returnees and children with disabilities) enrolled and attending community-based education classes 	<ul style="list-style-type: none"> Underfunded Partnership with other agencies important to ensure schooling is continued 	<ul style="list-style-type: none"> 17,839 children from marginalized groups (including girls, children in remote areas, children of nomadic families, working children, returnees and children with disabilities) enrolled and attending community-based education classes
Emergency Shelter and NFIs	<ul style="list-style-type: none"> Support vulnerable returnee families and IDPs who possess or are allowed to use land but lack financial and/or material resources to reconstruct their house; and for landless beneficiaries and returnees to urban centres, alternative housing support solutions will be sought 	<ul style="list-style-type: none"> Shelters completed 	<ul style="list-style-type: none"> 22,100 units 	<ul style="list-style-type: none"> 22,100 units 	<ul style="list-style-type: none"> High levels of insecurity in parts of the country Insufficient resources
		<ul style="list-style-type: none"> Shelters handed over to beneficiaries 	<ul style="list-style-type: none"> 22,100 units 	<ul style="list-style-type: none"> 22,100 units 	
	<ul style="list-style-type: none"> Provide basic NFIs - blankets, plastic tarpaulins, jerry cans, tents and winter clothes to meet the immediate needs of vulnerable returnee and IDPs families 	<ul style="list-style-type: none"> NFIs distributed 	<ul style="list-style-type: none"> 60,000 families (UNHCR) 	<ul style="list-style-type: none"> 60,000 families (UNHCR) 	
		<ul style="list-style-type: none"> Sufficient stockpiles of NFIs and shelter in the regions /provinces 	x	x	

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2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
ETC	<ul style="list-style-type: none"> • Training of Trainers: to have enough telecom trainers in all locations in Afghanistan; to provide security telecom training to staff; and the trained trainer to take over the training responsibility 	<ul style="list-style-type: none"> • Establish a sustainable emergency telecommunications cluster (ETC) training model for Afghanistan; to have enough local staff trained as telecom trainers to take over the international staff post; and to provide telecom training to radio operators and staff 	<ul style="list-style-type: none"> • 80 to 100 staff trainer of training in eight locations; and Security Telecom training to 200 staff 	<ul style="list-style-type: none"> • Over 100 security telecoms trainers trained in Kabul, Kandahar, Herat, Mazar-i-Sherif, Jalalabad, Faizabad, Bamyan and Nilli to continue the security telecoms training for UN staff in future. • Over 300 staff from different UN agencies trained in security telecoms. • Telecoms map developed with key sites and types of telecom equipment available. • All ETC member focal points were invited for a WFP emergency preparedness and response training related to the cluster approach in Bangkok 	<ul style="list-style-type: none"> • Security remains a main challenge in allowing for opportunities to gather staff from each agency in each location. • Weak attendance of the members in the monthly meetings. • No common VHF and high frequency (HF) code plugs or channel numbering in the country. • No backup system for VHF multi-coupler. • No license for both UN common and agencies' specific HF frequencies. • No license for VHF simplex frequencies for both UN common and agency specific. • No central data base for HF/VHF sellcalls and call signs
	<ul style="list-style-type: none"> • To get license for new VHF and UHF frequencies for all UN and NGOs and deploy the testing in to reduce the interference Kabul 	<ul style="list-style-type: none"> • Test other frequencies in the VHF and UHF spectrum; and gain more coverage and reduced interference 	<ul style="list-style-type: none"> • License achieved and testing equipment ordered with the project deployment expected to start in November 	<ul style="list-style-type: none"> • New VHF frequencies obtained in the higher end of the VHF band and UHF; and all UN radio rooms to be connected to the UHF repeater in the first phase of the project 	
	<ul style="list-style-type: none"> • To improve the VHF network reach 	<ul style="list-style-type: none"> • Assessment missions from POLOR, Fast Information Technology and Telecommunications Emergency and Support Team (FITTEST) etc 	<ul style="list-style-type: none"> • Improved interference problem of the VHF network 	<ul style="list-style-type: none"> • Network improved compared to 2009 	
	<ul style="list-style-type: none"> • MOC was approached for all UN Common HF and VHF frequencies licensing 	<ul style="list-style-type: none"> • New Simplex VHF frequencies, HF frequencies licensing including common and agency specific frequencies 	<ul style="list-style-type: none"> • The Humanitarian community to jointly approach the ministry for VHF and UHF frequencies; and request the ministry for VHF and HF frequency licensing 	<ul style="list-style-type: none"> • License for two new VHF and one UHF frequencies received; while the discussion is on going for further frequency license 	

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2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
	<ul style="list-style-type: none"> Standardization of VHF and HF channels in all locations; standardization of Call signs for all agencies and in each location; and registration and license for Telecom equipment for humanitarian agencies 	<ul style="list-style-type: none"> Standardized HF and VHF channels, call signs and selcalls. Legally licensed telecom frequencies and equipment 	<ul style="list-style-type: none"> Agencies to deploy the new code plug/channels for VHF, so that all have same channels in all locations; agree on a common channel numbering for HF; and agencies to use their own call signs based on the standard list 	<ul style="list-style-type: none"> Not accomplished 	
	<ul style="list-style-type: none"> Identifying new sites for VHF repeaters to gain more coverage 	<ul style="list-style-type: none"> To cover more areas in Kabul city for VHF network coverage 	<ul style="list-style-type: none"> To find two more sites in Kabul. 	<ul style="list-style-type: none"> A site was identified in the north of Kabul city and the provider agreed to give space to UN common repeaters free of charges 	
Health	<ul style="list-style-type: none"> Effectively coordinate the health sector response to the humanitarian and emergency situation 	<ul style="list-style-type: none"> Case fatality ratios within international standards for health emergencies⁸ 	<ul style="list-style-type: none"> <1% - Cholera outbreak 	<ul style="list-style-type: none"> By October 2010, the case fatality rate (CFR) of cholera is 0.4%. Seasonal trends of the disease indicate outbreak should not be expected until end of year 	<ul style="list-style-type: none"> The environmental health component of the outbreak control needs strengthening through community participation
		<ul style="list-style-type: none"> Number of hours between the first notification of a disease outbreak to the disease Early Warning System (DEWS) to investigation 	<ul style="list-style-type: none"> Within 48 hours Within 24 hours 	<ul style="list-style-type: none"> In most of the locations where there was no security concerns or inaccessibility, outbreaks were investigated within the first 24 hours 	<ul style="list-style-type: none"> Insecurity hampered access of investigation teams to the affected communities Lesson learned: urgent need to increase the local capacity to investigate and respond to outbreaks and disasters
		<ul style="list-style-type: none"> Percentage of outbreaks detected and investigated 	<ul style="list-style-type: none"> 90% 	<ul style="list-style-type: none"> By October 2010 100% of the reported outbreaks were investigated 	<ul style="list-style-type: none"> Insecurity remained a barrier for taking timely action in some areas
Nutrition	<ul style="list-style-type: none"> Strengthen monitoring and surveillance systems 	<ul style="list-style-type: none"> Number of health workers trained on the screening of 6-59 months to identify SAM children, diagnose, treat and monitor CMAM 	<ul style="list-style-type: none"> 5,000 	<ul style="list-style-type: none"> 60 districts and 11 provinces with CMAM; mortality <10%, Cure rate more than 80% and default rate <15% More than 1,700 health workers trained 	<ul style="list-style-type: none"> Low motivation and capacity on regularization of supervision and interest in routine monitoring Lack of updated national level data impacts estimates. Poor security and access

⁸ WHO, Sphere.

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2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
		<ul style="list-style-type: none"> Nutrition surveillance system is strengthened and utilized 	<ul style="list-style-type: none"> Nutrition surveillance systems is strengthened and utilized; Two assessments (one rapid and one representative survey conducted) CMAM data analysed, distributed in monthly bulletin 	<ul style="list-style-type: none"> 10 NGOs in flood-affected areas oriented on Nutrition in emergency with emphasis on infant and young children feeding (IYCF) continuous monitoring of the situation. National level MICS in process ACF- rapid nutrition assessment of KIS and Nutrition survey in Diakundi. Both data in the process of finalization and validation stage 	
	<ul style="list-style-type: none"> Prepositioning of emergency supply stocks for therapeutic feeding particularly as part of the winterization (facility and community-based) 	<ul style="list-style-type: none"> Amount of stocks prepositioned 	<ul style="list-style-type: none"> 38 MTs of high energy biscuits (HEB) dispatched 	<ul style="list-style-type: none"> HEB distributed during the July/August floods 	<ul style="list-style-type: none"> Delays and confusion during the initial assessment. Poor coordination. Inaccessible for internationals
	<ul style="list-style-type: none"> Provision of HEB 	<ul style="list-style-type: none"> Nutrition status of under five maintained 	<ul style="list-style-type: none"> All 6-59 month children in flood-affected areas 	<ul style="list-style-type: none"> Children received biscuits during the recent floods 	
	<ul style="list-style-type: none"> Strengthen capacity on community-based acute malnutrition (CMAM) 	<ul style="list-style-type: none"> Establishing national level ToTs 	<ul style="list-style-type: none"> 22 National ToT doctors, nurses and nutritionists from partners received training 	<ul style="list-style-type: none"> 30 doctors and nutritionists received training on CMAM of which 22 as ToT 	<ul style="list-style-type: none"> Lack of supervision, limited capacity of CMAM, monitoring and no materials in local languages
		<ul style="list-style-type: none"> Number of districts using the community-based management of acute malnutrition (CMAM) approach to manage severe acute malnutrition 	<ul style="list-style-type: none"> Flood affected, drought - prone and under-served provinces 	<ul style="list-style-type: none"> 11 provinces and 60 districts have CMAM running 	<ul style="list-style-type: none"> CMAM due for expansion but plan for proper supervision and monitoring is still lacking to contribute to the CMAM
	<ul style="list-style-type: none"> Ensure structured coordination on response to emergencies 	<ul style="list-style-type: none"> Number of Monthly meetings held including Plus ad hoc meetings to tackle especial issues 	<ul style="list-style-type: none"> Monthly meetings Plus ad hoc meetings to tackle especial issues 	<ul style="list-style-type: none"> On track (five monthly meetings and one ad hoc meeting held) 	<ul style="list-style-type: none"> Majority of partners not nutrition experts with limited nutritionists in field; and lack of dedicated staff members per agencies to attend meetings affect cohesiveness
		<ul style="list-style-type: none"> Number of Regions/Provinces nutrition Cluster established 	<ul style="list-style-type: none"> Two provinces in one region 	<ul style="list-style-type: none"> Nutrition Cluster rolled out in Northern Region in two provinces (Mazar -i-Sherif and Badakhshan) 	

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2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
Protection	<ul style="list-style-type: none"> Implementation of Protection Coordination in Afghanistan at National and Regional levels 	<ul style="list-style-type: none"> Strengthened process and forum for Protection Coordination 	<ul style="list-style-type: none"> Afghan Protection Cluster (APC) and its sub-clusters functional and establish Regional PCs and GBVSC Guidance provided to Regional PCs 	<ul style="list-style-type: none"> Protection Cluster (PC) functional and GBV sub-cluster established at national level with increased humanitarian action, advocacy and inputs to contingency planning guidance APC fully functional at the National level and Regional PCs functional in the east, west, north and south-east regions 	<ul style="list-style-type: none"> Child Protection SC not yet established, while GBVSC requires strengthening, expansion to regions. Need for strengthened coordination of natural disaster displacement response, and general inter-cluster dialogue on protection needs with increased participation of local NGOs in all PCs Access to locations of displacement remains a major challenge with increased conflict in South, North and West further causing additional displacement and negatively impacting opportunities for assessments and humanitarian response Scattered nature of IDP settlements limits the ability to identify families in urban and semi-urban areas
		<ul style="list-style-type: none"> Comprehensive view of the number/ profile/ location and cause of displacement with timely information sharing on protection and assistance needs of conflict-induced IDPs Coordinate responses to protection and assistance needs 	<ul style="list-style-type: none"> Establishment of Regional IDP TF (RIDPTF) and provide practical guidance and support on IDP Protection Improved information sharing and response by focal agencies on natural disaster induced displacement 	<ul style="list-style-type: none"> Total 319,747 IDPs of which 37.5% conflict displaced between June 2009 and September 2010⁹ Regional IDP Task Force established in the South, North, East, West, Central Highland and Central Region and with practical guidance, understanding and support on IDP protection, coordination and approaches including links with relevant clusters for operational 	
		<ul style="list-style-type: none"> Provision of regional Mine Clearance Emergency Response Units (ERU) 	<ul style="list-style-type: none"> Availability of ERU in all regions 	<ul style="list-style-type: none"> Based on funding received, achieved 66% (1,105 out of 1,683 minefields on plan) clearance rate based on funding received by mid-2010 MACCA QM teams quality visits showed 94% conformity to all safety standards, 	

⁹ UNHCR, Statistical Summary of Internal Displacement in Afghanistan, September 2010.

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2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
				<p>reflecting high standard of quality</p> <ul style="list-style-type: none"> 12 manual demining teams and one mechanical demining unit funded and working as emergency response—in East, West, North-east, South, North and Central though no ERU in South-east 21 emergency requests responded to 	
WASH	<ul style="list-style-type: none"> Ensure that vulnerable populations have access to safe drinking water and adequate sanitation within reasonable reach, along with effective hygiene education promotion Delivery of integrated, sustainable and gender-sensitive water, sanitation and hygiene activities to vulnerable communities in urgent need of WASH assistance Regular updating with training, exercising and validation of national WASH Inter-agency Contingency Plan (IACP) and preparedness plan and the development of regional contingency plans The development of water sources as well as systems such as strategic water points and sustainable community water systems to mitigate the effects of hazards such as drought and floods 	<ul style="list-style-type: none"> Number of beneficiaries provided with access to potable water including households with access to a minimum of 15 litres per person per day of safe water for human consumption and domestic use through repair of existing water points / water supply systems or construction of new water points / systems, including strategic water points 	<ul style="list-style-type: none"> 969,458 individuals 	<ul style="list-style-type: none"> In total 762,059 natural and conflict related population were provided with access to potable water 	<ul style="list-style-type: none"> WASH received 15% of the HAP 2010 request impacting timely and effective response though other resources are also being utilized Challenges include low capacities in water treatment and solution in areas with saline or deep ground water; and response to prevent further outbreak and spread of acute diarrhoea and cholera 2011 requires more targeted assessments of populations WASH needs in inaccessible areas and impact of WASH on school attendance The sector on a whole is faced with lack of technical expertise, availability of standard designs and lack of sufficient will for sanitation in emergencies
		<ul style="list-style-type: none"> Enhanced livelihoods and productivity of households due to reduced time spent accessing potable water 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Ministry of Education (MoE) and partners report observed increases in girls school attendance linked to provision of WASH facilities (separate compartment of latrines for females) though there is no factual evidence to base this development on 	
		<ul style="list-style-type: none"> Number of households with access to appropriate sanitation means, including families exclusively using household improved latrines 	<ul style="list-style-type: none"> 19,945 households 	<ul style="list-style-type: none"> Approximately 68,000 households (251,645 individuals) were provided with access to appropriate sanitation. Achievement is greater 	

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2010 Review - Strategic Objective 1: Preparedness for and response to conflict and natural disaster					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
	<ul style="list-style-type: none"> The prioritization of a community-based approach through all initiatives in an emergency environment, and in particular during WASH-related policy and advocacy work. Strategic alignment with the Afghanistan National Development Strategy (ANDS) objectives and provincial development plans. Link WASH Cluster activities with Government and other partners' developmental programme through sharing of information and plans and active participation in the Supreme Council for Water Affairs Management (SCWAM), Water and Sanitation Group (WSG) led by Ministry of Rural Rehabilitation and Development (MRRD) and its related technical working groups 	<ul style="list-style-type: none"> Number of households covered by hygiene awareness programmes, including women reached by tailored hygiene promotion activities 	<ul style="list-style-type: none"> 1,586,815 households 	<ul style="list-style-type: none"> than target as funds was also used from other sources Reached to more than 1,315,370 using HAP funding and other resources. The cluster managed to prepare a standard hygiene kit leading to standardization of hygiene material in the sector 	<ul style="list-style-type: none"> -Utilization of standard kits, hygiene training material and messages remains a challenge
		<ul style="list-style-type: none"> Number of wells chlorinated, particularly in cholera outbreak areas, and number of households provided with water treatment mechanisms 	<ul style="list-style-type: none"> 2,428 wells 	<ul style="list-style-type: none"> More than 10,000 wells were chlorinated. All water through water tankering was disinfected with water purification tablets using fund under HAP and other sources. The target increases based on the actual need during diarrhoea season 	
		<ul style="list-style-type: none"> Women, men, girls and boys have equal and safe access to WASH services; and all groups equally and meaningfully involved in discussions on programme design, technology selection, implementation and monitoring 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> All the partners through rating and review of HAP projects have ensured equal access 	<ul style="list-style-type: none"> Dialogue with both sexes requires time and additional effort thus remaining a challenge for the cluster

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2010 Review - Strategic Objective 2: Mitigate the effects of conflicts and natural disaster for the protection of affected populations						
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned	
Education	<ul style="list-style-type: none"> Improve quality of teaching, including training for teachers and education personnel, to address the needs of children and youth during emergencies, with an emphasis on marginalized groups and gender equality 	<ul style="list-style-type: none"> Number and percentage of teachers/other education personnel trained on providing psycho-social support in the classroom 	<ul style="list-style-type: none"> 2,901 	<ul style="list-style-type: none"> None under HAP (120 master trainers, 180 teachers trained. 1,000 teachers scheduled for December 2010) 	<ul style="list-style-type: none"> Unfunded: Timely support from donors important in cases where there are funding constraints Therefore, bilateral discussions and flexible and positive donor engagement is important for the continuation of interventions to improve quality education for children and teachers affected in emergency situations (UNICEF supported by CIDA Canada). 	
		<ul style="list-style-type: none"> Number of teachers recruited for community-based education and IDP/refugee camp classrooms 	<ul style="list-style-type: none"> 1,136 	<ul style="list-style-type: none"> 1,136 		<ul style="list-style-type: none"> The target was reached through existing projects and funded from other sources
		<ul style="list-style-type: none"> Percentage of schools (students/teachers) trained on the principles and features of child-friendly schools approach 	<ul style="list-style-type: none"> 3.5% of teachers (5,624 of estimated 160,000 total) 2.5% of children (153,636 of estimated six million) 	<ul style="list-style-type: none"> Non under HAP 2010 20 schools in central region Quarabah. 355 teachers schedule for December 2010 		<ul style="list-style-type: none"> This activity is funding by UNICEF through other sources Timely support from donors important in cases where there are funding constraints
Emergency Shelter and NFIs	<ul style="list-style-type: none"> Provide basic NFIs - blankets, plastic tarpaulins, jerry cans, tents and winter clothes –to meet the immediate needs of vulnerable returnee and IDPs families, including those affected by natural disaster 	<ul style="list-style-type: none"> Number of NFIs available in the regions 	<ul style="list-style-type: none"> 80,000 NFIs 	<ul style="list-style-type: none"> 80,000 families received NFI packages 	<ul style="list-style-type: none"> High levels of insecurity in parts of the country Insufficient resources 	
		<ul style="list-style-type: none"> Number of assessments conducted 	<ul style="list-style-type: none"> Assessments conducted in a timely manner 	<ul style="list-style-type: none"> 100% assessments conclude in accessible areas 		
		<ul style="list-style-type: none"> Number of families assisted 	<ul style="list-style-type: none"> 80,000 families to be assisted with NFIs 	<ul style="list-style-type: none"> 80,000 families received NFI packages 		
FSAC	<ul style="list-style-type: none"> Facilitate provision of the required amount of food through food assistance or cash/food vouchers for the food-insecure population 	<ul style="list-style-type: none"> Number of people who receive food assistance 	<ul style="list-style-type: none"> 3,258,210 	<ul style="list-style-type: none"> 3,780,000 (Jan – Sept 2010) 	<ul style="list-style-type: none"> In areas off-limits to UN staff due to insecurity, WFP has outsourced monitoring and Assessment activities to ensure that food assistance reaches its intended beneficiaries Furthermore, to avoid risk of food losses on the volatile main roads, commercial truck convoys deliver WFP food 	

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2010 Review - Strategic Objective 2: Mitigate the effects of conflicts and natural disaster for the protection of affected populations					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
	<ul style="list-style-type: none"> Food assistance distributed and/or pre-positioned in targeted areas 	<ul style="list-style-type: none"> Number of locations with prepositioned stock and quantities prepositioned 	<ul style="list-style-type: none"> 50,560 MTs 	<ul style="list-style-type: none"> 84,000 MTs 	<ul style="list-style-type: none"> Maximized on the use of implementing partners and available infrastructure at community level
Health	<ul style="list-style-type: none"> Strengthen the health sector capacity for coordinated relief and recovery actions to the health emergencies (including communicable disease outbreaks) and health impacts of natural disasters and humanitarian crises in Afghanistan 	<ul style="list-style-type: none"> Number of basic health centres (BHC), comprehensive health centres and district hospitals per population per district 	<ul style="list-style-type: none"> One basic health center (BHC) to cover 15,000 to 20,000 people 	<ul style="list-style-type: none"> One BHC /16,000 people 	<ul style="list-style-type: none"> Insecurity Under-financing and delays in funding Difficult terrain and lack of infrastructure that should be factored into the planning for relief, recovery and development of the health sector Need for more contingency and capacity building of health partners to address the low capacity and preparedness at field level of MoPH and partners to respond to crisis
		<ul style="list-style-type: none"> Number of basic and comprehensive emergency obstetric care services per 500,000 population per admin unit 	<ul style="list-style-type: none"> Comprehensive emergency obstetric care/500,000 population 	<ul style="list-style-type: none"> Complete data is not available at the moment 	<ul style="list-style-type: none"> Significant shortages of qualified health staff for delivering comprehensive emergency obstetric care services Remoteness of many communities WHO had used its network of polio district focal points for monitoring
Nutrition	<ul style="list-style-type: none"> Coverage of micronutrient supplementation to pregnant and lactating women and children 6-59 months 	<ul style="list-style-type: none"> Percent coverage of Vitamin A and de-worming supplementation activities for children in areas of critical nutrition need through routine expanded programme on immunization (EPI) and campaigns 	<ul style="list-style-type: none"> Greater than 85% 	<ul style="list-style-type: none"> More than 85% children aged between six and 59 months received Vitamin A and de-worming medicine 	<ul style="list-style-type: none"> Supervision and monitoring challenges for quality Acceptability of de-worming
		<ul style="list-style-type: none"> Number of children and pregnant/lactating women receiving micronutrient 	<ul style="list-style-type: none"> 416, 000 pregnant and lactating women All under five children living in conflict and hazard areas plus hard to 	<ul style="list-style-type: none"> 241,000 children 6-59 months 150, 000 pregnant/lactating women 75,000 children 6-59 months received new oral rehydration salt (ORS) formula with Zinc 	<ul style="list-style-type: none"> A considerable number of vulnerable groups of population live in hard to reach and therefore do not receive the routine health services e.g. immunization

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2010 Review - Strategic Objective 2: Mitigate the effects of conflicts and natural disaster for the protection of affected populations					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
			reach districts where immunization is less than 50%	<ul style="list-style-type: none"> 34,000 6-59 months in security comprised areas supplemented with vitamin A 	less than 50% in these areas
	<ul style="list-style-type: none"> Increase availability and access to nutritional services 	<ul style="list-style-type: none"> Number of severely malnourished children (6 to 59 months) benefiting from therapeutic feeding units and outpatient therapeutic feeding programmes 	<ul style="list-style-type: none"> 17,100 	<ul style="list-style-type: none"> 9,502 severely malnourished children 0-59 months admitted from Jan-Sept. 2010 	
	<ul style="list-style-type: none"> Increase community awareness on infant and young child feeding in emergencies, including breastfeeding Improve the production, access and use of locally available and affordable nutritious foods 	<ul style="list-style-type: none"> Community awareness trainings, cooking demonstrations, vegetable gardening and publications in local language 	<ul style="list-style-type: none"> Basic information on importance of early initiation of breast-feeding and promotion of a healthy diet published and distributed in local language books 	<ul style="list-style-type: none"> 9,502 SAM children 0-59 months admitted from benefitted these programs. 	<ul style="list-style-type: none"> Number of sites and children supported remains low with expectations that malnourished children unable to reach services due to access challenges
		<ul style="list-style-type: none"> Number of flood-affected provinces with access to nutrition information and education 	<ul style="list-style-type: none"> All flood-affected areas 	<ul style="list-style-type: none"> 36 trainings conducted. Agricultural inputs provided to: 39 clinics, 22 women group demonstration plots and 440 family gardens Nine provinces informed on importance of supporting, promoting and protecting breast feeding; monitoring the nutrition situation of the under five children by mid-upper arm circumference (MUAC) in nine provinces 	<ul style="list-style-type: none"> Coordination among the partners, conflicts and unrest Limited capacity in nutrition in emergency. Messaging to communities crucial to avoid negative impact of ill-conceived activities implemented by non-humanitarian bodies e.g. recent infant formula distribution in Helmand
Protection	<ul style="list-style-type: none"> Promote the application of protection principles throughout humanitarian response Effective protection strategies to lessen the impact of the armed conflict on civilians 	<ul style="list-style-type: none"> Application of protection principles throughout humanitarian response enabled with emphasis on the protection of women, children, elderly and disadvantaged communities of concern Strengthened capacity of Government for IDP protection 	<ul style="list-style-type: none"> Strengthen protection capacity of national stakeholders, to enhance partnership with National and RITFs 	<ul style="list-style-type: none"> Operational support provided to Regional PCs; APC Work Plan and ToRs developed and implemented (including Work Plan for SCs); Regional PCs established and functional in North, West, East and Southern Regions. IDPTF manages protection coordination in SR and CR on conflict-induced displacements Ministry of Refugees and Repatriation/ Department of Refugees and Repatriation (MoRR/DoRRs) capacity and skills to lead protection and response to the internally displaced is strengthened through regular discussions, meetings and 	<ul style="list-style-type: none"> Protection mainstreaming across clusters needs to be more effective Frequent turnover within Government counter parts at all levels requiring re-investment of time and resources remains an outstanding challenge While AIHRC has demonstrated its interest in participation in the Protection cluster nationally and regionally, this requires

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2010 Review - Strategic Objective 2: Mitigate the effects of conflicts and natural disaster for the protection of affected populations					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges / Lessons Learned
				trainings • Durable solutions for voluntary return of IDPs to places of origin facilitated when requested by IDP families/ groups; and advice provided to government counterparts for the prevention of involuntary return and random relocation of IDPs	consistency at the regional levels especially in the North, South East and West • On IDP durable solutions, substantial progress was made on prevention of forced relocation and in-voluntary return of IDPs; however this needs consistent advocacy and intervention at regional and national levels
		• MACCA provides National Capacity Support of DMC and other ministries as requested by the Government	• Capacity-building plan completed and Mine Action plan presented to Government	• Capacity-building plan completed and implementation underway; 1,389 planning underway and will be presented to Government when completed	
2010 Review - Strategic Objective 3: Improve access to and by vulnerable populations and provide targeted safety nets					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/ Lessons Learned
Education	• Provide complementary non-formal education, basic/life skills and alternative opportunities for out-of-school children, youth and adults	• Number of children enrolled in alternative education activities	• 5,000	• 17,839	• Target exceeded – Save the Children used funds from other sources to augment this figure.
Health	• To improve access to quality integrated health services, including reproductive health, for vulnerable populations in insecure and under-served areas	• Percentage of operational health facilities versus total number of health facilities planned in the region (in areas where the gap is caused by the security situation or refusal of access by parties to the conflict for that health facility)	• 90%	• 78% in 6 provinces targeted by the health program: improved access to essential health care for under-served population in 6 provinces affected by compound vulnerabilities	• Underfunding • Insecurity • Delays in starting the project as a result of delays in receiving funds and difficulties in hiring female health staff in insecure areas
		• Percentage of children <5 with access to basic health care, nutrition and immunization services	• 85%	• Data is not completed	
		• Percentage of total population having access to BHCs or equivalent mobile care within two hours' travel	• 85%	• Data has not completed	

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2010 Review - Strategic Objective 3: Improve access to and by vulnerable populations and provide targeted safety nets					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/ Lessons Learned
Protection	<ul style="list-style-type: none"> Co-ordinate access and responses to protection needs of vulnerable population groups 	<ul style="list-style-type: none"> Partnership and coordination on GBV issues enabled; and GBV prevention and response capacity of duty bearers, service providers and right holders at provincial and country level strengthened 	<ul style="list-style-type: none"> GBV SC established and ToR approved by the members of the group and GBV issues integrated into multi-sectoral working groups and humanitarian response 	<ul style="list-style-type: none"> GBV SC established and ToRs approved by members 	<ul style="list-style-type: none"> GBV SC is a new mechanism and lacks strong coordination among the GBV actors. Weak capacity of governmental partners and lack of understanding of protection, prevention and response mechanism on GBV members of the GBV SC often are not decision makers in the organization and therefore obtaining of the statistical and project information becomes a real challenge for the effective functioning of the GBV SC
		<ul style="list-style-type: none"> Coordination of child protection enabled; and basic understanding of CPiE and sub-cluster coordination 	<ul style="list-style-type: none"> Child frontiers report submitted on review of the (to be established) CP sub-cluster in Afghanistan; and 60 CPAN members trained on Country Programme interim Evaluation (CPiE) by end of the year 	<ul style="list-style-type: none"> Review and capacity assessment of Child protection sub cluster completed indicating need for establishment of a CP Sub cluster to enable comprehensive coordination of CP in emergencies Training on CPiE for CPAN (both national and provincial) and Protection cluster will be completed 	<ul style="list-style-type: none"> Understanding on responses for child protection in emergency was found to be limited among all the stakeholders who have been engaged in humanitarian response in the country CP Sub-cluster with clear understanding on its roles and responsibilities is not well established at national and provincial levels
		<ul style="list-style-type: none"> Capacity for monitoring and reporting strengthened amongst relevant stakeholders at national level; and capacity built for coordination and response to CPiE at regional level 	<ul style="list-style-type: none"> Regional MRM task forces established in five regions; 27 monitoring and reporting mechanism (MRM) Task Force members trained on tools and reporting; systematic data gathering and response to children affected by armed conflict established; and understanding of CPiE 	<ul style="list-style-type: none"> MRM training was held for Regional and National task force members to familiarize them with the tools and reporting mechanisms Regional task force for MRM is established in eastern, western, central south-eastern regions and northern region 	<ul style="list-style-type: none"> MRM and CPiE strategy for programming in Afghanistan is not in place

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2010 Review - Strategic Objective 3: Improve access to and by vulnerable populations and provide targeted safety nets					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/ Lessons Learned
		<ul style="list-style-type: none"> Landless vulnerable IDP and refugee returnees have access to land in Land Allocation Schemes (LAS). 	<ul style="list-style-type: none"> LAS provide access to vulnerable populations in a fair and transparent manner 	<ul style="list-style-type: none"> Despite efforts by UNHCR and NRC with Government commissions, vulnerable returnees and IDPs, GoA procedures on LAS remain unpredictable and lacking in transparency 	<ul style="list-style-type: none"> The competence of relevant government bodies on LAS remains of serious concern. Political influences and frequent shifting of positions in a non-transparent manner. In complex land cases where court decisions have been achieved, implementation has not been possible
2010 Review - Strategic Objective 4: Enhance protection of civilians and advocate for the respect of international law and human rights					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Education	<ul style="list-style-type: none"> Strengthen the education sector's emergency preparedness and immediate response levels in areas vulnerable to natural disaster and chronic insecurity, with an emphasis on gender equality 	<ul style="list-style-type: none"> Number of education stakeholders trained in Inter-Agency Network for Education in Emergencies standards 	<ul style="list-style-type: none"> 921 	<ul style="list-style-type: none"> 426 (MoE has pledged to provide the remaining trainees who will be reached by end year). INEE contextualization for Afghanistan context is. All cluster members organizations received training in INEE 	<ul style="list-style-type: none"> Not funded by HAP 2010. However this activity was funded by CIDA Canada from other sources. The challenge is the time frame. The 495 balance must be trained by December 2010 It is important to broaden the criteria for selection of trainers in the future This should not be restricted to senior levels officials and cluster members
		<ul style="list-style-type: none"> Number of rapid assessments conducted for identifying and quantifying emergency needs 	<ul style="list-style-type: none"> Five 	<ul style="list-style-type: none"> Three 	<ul style="list-style-type: none"> The education cluster could join with the inter-sectoral and interagency monitoring teams. The use of community monitoring teams will be important in inaccessible areas in the future
		<ul style="list-style-type: none"> Number of contingency and preparedness plans in place applicable to a particular disaster 	<ul style="list-style-type: none"> One 	<ul style="list-style-type: none"> One this number will be augmented once cluster rollout is completed 	<ul style="list-style-type: none"> The roll –out of clusters in five zones need to be completed so that stakeholders are empowered to make contingency and preparedness plans

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2010 Review - Strategic Objective 4: Enhance protection of civilians and advocate for the respect of international law and human rights					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
		<ul style="list-style-type: none"> Number of identified regional and national cluster coordinators 	<ul style="list-style-type: none"> Five Zones, two National Coordinators 	<ul style="list-style-type: none"> Two National Coordinators and one zone covered 	<ul style="list-style-type: none"> The roll –out of clusters in five zones need to be completed in 2011 so that stakeholders are empowered to make contingency and preparedness plans. Capacity of non education actors in education interventions (i.e. for sudden onset emergencies in difficult to access areas with no education actors) Disaster Risk Management (DRR)
Health	<ul style="list-style-type: none"> Promote humanitarian principles including the neutrality and impartiality of health facilities and workers through evidence-based advocacy and outreach to all parties and local communities 	<ul style="list-style-type: none"> Civil- Military interaction guidelines for the health sector 	<ul style="list-style-type: none"> Agreement with IM regarding measures that reduce direct military involvement in health service delivery, and protection of HF, and patients 	<ul style="list-style-type: none"> 90% of the humanitarian community request included into International Security Assistance Force (ISAF) guidelines for civil military interaction in emergency and developments 	<ul style="list-style-type: none"> Significant differences of approach and policies between national ISAFs and HQ (Kabul). Special Forces not under ISAF command thus difficult to negotiate Insufficient communication with ANA and ANP as well as AGE
		<ul style="list-style-type: none"> Decreased international military involvement in direct delivery of services 	<ul style="list-style-type: none"> x 	<ul style="list-style-type: none"> No regular MEDCAMP organized by ISAF in Southern provinces (last two months) 	<ul style="list-style-type: none"> Multiple entry points for coordination more efficient than “civil military working group” at national level
		<ul style="list-style-type: none"> Increased ISAF facilitation for implementation of health intervention 	<ul style="list-style-type: none"> x 	<ul style="list-style-type: none"> Tranquillity days during polio campaigns 	<ul style="list-style-type: none"> Difficulties in obtaining information from ISAF during kinetic operations

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2010 Review - Strategic Objective 4: Enhance protection of civilians and advocate for the respect of international law and human rights					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Protection	<ul style="list-style-type: none"> • Effective protection strategies to lessen the impact of the armed conflict on civilians • Strengthened Capacity of the Government of Afghanistan for the protection of affected populations 	<ul style="list-style-type: none"> • Relevant Advocacy enabled for the protection of civilian populations 	<ul style="list-style-type: none"> • Advocacy initiatives are undertaken and supported to enhance the protection of populations affected by conflict with monitoring of and advocacy on the compliance of relevant principles of international laws by all stakeholders 	<ul style="list-style-type: none"> • 2009 PoC Annual Report and 2010 PoC Mid Year Report launched by UNAMA HR; and incidents involving civilian casualties country-wide monitored and investigated; advocacy undertaken for the protection of civilians in Afghanistan through advocacy with Security Council Expert Group on Protection of civilians in February and September 2010 (renewal of UNAMA and ISAF mandates); advocacy on redress and compensation of civilians affected by the conflict carried further by APC members re ISAF 	<ul style="list-style-type: none"> • UNAMA HR faces access and security challenges in pursuing its mandate on protection of civilians; results in independent and impartial monitoring and investigation being conducted under security restrictions that limit full access to war-affected parts of the country (south and south-east); social and cultural issues in these regions and strict restrictions on interacting with women make it difficult to work on gender-related elements of PoC issues • Need for improved dialogue with armed opposition groups to advocate to institute mitigating measure to protect civilians during the armed conflict
		<ul style="list-style-type: none"> • Effective implementation of key protection strategies that lessen the impact of armed conflict on civilians 	<ul style="list-style-type: none"> • Coordination mechanisms to reduce the impact of the conflict on civilians supported; and public reporting on PoC in armed conflict undertaken; strategy to ensure that AGE respect the rights of civilians affected by armed conflict developed and implemented • Mine Action - Tangible improvements in victim assistance and mine risk education programmes 	<ul style="list-style-type: none"> • On prevention of displacement, advocacy efforts through APC consistently managed through reports to the SCEG and participation in civil military forums; UN Guiding Principles on Internal Displacement translated into Dari and Pashtu and disseminated; training programmes held across the country by UNHCR on protection of the IDPs for government and agencies. • Mine Action - over 18,000 MoE teachers ToT on MRE; victim assistance with 157 health staff trained in disability awareness and physical rehabilitation in Khost, Herat and Laghman; and supported GoA Disability and Rehabilitation Department to develop guidelines for the inclusion of physical rehab services (Orthopaedic technology and physiotherapy) in the Essential Package of Hospital Services; guideline is finalized and awaiting official recognition process by MoPH 	

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2010 Review - Strategic Objective 5: Ensure humanitarian programming complements and strengthens the link to recovery and development assistance by gap-filling					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Education	<ul style="list-style-type: none"> Strengthen school health and hygiene to respond to outbreaks and raise awareness to prevent communicable diseases during emergencies, with an emphasis on gender equality 	<ul style="list-style-type: none"> Number of targeted schools provided with adequate water /sanitation facilities in conflict/disaster-affected areas 	<ul style="list-style-type: none"> 1,480 	<ul style="list-style-type: none"> 2% 	<ul style="list-style-type: none"> This number remained low because this is a capital-intensive activity
		<ul style="list-style-type: none"> Number of awareness-raising sessions on prevention and response to diseases in schools in conflict/disaster-affected areas 	<ul style="list-style-type: none"> 500 	<ul style="list-style-type: none"> 132: A closer collaboration with other sectors was initiated through inter agency awareness in schools through the School Health initiative. 3 million de-worming tablets distributed to schools for provided by WHO and operational costs covered by UNICEF 	<ul style="list-style-type: none"> Under funding was a key challenge. There is a need for closer coordination with the other sectors such as nutrition, and the health clusters to conduct this activity
		<ul style="list-style-type: none"> Number of education planners/community members trained in crisis response management 	<ul style="list-style-type: none"> 4,000 people 	<ul style="list-style-type: none"> 25% reached 	<ul style="list-style-type: none"> Funding for this activity was through other sources. There is a need to combine resources so that communities are given power to protect schools and encourage the enrolment of girls in schools
Food Security and Agriculture	<ul style="list-style-type: none"> Increase agricultural productivity through the timely rehabilitation and restoration of technical and productive agriculture capacity for increased agricultural productivity. 	<ul style="list-style-type: none"> Number of livestock, animal feed, fodder, equipment, fertilizer and seed provided in targeted areas. 	<ul style="list-style-type: none"> 58,200 farming households to received the agricultural inputs 	<ul style="list-style-type: none"> Implementation of agricultural input distribution activities (seed, fertilizer, and animal feed) using funds received under the HAP 2010 expenditure currently being implemented. Reporting on 2010 FSAC agriculture activities can be done following completion of the current planting season 	<ul style="list-style-type: none"> Processes through which NGOs can procure Certified Wheat Seed need to be improved, so as to allow NGOs access to Certified Wheat Seed needed to implement various humanitarian food security activities. If increased access to certified Wheat Seed is not possible then processes for obtaining No Objection Letters from the Ministry of Agriculture, irrigation and Livestock for the use of other seed varieties needs to also be improved

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2010 Review - Strategic Objective 5: Ensure humanitarian programming complements and strengthens the link to recovery and development assistance by gap-filling					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Multi-Sector	<ul style="list-style-type: none"> Facilitate the voluntary return of Afghans; Strengthen the Government's capacity to plan, manage and assist reintegration processes; Build official capabilities to respond to internal displacement; Improve terms of stay and condition of Afghans in neighbouring countries; and Advance progress towards bilateral agreement on labour migration 	<ul style="list-style-type: none"> Transport and reintegration cash grants enable returnees to meet their initial basic needs upon return; with transport grant also provided to IDP returnees 	<ul style="list-style-type: none"> 165,000 returnees are targeted 	<ul style="list-style-type: none"> 112,287 people returned to Afghanistan and received cash grant assistance 2,451 IDPs returned to the places of origin and received transport grant 	<ul style="list-style-type: none"> No particular implementation challenges have been observed. The returns took place on the basis of voluntariness and informed decision
		<ul style="list-style-type: none"> Number of community-based livelihood and income-generating activities that are implemented in communities receiving refugee returnees and IDP returnees to support sustainable reintegration 	<ul style="list-style-type: none"> 360 communities receiving refugee returnees and IDP returnees are targeted 	<ul style="list-style-type: none"> 90 communities benefited from income-generation/livelihood projects of different scale 	<ul style="list-style-type: none"> Funding and implementation constraints, particularly due to limited access, did not allow meeting the needs to a greater extent. There remains a sizable potential for increase of these activities if more funds are made available
		<ul style="list-style-type: none"> Water supplies are ensured for communities receiving refugee returnees and communities receiving IDP returnees 	<ul style="list-style-type: none"> 3,800 communities receiving refugee returnees and 135 communities receiving IDP returnees are targeted 	<ul style="list-style-type: none"> 15 water projects implemented in the Southern, South-Eastern and Central regions to benefit 15 communities 	<ul style="list-style-type: none"> The projects have been implemented as gap filling activity. Financial constraints did not permit a larger scale intervention.
		<ul style="list-style-type: none"> Sufficient supplies critical to the shelter programme are received on time to ensure construction is completed before winter 	<ul style="list-style-type: none"> A fleet of trucks and five warehouses maintained. Timely delivery of shelter materials to destination 	<ul style="list-style-type: none"> A fleet of trucks and 5 warehouses have been maintained. All required shelter materials were delivered to destination to build 17,000 shelter units (UNHCR). Core NFIs delivered to destination for 34,100 families across the country (UNHCR) 	<ul style="list-style-type: none"> Security situation in some parts of the country required to use the commercial transportation option. It will likely to remain as an option in 2011 due to prevailing security conditions
		<ul style="list-style-type: none"> Returnees and IDPs with specific vulnerabilities are identified and provided with additional targeted support 	<ul style="list-style-type: none"> Identify vulnerable cases/families and provide support 	<ul style="list-style-type: none"> Near 800 extremely vulnerable families/individuals (EVIs) have been provided with targeted material/financial support and over 1,000 cases were referred to appropriate networks 	<ul style="list-style-type: none"> The need in material/financial assistance is greater and may be addressed on a larger scale should more financial resources be made available Linking EVI support to more sustainable income generation opportunities may be one of the solutions in the future

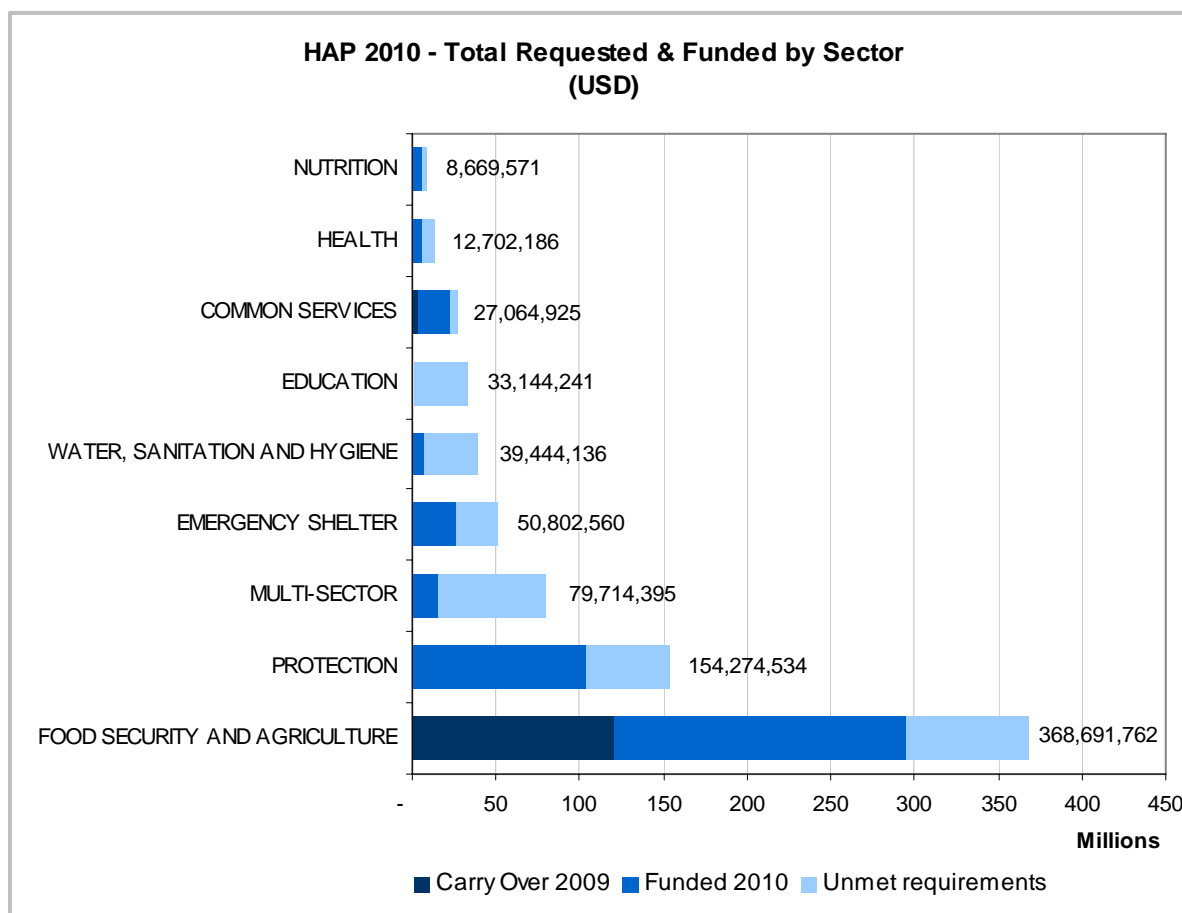
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2010 Review - Strategic Objective 5: Ensure humanitarian programming complements and strengthens the link to recovery and development assistance by gap-filling					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Protection	<ul style="list-style-type: none"> Integrate Protection awareness in humanitarian response 	<ul style="list-style-type: none"> Protection mainstreamed across all humanitarian action. 	<ul style="list-style-type: none"> Protection mainstreaming materials distributed across clusters with workshop planned in November; and yearend review of gaps in understanding of internal displacement 	<ul style="list-style-type: none"> Protection mainstreaming materials developed and shared with inter cluster mechanism and on Protection in Contingency planning; Guidance on IDP Protection; and checklist 	<ul style="list-style-type: none"> Protection mainstreaming materials developed by the APC and shared with inter-cluster lead agencies but little action by clusters to date; and protection mainstreaming across regions remains a challenge
	<ul style="list-style-type: none"> Foster Early Recovery mainstreaming into Protection Cluster Responses 	<ul style="list-style-type: none"> Responses to IDP need for durable solutions enabled; coordination of land and landlessness issues enabled; understanding of land allocation and landlessness situation in Afghanistan enabled 	<ul style="list-style-type: none"> Established and functional Housing, Land and Property Task Force; Identification of key partners to HLP TF; identification of key government actors to address landlessness; and improve existing normative framework/ guidelines to the LAS site selection 	<ul style="list-style-type: none"> Housing Land and Property re-established and regular meetings enabled; good experiences of projects of the actors have been shared with the task force members 	<ul style="list-style-type: none"> Gaps remain in operational membership of the HLP TF, with little interest from key organizations Requests for Early recovery support from UNDP on specific technical aspects of APC work including on Housing land issues have remained unaddressed.
2010 Review - Strategic Objective 6: Data collection and analysis					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Education	<ul style="list-style-type: none"> Empower local communities and strengthen the capacity of education authorities in central and local target areas to plan, manage and sustain education in emergencies, with an emphasis on gender equality 	<ul style="list-style-type: none"> Number of local community members trained to plan, manage and sustain education in emergencies, with an emphasis on gender equality 	<ul style="list-style-type: none"> 4,000 	<ul style="list-style-type: none"> 25% reached. This was taken up by the government, at senior levels, with the Ministry of Education led and supported by cluster members 	<ul style="list-style-type: none"> Lack of funding Other sources used to implement this activity. Strengthen systems and community support, especially the - Strengthen role of PTAs/SMCs

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2010 Review - Strategic Objective 6: Data collection and analysis					
Cluster/Sector	Objective	Indicator	2010 Target	Achieved at End Year	Challenges/Lessons Learned
Protection	<ul style="list-style-type: none"> Comprehensive overview of affected Populations including mapping, information management and tracking 	<ul style="list-style-type: none"> Comprehensive overview and tracking of populations affected by conflict and natural disaster 	<ul style="list-style-type: none"> Building on UNHCR IDP database, undertake Data Management Review with MoRR/ DoRRs; and info management on natural disaster displacement enabled by IOM/ OCHA. 	<ul style="list-style-type: none"> Data Management Review undertaken through a tech WG with MoRR; over 120,000 people estimated displaced due to conflict between June 2009-September 2010 profiled of total 319,747 IDPs; and Protection Profiling ongoing of populations living in Informal settlements of Kabul, Mazar-i-Sherif and Shiberghan in the North 	<ul style="list-style-type: none"> Serious limitation remains with regard to data and information management on natural disaster induced displacements and gathering information on the number of IDPs scattered in mixed urban settlements. Independent and impartial monitoring and investigation is sometimes conducted under security restrictions that limits full access to war-affected parts of the country, particularly the south and south-east regions. This hinders appropriate data collection.
		<ul style="list-style-type: none"> MACCA/ DMC coordination of all stakeholders toward achieving 1389 Integrated Operational Framework 	<ul style="list-style-type: none"> Mine Action 1389 plans of implementing partners completed; and database capturing minefields cleared, mine risk education conducted, remaining hazard and victim rates. 	<ul style="list-style-type: none"> Mine Action database updated continually and monthly reports produced 	
		<ul style="list-style-type: none"> Disaggregated data on GBV made available 	<ul style="list-style-type: none"> Establishment of data and mapping of GBV activities and referral networks; GBV related training materials disseminated among the sub-cluster 	<ul style="list-style-type: none"> Mapping of GBV coordination activities and existing GBV referral services initiated at the provincial level; data base of GBV Prevention and Response materials created and uploaded to the OCHA website 	
		<ul style="list-style-type: none"> Collection and categorization of laws related to land and landlessness enabled 	<ul style="list-style-type: none"> Collection and categorization of completed and ongoing researches on land and landlessness 	<ul style="list-style-type: none"> A repository of national legal frame work on Housing Land and Property issues as well as a collection of the researches and identification of actors were done and soon will be uploaded to the OCHA web page 	

2.3. Funding Review



Clusters/Sectors	Original Request (\$)	Revised Request (\$)	Funding Received (\$)	Percent Received
Common Services	28,398,296	27,064,925	22,092,848	82%
Education	27,093,437	33,144,241	689,939	2%
Emergency Shelter	50,275,661	50,802,560	26,403,262	52%
Food Security and Agriculture	372,539,155	368,691,762	294,569,328	80% ¹⁰
Health	10,673,254	12,702,186	6,236,306	49%
Multi-Sector	78,208,770	79,714,395	15,618,220	20%
Nutrition	8,434,443	8,669,571	6,263,336	72%
Protection	258,356,564	154,274,534	104,782,136	68%
WASH	36,581,681	39,444,136	6,760,816	17%
Cluster Not Yet Specified			31,236,361	n/a
Grand Total	870,561,261	774,508,310	514,652,552	66%

¹⁰ Food Aid accounted for 77% of secured funds in this sector.

3. HUMANITARIAN NEEDS AND RISK ANALYSIS

Despite significant progress in some areas, Afghanistan and its people continue to suffer through ongoing if not escalating violent conflict, leading to a dramatic increase in humanitarian need for its chronically vulnerable rural population. Natural disasters, extreme weather, and limited infrastructure further limit effective recovery or development, reinforcing dependence upon emergency assistance. The concerns of millions of Afghans are enormous, including food and nutrition security, forced displacement, lack of access to essential basic health care, water, sanitation and hygiene, livelihood assistance, and social protection – particularly for women and children. The country's political and economic landscape remains extremely fragile, characterized by rampant corruption and disputed election results. In addition, Afghanistan is highly susceptible to political and social unrest, and not least natural disasters of its neighbours. These collective challenges directly impact the ability, and capacity, of targeted humanitarian assistance.

The increasing conflict must also be placed in the context of endemic poverty in Afghanistan linked to chronic lack of development and accountability including corruption by state authorities. Additionally, discrimination and social exclusion of ethnic minority groups compound the problem. The long-standing effects of drought (despite a good harvest in 2009), repeated negative impacts from seasonal flooding and limited access to food sources are primary causes of food insecurity in remote areas.

The 2010 HAP mid-term review highlighted the heavy toll of floods and landslides, which destroyed tens of thousands of hectares in agricultural lands. Two significant earthquakes seriously damaged roads, supply routes, and distribution mechanisms. In addition, pestilence and disease affected livelihoods of poppy farmers in southern provinces.¹¹ Above all, however, increasing conflict continues to retard opportunities, including access to economic opportunities, markets, relief and recovery assistance. So far since the beginning of the year more than 160 outbreaks caused by easily preventable communicable diseases have been reported, mainly from areas affected by insecurity and natural disasters.

The scenarios, priorities, strategic objectives of 2011 CAP were jointly discussed at various levels from six regional workshops to¹² national Cluster and Inter-Cluster meetings, as well as the Humanitarian Country Team (HCT). To ensure effective distinction of humanitarian requirements, the CAP emphasizes humanitarian protection and emergency response assistance to populations affected by conflict and natural disasters and needs arising from chronic vulnerability. Given the volatile context and complexities of natural hazards in Afghanistan, the HCT also agreed on a third focus, to develop contingency plans on recognized hazards, with reference to Hyogo Framework Priority 5.

Primary drivers of human suffering remain widespread household food insecurity caused by low levels of economic development, recurrent floods, droughts, violent conflict, political instability, and limited access to basic social services. With the focus exclusively on emergency life-saving assistance, the humanitarian community hopes to draw distinct attention and support for humanitarian assistance. However, the UN family and partner stakeholders continue to work closely, at all levels, including through contributions to Integrated Strategic Framework, UN Development Assistance Framework (UNDAF), and projects selected for the Consolidated Appeal. In addition, the international community provides support to the Government of Afghanistan at federal, provincial, and district levels.

Coordination and Emergency Preparedness

Coordinated humanitarian and preparedness assistance is of critical importance, given the significant challenges posed in Afghanistan and the large number of actors present in country. Multiple actors are engaged in this endeavour to promote timely and complementary assistance and preparedness efforts. In partnership with all agencies, the HCT, led by the Humanitarian Coordinator, seeks to

¹¹ UN Office on Drugs and Crime.

¹² There are no official regions in Afghanistan but those used for planning discussions for the 2011 CAP were based on the provincial capitals: North (Mazar-i-Sherif), Northeast (Kunduz), East (Jalalabad), South (Kandahar), West (Herat) and Central (Kabul).

provide civil-military and inter-cluster coordination, information management, contingency planning and preparedness, fund-raising, and advocacy.

In addition the HCT seeks to promote compliance with and respect for the fundamental humanitarian principles of humanity, independence, impartiality, and neutrality while building up credibility with key stakeholders in order to facilitate access, and enhance the quality and quantity of humanitarian action.

With partners, the HCT will also map possible landing sites to access key/priority districts and local NGOs active in these locations to seek their inclusion in rapid assessment missions.

Education

Afghanistan faces serious challenges in achieving its stated goal of access to quality education for all children and youth. These challenges are compounded by the increasing insecurity and natural disasters (including floods, earthquakes, drought, and severe winters). Continuing conflict and insecurity effects access through attacks and threats to schools, students and teachers, thereby causing a decrease in school attendance, especially for girls. Increasing insecurity, restricted humanitarian space and increasing attacks on aid workers in Afghanistan further hamper programming for education in emergencies.

The MoE enrolment figures indicate seven million children enrolled in Afghan schools, of the total 12 million school age going children. Thirty-seven percent of students are girls, but most are in the major cities, leaving a substantial gap in rural girls' enrolment. Another 400,000 children are at risk of losing their education opportunities due to conflict, insecurity, natural disasters, or a combination thereof.

The current National Education Strategic Plan for Afghanistan indicates that only 15% (2007) of teachers meet minimum Grade 14 qualifications. Of these, only 28.8% are female and mostly located in urban areas which further inhibits girls' participation in schooling.

While more than 3,500 classroom school buildings were constructed, only 25% of the schools have usable buildings. Nearly 6% of schools were burned or closed down due to terrorism in the 18 months prior to 2007. Moreover, most schools also lack essential facilities such as access to clean drinking water and toilets.

The Task Force on Monitoring, Reporting and Response Mechanism for Children Affected by the Armed Conflict reported 321 incidents related to education, such as attacks against schools, teachers, or students in the context of armed conflict between January and August 2009. UNICEF reported 165 election-related incidents, which are suspected to be a consequence of schools being used as polling-centres.

A significant number of children and adults also suffer from psycho-social challenges including fear and anxiety and are in need of psycho-social support. Unfortunately, psycho-social services in Afghanistan are limited.

Emergency Shelter and Non-Food Items

Primary beneficiaries of emergency shelter and NFIs assistance are Afghans returning from Pakistan and Iran, IDPs, those affected by armed conflict or natural disasters, and identified populations identified as particularly vulnerable. While a nationwide programme, beneficiaries are often located in the Central, Eastern, Northern, Western, Southern, North-east, South-east, and Central Highlands regions.

Vulnerable populations provided with shelter support will continue to depend on humanitarian assistance in other sectors to anchor their initial reintegration either in their areas of origin (return areas) and or areas of displacement. Protection, food security/livelihoods, water and sanitation and education are important sectors.

Emergency shelter and NFIs support is one of the most important responses required to provide social security to civilian populations affected by disasters. The stockpiling of NFIs in the regions is essential to enable timely disaster response; given the context, constraints include inaccessibility in remote or active-conflict affected areas, funding shortages, and absorption capacity.

Shelter assistance provided to vulnerable refugee returnee families meets shelter beneficiary criteria and selection guidelines¹³, and usually occurs from March through October, whereas returns from Iran continue throughout the year.

Emergency shelter in the form of tents, plastic sheets and basic household supplies distributed to IDPs within Afghanistan due to conflict and natural disasters include one-room shelter interventions provided as appropriate. Current projections call for 25,000 shelter units and 120,000 NFI household kits for refugee returnees and IDPs for 2011.

Emergency Telecommunications

Humanitarian telecoms in Afghanistan are hindered by VHF interference jamming, especially in Kabul preventing vital communication links by telephone, VHF and HF. Unlicensed radio frequencies are another concern as only half of the 30+ required VHF frequencies used by the humanitarian community are licensed; and for HF frequencies there are 50+ in use, of which only four are licensed, overburdening the system, for which between 20 and 30 are required based on the level of communications. In addition, there is currently no common VHF and HF channel system for the Humanitarian Community.

Among the requirements to improve the humanitarian emergency telecommunications in Afghanistan are the licensing the HF and VHF frequencies used by the community and implementation of standard call signs, sell-calls, VHF and HF channels in the country. In addition there is currently no central ETC stock in the country to support the humanitarian community during the emergency or urgent need thus requiring equipment in the country for fast deployment and response; and security telecom trainings to improve information and communication technologies staff skills on the importance of emergency response and the cluster approach.

Food Security and Agriculture Cluster

An estimated 7.3 million Afghans will require food assistance in 2011 and another one million Afghans will require agricultural livelihood support. The food security situation is likely to worsen during the lean season, December 2010 to April 2011. With higher food prices because of regional wheat production and market disruption, it is also expected the lean season will be worse than last year.¹⁴ This is coupled with a sharp increase in price and reduced availability of commodities in Afghanistan because of the devastating floods in Pakistan in July 2009. According to the 2008 National Risk and Vulnerability Assessment (NRVA), 31% of the Afghan population is food-insecure, while 37% of the population are considered borderline food-insecure and will need agricultural assistance in 2011. The number of people lacking the minimum daily kilocalorie intake has steadily increased since 2005.¹⁵

The north-east region¹⁶ is the most food-insecure province of the country, with 65% of the population in Badakhshan being food-insecure.¹⁷ The needs of this community have been made worse by deterioration in the security situation, further reducing economic opportunities and market access for the population and by also limiting humanitarian access.

¹³ Guidelines include providing shelter to those who either own land and or have right of use on the land where they are accommodated. The beneficiary selection committees include male and female members from the village *shuras*, representatives from the local authorities (line ministries) and NGOs providing shelter support in the regions.

¹⁴ National Risks and Vulnerability Assessment (NRVA) 2007-08, Government of Afghanistan.

¹⁵ Afghanistan Food Security Monitoring Bulletin (AFSMB), WFP, Kabul, May 2008.

¹⁶ Northeastern region includes: Badakhshan, Takhar, Kunduz and Baghlan provinces.

¹⁷ NRVA 2007-08.

¹² FEWSNET, Afghanistan food security outlook Oct 2010- April 2011.

In the Western region of Ghor province,¹⁸ 20% of the population remains food-insecure.¹⁹ Natural hazards, such as severe and long winters, early snows, and the destruction of crops due to frost plus an increase in armed conflict are some of the drivers behind increasing levels of food insecurity. The Southern region²⁰ is perhaps the most volatile area within Afghanistan, and is also prone to natural hazards, particularly droughts, seasonal flooding, and harsh winters. In the Eastern region food security has been highly affected by floods, conflict-related internal displacement and cross-border displacement from Pakistan in 2010. Paktiya and Laghman top with 35% of their population being food-insecure, closely followed by Khost and Kunar provinces.²¹ Despite relative stability, many rural communities of the Central region²² face high levels of food insecurity and depend on food assistance. In Logar province 31% of the population has been found to be food-insecure, followed by Wardak with 23% of the population food-insecure.²³

Perhaps most worryingly, wheat grain and wheat flour prices have continued to climb, a trend that started in June 2010 following a sustained period of lower prices. A good harvest in some areas of Afghanistan has tempered the price of wheat somewhat, to 11.1% higher than prices seen at the height of the 2008 food price crisis. However, wheat flour prices are markedly higher, in fact 46.2% higher than 2007-2008 crisis levels. In total, cereal prices remain 24% higher than the pre-food-crisis level.²⁴ Given the natural disasters affecting neighbouring countries to the north and east, staple food prices are expected to continue to climb in the coming months. This only adds to the suffering of millions of chronically vulnerable Afghans, and threatens to increase food insecurity for the most vulnerable, particularly through perilous winter months.

Annual cereal production of Afghanistan in the last five years (2005 to 2009) has averaged 5.2 million tonnes. Using an estimated 3.1 million hectares, 2010 production has exceeded this average by 11% with an estimated 5.7 million tonnes.²⁵ A October 2010 FEWSNET report indicated that a second consecutive above average bumper harvest in 2010 will keep most households in cereal surplus in the north, north-east, north-west, and western provinces of Afghanistan. However, many of the central, eastern, and southern provinces are expected to continue to remain moderately to highly food-insecure.

The total cereal requirement for Afghanistan is estimated at 6.5 million MTs and relies upon commercial importation, imported food aid, and unrecovered needs. The cereal deficit of 2010, estimated at 753,000 cubic tonnes, includes 700,000 MTs of wheat and 53,000 MTs of rice.

Health

The annual investment for health in Afghanistan (\$9.89 per capita) continues to be insufficient for a country affected by a protracted crisis since more than 30 years. According to WHO recommendations, health expenditure for developing countries should be between \$15 and \$30 per capita. The coverage of the basic primary health services (BPHS) in Afghanistan falls perilously short of the requirements of the population, leaving millions of Afghans with no or limited access to basic healthcare. For example, only 52% of the rural population have access to a health facility within one-hour walking distance. In many provinces, this is compounded by ongoing violence, food insecurity, difficult terrain, population distribution, extreme weather, and limited infrastructure.

The expansion and intensification of violent conflict has adverse impacts on access to essential health care. It leads, *inter alia*, to a decrease in job opportunities and livelihoods for affected communities, a deepening of poverty, and the deterioration of infrastructure, water supply and sanitation, all important

¹⁸ Western region includes: Herat, Ghor, Farah, and Badghiz provinces.

¹⁹ NRVA 2007-08

²⁰ Southern region includes: Kandahar, Helmand, Urzgan, Zabul, Nimroz.

²¹ NRVA 2007-08.

²² Central region includes: Bamyan, Kabul, Diakundi, Ghazni, Logar, Wardak, Parwan, Kapisa and Panjsher provinces.

²³ NRVA 2007-08.

²⁴ WFP Market Price Bulletin September 2010.

²⁵ Ibid.

determinants of health. This most gravely affects women, children and people living with disabilities – particularly those living with HIV/AIDS. Health facilities are often forced to suspend their activities due to security threats, intimidation or direct attack and reticence of health staff to work in insecure areas. Due to lack of funding or insecurity, the establishment of new health facilities in under-served areas is often cancelled or postponed by MoPH. The ability of populations to reach functioning health facilities is further impaired by conflict, road insecurity and/or transport costs. Finally, the implementation of effective public health interventions (expanded programme of immunization/EPI, health awareness, epidemic response, etc.) is limited to even fewer secure areas.

Insufficient coverage by BPHS due to difficult and remote terrain leaves 30-52% of the population in the southern region without access to basic health services. For example in Bamyan, health care facilities under the BPHS cover approximately 50% of the population within their catchment areas, while facilities in Badakhshan and Faryab cover 60 and 70%, respectively. Limited access to basic health and nutrition services in areas prone to natural disasters or conflict further exacerbates vulnerability and undermines community resilience. To determine the number of highly vulnerable and under-served population targeted, a combination of indicators is used: the districts where the population coverage is less than national standards, security status, and immunization coverage rates as a proxy indicator for the level of access to basic maternal care (current coverage less than 40%). Approximately 1.1 million people were identified as highly vulnerable and in immediate need for support regarding access to essential public and reproductive health services.

Frequent epidemics (162 since the beginning of 2010) are an additional challenge that exceeds the existing response capacity. The vast majority of the outbreaks were caused by measles, an easily preventable disease. The most affected provinces are Nangahar, Daikundi, Herat, Balkh, Kabul, Paktia, and Kunduz. Low coverage of communicable diseases control and EPI programmes, insufficient investment in emergency preparedness and response system strengthening, insecurity and difficult access are the main constraints. Afghanistan is one of four countries where polio remains an endemic illness (along with Pakistan, India and Nigeria). The trans-border transmission of the polio virus between Afghanistan and Pakistan plays an important role in the circulation of the virus. Of the 16 polio cases reported, 12 are from the southern provinces where the implementation of prevention and control interventions are hampered by insecurity and lack of access. So far, the response to larger-scale epidemics has been ensured with significant support from the international community. There is an urgent need not only to respond to outbreaks, but also to establish effective mechanisms and systems for preparedness and response at all levels.

The combined effects of low BPHS coverage, insecurity, remoteness, isolation and natural disasters disproportionately affect women and children. Pregnant women are faced with complications, and lack of access to the full range of specialized services (basic, essential and comprehensive emergency neonatal-obstetrical care); the consequences for the mother and the newborn are in many cases fatal. In Afghanistan, every hour, two women die due to pregnancy- or delivery-related complications. In remote, un-served and insecure areas (Badakhshan) the maternal mortality rate (MMR) is well above the emergency level with 6,500 per 100,000 live births in Badakhshan. Addressing the issue of access to reproductive and delivery services (especially to comprehensive emergency obstetric care), remains a focus for health interventions.

Logistics

The size, terrain, infrastructure, and security situation in Afghanistan pose significant challenges for the civilian population and the humanitarian community, particularly in terms of logistics. WFP, as sector lead for logistics, provide support to the humanitarian community at the national level and have offer similar support at regional offices. Given the context, the aid community increasingly relies on WFP's humanitarian air service to access regional and rural areas.

Prevailing security challenges strain all air carriers flying into and within Afghanistan, and a number fail to meet International Civil Aviation Organization (ICAO) safety standards. While some commercial air carriers into Afghanistan from the United Arab Emirates (UAE) are cleared for UN staff transport, domestic flights on commercial air carriers are not cleared for UN staff, as these carriers do not meet ICAO standards and practices. Humanitarian access remains greatly reliant upon regular air transport support. In the face of insecurity and poor road networks in rural areas, the Humanitarian Air Service provides a regular and safe vehicle for humanitarian workers, particularly in regions in central highlands, south, south-east, west, and south-east.

Based on 2010 trends, UNHAS requires two 37-seat capacity Dash 8 aircraft and an 8-seat capacity Beachcraft 200 to serve at least 11 locations in Afghanistan (Bamyan, Faizabad, Farah, Herat, Islamabad, Jalalabad, Kabul, Kandahar, Kunduz, Mainama, Mazar-i-Sherif and other remote locations). To effectively meet the needs of the user community WFP/UNHAS in Afghanistan maintains operational bases in Kabul and Islamabad. In 2011, an estimated 30,000 passengers will require humanitarian air services support. When needed, UNHAS will also be required to support medical and security evacuations/relocations. In addition, UNHAS operations include support for light humanitarian cargo such as food and medicines for approximately 20% of aircraft utilization.

WFP/UNHAS-Afghanistan evaluates its air transport requirements on a continuing basis by virtue of frequent feedback from the Board of Directors and User Group meetings which are attended by a representation of its client agencies: UN agencies, NGO community and donor representatives. Currently, over 300 user agencies in Afghanistan are relying on WFP/UNHAS continuing services for implementation of their humanitarian programmes. And the requirements are not expected to increase if current widespread insecurity subsides and more sites are open to the aid community.

Multi-Sector

The major interventions in this sector are destined to address the most pressing needs of Afghan returnees from the neighbouring countries (Pakistan and Iran) and IDPs in Afghanistan.

Achieving sustainable return and reintegration is becoming more challenging in the current context. Voluntary repatriation has consequently slowed down. A more gradual return at this juncture supports a more sustainable return as the capacity of Afghanistan to absorb more returnees is stretched. In 2011 anticipated return movements (some 165,000 individuals) may be substantial in absolute terms, however marginal to overall solutions and much larger migratory flows. The management of migration has already superseded refugees and IDPs as the pre-eminent population movement challenge in Afghanistan, although the Government has yet to adapt its policies accordingly.

The return of a total of some 5.6 million refugees, including more than 4.5 million refugees with UNHCR assistance, since 2002 has increased the estimated population of Afghanistan by over 20%. In the areas of the highest return, as many as one in three people is a returnee. This level of return has put a strain on receiving communities which are struggling to cope with already limited resources. While reconstruction and development efforts have intensified, security has become more challenging and Afghanistan's capacity to absorb more returns remains limited.

The overwhelming needs articulated by returnees are for shelter, water and livelihoods support, in addition to UNHCR-provided initial reintegration assistance in the form of cash grant. Country-wide assessments of needs, such as an annual field survey, participatory assessments within an age, gender and diversity mainstreaming framework and regular field monitoring of protection and human rights inform the return and reintegration strategy for refugee returnees and IDPs.

The cash grant for refugee returnees helps meeting important needs in the first months of return, such as transport and food. However, it is not sufficient to support return only at the initial stage. The 2011 CAP therefore addresses an increased cash grant component (from average \$100 to \$150 per person) to cater for 165,000 people, has strengthened shelter (close to 20,000 beneficiary families), water (over 400 water points with the corresponding hygiene education element) and livelihoods (over

8,200 families) components in order to more effectively sustain returnee reintegration in these challenging circumstances. Over 50,000 vulnerable families are expected to benefit from a targeted winterization support. Furthermore, a community-based approach supports receiving communities and mitigates the potential for conflict over resources, particularly in ethnically mixed areas.

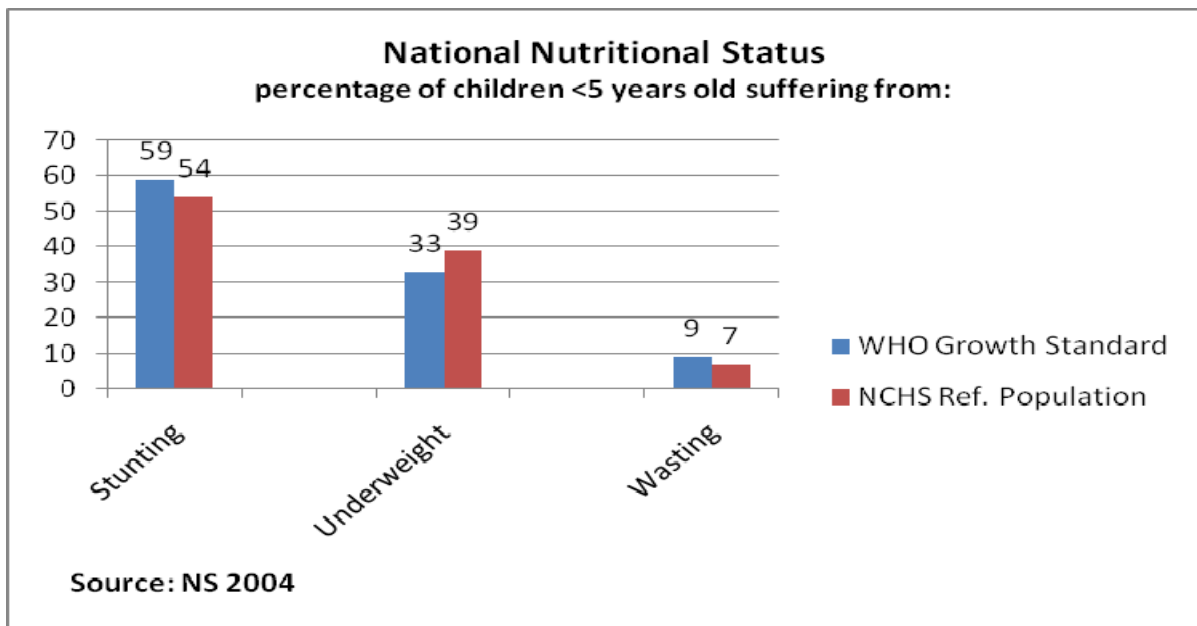
For IDPs, the operational response is focused on the protracted caseload as well as those recently displaced by conflict. IDPs often live with extended family members or people from their place of origin in areas of displacement. To date, return has been the preferred durable solution. However, for small, residual populations, local integration is also pursued. There is a need to continue building alliances with development partners to make IDP returns sustainable and improve contingency planning to respond to new displacement scenarios.

The multi-sector operational efforts are supported by extensive protection presence and monitoring as well as coordination activities, including at the Encashment Centers and the areas of return and internal displacement. These activities are focused on the physical, including from the GBV perspective, legal and material safety of returnees and IDPs. Furthermore, reintegration is addressed through advocacy and enhanced cooperation with government ministries and other actors, in order to devise appropriate protection solutions.

Nutrition

Malnutrition in Afghanistan is a serious and growing concern. An estimated **422,000** Afghan children are acutely malnourished, of whom **172,000** severe. An estimated number of **2,910,000** children suffer from chronic malnutrition.²⁶ (See Figure 1.) Chronic malnutrition is irreversible in that the impacts last a lifetime for those affected. Under-nutrition in under-five children, pregnant and lactating women remain a critical public health problem, with 75% of children and women suffering from different kinds of micro-nutrient deficiencies, including iron deficiency anaemia (National Nutritional Survey/NNS 2004), mainly due to a poor dietary diversity among adults or inadequate child feeding practices. Poor access to basic services such as primary health care, clean water, and sanitation facilities exacerbate the situation (NNS 2004).

Figure 1: Percentage of children stunted, underweight and acutely malnourished (Source: primary source NNS 2004; secondary World Bank 2010)



²⁶ Source: a. Secondary UNICEF: Child-Info monitoring the situation of women & children b. Primary: 2004 National Nutrition Survey.

Protection

Increased conflict in 2010 resulted in serious decline in protection of civilians. The number of civilians assassinated and executed surged by more than 95% compared to 2009, with more than half occurring in the south, killing more than one hundred Afghan civilians including teachers, nurses, doctors, tribal elders, community leaders, government officials, other civilians including children, and civilians working for international military forces and international organizations. The spread of the conflict to more stable provinces in the northwest and the west has resulted in a further reduction of humanitarian space as well as resultant loss of livelihood, destruction of property and personal assets of civilians. The increasing conflict, placed in the context of endemic poverty in Afghanistan linked to chronic lack of development and accountability including corruption.

Internal displacement also continues to increase, some 320,000 known displaced people as at 1 November 2010. Of these, an estimated 121,385 people have been displaced due to conflict between June 2009 and September 2010. However, this does not include IDP families and small groups scattered in urban/semi-urban locations or those inaccessible due to ongoing violent conflict for which systematic accounting is problematic. IDPs as such suffer from a range of limitations, which include access to basic protection, especially for minority ethnic groups in places of displacement and availability of assistance due to lack of access by humanitarian agencies. Further access to land, livelihoods, education and health care are of serious concern.

Spill-over effects of the conflict through attacks on government buildings, health and educational facilities (directly impacting school attendance, visit to health clinics, and other basic social services), undermines already weak government capacity to meet the needs and expectations of citizen in the provision of services. This has also discouraged civilians from approaching provincial authorities for redress. Attacks on Government service providers such as, teachers, doctors, nurses etc, not only deters access to services and diminishes the impact of these much needed services, but in some cases instils fear of violent repercussions for those who do seek assistance. These have a direct impact on women and children who are often those primarily in need of critical services, resulting in weakened Protection.

Water, Sanitation and Hygiene Promotion (WASH)

Water and sanitation coverage in the country is particularly low, with only 27.2% of the population able to access potable water, and 5.1% able to access improved sanitation facilities. Urban populations with access to potable water are highest at 58.1% with rural communities next at 19.8%, followed by nomadic groups at 15.7%. Small-scale surveys conducted by the MoPH in 2010 highlight that hand-washing is an extremely rare practice, particularly among rural women and children. A 2010 Tearfund survey in Bamyan province found only 5% of people wash their hands with soap/cleansing material before eating. This not only perpetuates the transference of water-borne diseases, but also leave populations at much higher risk to diseases passing through bodily fluids such as cholera.

In 2011, according to WASH Cluster estimate, 853,776 people might be exposed to conflict and natural disaster leaving them in need of immediate and long-term solutions to provision of potable water and sanitation. Another 600,000 will need long-term drought and flood mitigation measures, which makes a total of 1,453,776 people as the planned target populations for WASH in 2011.

4. THE 2011 COMMON HUMANITARIAN ACTION PLAN

The most likely scenario is that the overall security situation will continue to deteriorate, likely constraining safe humanitarian access. The best-case, most likely, and worst-case scenarios as well as projected number of households at risk in the following table are based on discussions held in six regional 2011 CAP workshops in October 2010.

4.1 Scenarios

BEST-CASE SCENARIO
<p>Core elements</p> <ul style="list-style-type: none"> • Renewed resolve for humanitarian space, allowing for better targeting to vulnerable groups and improved donor funding • Stabilization of political and military environment • Low-level insurgency, leading to fewer, sporadic and temporary population displacements
<p>Potential triggers</p> <ul style="list-style-type: none"> • AGEs, government, and international military cease hostilities • Election results are broadly acceptable and there is no violence that could constrain humanitarian access; however even besides the question of elections, access remains constrained and is likely to be so even in 2011 due to conflict and presence of AGEs • Improved trade links with neighbouring countries, leading to improved livelihoods base and increasingly regulated labour migration resulting in fewer deportations • Improved rule of law and respect for international human rights and humanitarian law • Minor earth tremors with less or no impact to populations • Below-normal rainfall • Change of military strategy, improved dialogue between Government of Afghanistan and AGEs, leading to improved security and increased access to previously inaccessible communities
<p>Humanitarian implications</p> <ul style="list-style-type: none"> • International humanitarian and human rights laws are respected by all parties • Contingency plans updated and or developed, with preparedness measures for response in place • Functioning and reliable early warning and surveillance systems for effective management and response to natural hazards and epidemics led by national and local disaster management authorities • Favourable climate conditions, leading to improved agriculture production/food security, health and nutrition • Winter temperatures above average, and less households affected by adverse weather • Increased number of voluntary IDPs and refugee returnees, leading to commencement of durable solutions • Minimal to no new displacements due to conflict • Small-scale hazard effects on chronically vulnerable populations • Rate and scope of clearance of landmines and other explosive remnants of war enabled to increase
<p>Projected Number of Households at Risk²⁷ Natural disasters: 57,155 - 65,155 Conflict: 58,500 -59,500</p>

²⁷ See Annex II, distribution of households based on regions, for each scenario.

MOST LIKELY SCENARIO
<p>Core elements</p> <ul style="list-style-type: none"> • Increased conflict leads to a deterioration of security situation, displacements, and an expansion of conflict to currently stable areas hampering the developmental progress and increasing the demand for humanitarian interventions • Security and access rendered more problematic, especially for the protection and delivery of humanitarian aid to the displaced populations • Likely food insecurity due to drought and other extreme weather, with negative impact on affected population's health and nutrition status • Extreme weather and difficult terrain events impair the delivery of essential health and nutrition services to affected populations.
<p>Potential triggers</p> <ul style="list-style-type: none"> • Continued and widespread conflicts and armed offensive • Polarized political and military environment • Natural disasters in areas already affected by insecurity and under-development • Increased tribal tensions due to limited natural resources, including land • Increased return of refugees from neighbouring states following shrinking humanitarian space there and corresponding limitations of reintegration in Afghanistan with increasing conflict
<p>Humanitarian implications</p> <ul style="list-style-type: none"> • Severe winter conditions and natural hazards such as floods, droughts, avalanches • Increasing and continuing levels of conflict-induced displacement and protracted IDP situations • Emergency situation that outmatch the government capacity for response • Continued targeting of civilians, including assassinations, executions and abductions • Limited or no access to basic services; population continues to rely on humanitarian community support to reverse negative indicators • Minor to medium-scale hazards will impact multiple areas of the country, including increased and more sophisticated use of improvised explosive devices (IEDs) and landmines • Food price increases and become un-affordable due to floods and partial crop failure in neighbouring wheat-exporting countries • Scarcity and contamination of water resources leading to increased waterborne diseases • Increased number of refugee returnees due to conflict in neighbouring countries • Further deterioration of general humanitarian situation
<p>Projected Number of Households at Risk²⁸</p> <ul style="list-style-type: none"> • Natural disasters: 86,100 - 119,100 • Conflict: 116,600 - 118,100
WORST-CASE SCENARIO
<p>Core elements</p> <ul style="list-style-type: none"> • Increased armed offensives between IM and AGEs and amongst AGEs, resulting in heightened insecurity, lawlessness and further reduction of humanitarian space across the country • Human rights abuses with lack of respect of international humanitarian law • Unclear authority over portions of the country • Increased surge of international military
<p>Potential triggers</p> <ul style="list-style-type: none"> • Seriously limited access to basic social services • Total absence of government control with AGEs assuming control over provinces and establishing shadow governments • Complete breakdown of rule of law and failure to uphold human rights and international humanitarian law • Hyper-inflation buckles an already depressed economy • Economic opportunities deteriorated, resulting in distress migration and sharp increase of vulnerable people in both rural and urban centres

²⁸ See Annex II, distribution of households based on regions, for each scenario.

WORST-CASE SCENARIO
<p>Humanitarian implications</p> <ul style="list-style-type: none"> • Massive population displacement; secondary/tertiary displacements of refugees and IDP population, including further restrictions on reintegration for returning refugees • Population displacement due to limited natural resources and ensuing conflicts • Widespread civilian casualties • Increased humanitarian consequences • Increased casualties due to landmines and other explosive remnants of war, particularly abandoned IEDs • Increased violence against women and children • Increased attack on humanitarian aid workers, leading some humanitarian agencies to pull out • Scope and complexity of natural hazards is beyond response capacity of government and humanitarian agencies • Government-led disaster management capacity is severely limited and government not able to mobilize resources in armed conflict • Lack of access to livelihoods, increasing food insecurity and increased severe malnutrition rates; and over-dependence on humanitarian assistance
<p>Projected Number of Households at Risk²⁹</p> <ul style="list-style-type: none"> • Natural disasters: 153,805 - 173,805 • Conflict: 229,188 - 231,188

4.2 Strategic priorities for humanitarian action in 2011

The 2011 CAP sharpens the focus on humanitarian preparedness and response beyond the 2010 HAP, which included both recovery and development components given the situation at that time. As it is hoped that opportunities for increased humanitarian action in a more neutral and impartial manner will present themselves in 2011, the aid community presents a portfolio of projects supporting conflict- and natural-disaster-affected IDPs, refugee returnees and host populations as well as the un-served chronically vulnerable communities needing life-saving assistance.

The 2011 CAP strategic objectives were reviewed by the humanitarian community in six regional workshops³⁰ and further discussed by national level Cluster and Inter-Cluster meetings as well as the HCT.

While the overarching focus of the 2011 CAP is on distinct humanitarian needs built on emergency preparedness and response, three common strategic priorities will inform humanitarian action:

- A. Immediate: To provide humanitarian assistance and protection to populations affected by conflict and natural disaster
- B. High: To respond to humanitarian needs resulting from situations of chronic vulnerability
- C. Medium: To develop contingency planning on recognized hazards (with reference to Hyogo Framework Priority 5)

4.3 Strategic monitoring plan

The Country Directors of the national Cluster/Sector Lead agencies have the main responsibility for the Clusters/Sectors reporting to the Humanitarian Coordinator (HC) at the HCT and subsequently to the Emergency Relief Coordinator.

²⁹ See Annex II, distribution of households based on regions, for each scenario.

³⁰ There are no official regions in Afghanistan but those used for planning discussions for the 2011 CAP were based on the provincial capitals: north (Mazar-i-Sherif), north-east (Kunduz), east (Jalalabad), south (Kandahar), west (Herat) and central (Kabul).

Operationally, Clusters/Sectors are responsible for monitoring project implementation against CAP indicators through a regular reporting mechanism. While the Clusters/Sectors devise their own monitoring mechanisms, based on their own response plans and indicators, under the guidance of the HC OCHA is tasked with strategic monitoring of the overall humanitarian context with a particular focus on the implementation of the year's strategic priorities.

Analysis of programme implementation and challenges is enabled through monthly HCT, Clusters/Sectors and Inter-Cluster meetings, CAP quarterly monitoring/progress reports and CAP Mid-Year Review (MYR).

Monitoring of international humanitarian funding for Afghanistan, including CAP, is done by Financial Tracking Service (FTS) at OCHA-Geneva, based on reports from donors and recipient organizations.

Strategic monitoring allows for programme reviews, assessment of context and consequences, achievements, challenges and lessons learnt. It informs effective planning for programme adjustment.

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2011 CAP Afghanistan Strategic Monitoring Plan				
Strategic Objective 1: To provide humanitarian assistance and protection to populations affected by conflict and natural disasters.				
Key Indicators / Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
1. Reduction in the number of food-insecure people IDPs and returnees 2. No. increase in malnutrition rates among the displaced and returnees 3. Percentage reduction in morbidity and mortality rate-related to disease outbreaks in displacement situations 4. Increased percentage of returnees receiving assistance 5. Reduced gender based violence in IDP camps	Coordination	<ul style="list-style-type: none"> To support the HC in ensuring effective coordination of the emergency response and integrated humanitarian action and protection for populations affected by conflict, natural disaster and the chronically vulnerable 	<ul style="list-style-type: none"> Number of humanitarian partners participating at regions Number of inaccessible areas opened for humanitarian operations Provision of monthly reporting by the clusters to the HC Monthly mapping of key priority hazard districts Number of regular and ad hoc meetings held by the HCT Number of follow-up actions on recommendations of the HCT Number of strengthened clusters at the national level; Number of strengthened or rolled out clusters or work groups at the regional level Number of the CAP quarterly monitoring reports completed Inclusive CAP and MYR processes completed in accordance with agreed timelines Number of monthly and ad hoc donor meetings; and, Number of updated regional 3W 	<ul style="list-style-type: none"> TBD Two by mid year 12 per cluster 12 minimum TBD 10 of 10 Three per region by mid-year Four Two 12 minimum Six of six regions for the 34 provinces
	Education	<ul style="list-style-type: none"> Increase access to education, and retention in school, for children and youth affected by conflict / insecurity, natural disasters and/ or chronic under-development, with an emphasis on marginalized groups and promoting gender equality 	<ul style="list-style-type: none"> Number of children reached Number of schools covered 	<ul style="list-style-type: none"> 2,584,000 school children 371,000 adults 3.47 million for school food assistance
	Emergency shelter and NFIs	<ul style="list-style-type: none"> Ensure preparedness for and response to conflicts and natural disasters by pre-positioning adequate resources and stocks in the regions Ensure returning refugees from Pakistan and Iran, and displaced people within Afghanistan have adequate shelter and basic household supplies 	<ul style="list-style-type: none"> Number of emergencies responded to Number of families assisted 	<ul style="list-style-type: none"> 25,000 shelter units 120,000 NFI kits for IDPs, returnees, IDPs, and chronic vulnerable children

AFGHANISTAN

2011 CAP Afghanistan Strategic Monitoring Plan				
Strategic Objective 1: To provide humanitarian assistance and protection to populations affected by conflict and natural disasters.				
Key Indicators / Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
	Emergency Telecommunications	<ul style="list-style-type: none"> To get license for new VHF and UHF frequencies for all UN and NGOs and start the first phase of the deployment in Kabul aiming to reduce the interference New Simplex VHF frequencies and HF frequencies licensing, this includes common and agency specific frequencies. Test other frequencies in the VHF and UHF band Gain more coverage and reduced interference. Registration and license of Telecom equipment for humanitarian agencies Standardization of VHF and HF channels in all locations Standardization of Call signs for all agencies and in all field locations where Humanitarian Community operates 	<ul style="list-style-type: none"> The humanitarian community will have legal and interference free frequencies With the new frequencies and equipment the interferences might be reduced The humanitarian community will be using licensed and registered equipment There will be standard channel system for HF and VHF radios, which will improve the communication system for the humanitarian community 	<ul style="list-style-type: none"> Standardized channels, callsigns and selcalls for the humanitarian community Legal frequencies and equipment used by the humanitarian community
		<ul style="list-style-type: none"> To arrange telecom emergency stock in Country 	<ul style="list-style-type: none"> Within country Telecom stock ETC members will have new equipment and familiarization with new technology Staff will receive security telecomm training using the standby stock 	<ul style="list-style-type: none"> A Telecom stock for 50 emergency staff will be ready for deployment Ready equipment for -Security telecom training
		<ul style="list-style-type: none"> To organize IT Emergency Preparedness and Response training in five locations The EPR training will enable the ETC members to know the cluster approach and handling emergencies 	<ul style="list-style-type: none"> More ETC staff will receive training on cluster approach and responding to the emergencies 	<ul style="list-style-type: none"> Around 60 staff will receive EPR training in five key locations
	Food Security and Agriculture	<ul style="list-style-type: none"> To avert an impending acute humanitarian emergency that 3.4 million of most vulnerable adult women and men, children and elderly people affected by conflict and/or natural disasters are highly likely to face, through provision of 129,300 MTs of food and cash/vouchers to procure required basic food To timely and effectively respond to the agricultural input/assistance needs of the population affected by conflict and/or natural disaster 	<ul style="list-style-type: none"> Number of people affected by conflict and natural hazards assisted with food aid and emergency agricultural assistance 	<ul style="list-style-type: none"> 3.4 million for food assistance One million people receive emergency agriculture assistance

AFGHANISTAN

2011 CAP Afghanistan Strategic Monitoring Plan				
Strategic Objective 1: To provide humanitarian assistance and protection to populations affected by conflict and natural disasters.				
Key Indicators / Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
	Health	<ul style="list-style-type: none"> To reduce avoidable mortality, morbidity and disability among the populations affected by disasters and crises with a focus on special needs of women and children To timely and effectively respond to the emergency health needs of the population affected by natural and manmade disasters 	<ul style="list-style-type: none"> Number of people affected by natural and manmade crisis covered by emergency health services. Effectiveness of communicable diseases outbreak control interventions Improved access to community health services in areas under-served insecure areas through expanded population coverage by health services 	<ul style="list-style-type: none"> 200,000 children under five 1,6 million people affected by crisis covered by emergency health services Medical supplies enough to cover the health needs of 2 million people for 1 month are distributed to respond to crisis One health facility/10,000 people Case fatality rate due to epidemic within internationally agreed standards 500 new CHWs are identified and activated (trained, integrated into the system and supported by BPHS) from under-served insecure areas
	Logistics	<ul style="list-style-type: none"> To provide general logistics guidance and support to humanitarian partners in the logistics work group To provide a reliable, efficient and cost effective air service to the humanitarian community and donors in Afghanistan to facilitate the implementation and monitoring of humanitarian activities To ensure adequate capacity to continue absorbing the current passenger traffic and additional requirements to access new locations, with flexibility for medical and security evacs 	<ul style="list-style-type: none"> Aircraft occupancy rate: 65% Number of passengers transported against planned (target: 2,000 passengers per month) 100% utilization of contracted hours The number of United Nations agencies and other humanitarian organizations utilizing the service: 300 Regularity of the eleven identified locations served and 100% response to medical and security evacuations 	
	Nutrition	<ul style="list-style-type: none"> To alleviate the impact of disasters and shocks affecting the nutritional status of children and mothers in Afghanistan 	<ul style="list-style-type: none"> Number of people reached 	<ul style="list-style-type: none"> 320,000 children under five years 128,000 pregnant and lactating women
	Protection	<ul style="list-style-type: none"> Implementation of protection coordination for effective response to people affected by conflict and natural disasters 	<ul style="list-style-type: none"> Number of people reached Number of capacity-building sessions conducted 	<ul style="list-style-type: none"> Projected new conflict-induced displaced populations in 2011 is 20,150 families in addition to the

AFGHANISTAN

2011 CAP Afghanistan Strategic Monitoring Plan				
Strategic Objective 1: To provide humanitarian assistance and protection to populations affected by conflict and natural disasters.				
Key Indicators / Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
		<ul style="list-style-type: none"> • Effective protection strategies to mitigate the impact of the armed conflict on civilians • Promote the application of protection principles throughout humanitarian response 	<ul style="list-style-type: none"> • IDP population profiled • Number of landmine sites cleared • Refugee returnees assisted 	<ul style="list-style-type: none"> • existing 53,346 IDP families • This does not include IDPs in scattered mixed settlements and in inaccessible and un-verifiable areas • Provision of 14 emergency ERWr removal teams • Target group per sub-cluster (number estimates with disaggregation) • 1,303,553 (this is based on lands can data on populations within 500m of a minefield and therefore it is not possible to disaggregate) • Other populations of concern, refugee returnees; 27,000 families
	WASH	<ul style="list-style-type: none"> • Ensure victims of conflict, natural disasters and chronically vulnerable populations have access to sustained, integrated, and gender-sensitive safe water within reasonable reach • Ensure victims of conflict, natural disasters and chronically vulnerable populations have increased access to safe, integrated, gender-sensitive and cost effective sanitation facilities • Ensure victims of conflict, natural disasters and chronically vulnerable populations have increased and sustained access to hygiene promotion 	<ul style="list-style-type: none"> • Number of beneficiaries, disaggregated by age and gender, with access to safe water • Number of beneficiaries, disaggregated by age and gender, with access to appropriate sanitation facilities • Number of beneficiaries, disaggregated by age and gender, participating in hygiene promotion campaigns 	<ul style="list-style-type: none"> • 712,350 women • <u>741,426</u> men • <u>1,453,776</u> total • 142,500 women • <u>148,000</u> men • <u>290,500</u> total • 712,350 women • <u>741,426</u> men • <u>1,453,776</u> total

AFGHANISTAN

Strategic Objective 2: To respond to humanitarian needs resulting from situations of chronic vulnerability.				
Key Indicators/ Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
<p>1. Percentage increase reached with humanitarian assistance in chronic vulnerability situations</p> <p>2. Reduced number of lives lost acute malnutrition and disease</p> <p>3. No. of protection concerns, including individual protection cases, identified, documented and number of people provided with appropriate protection intervention, including advocacy</p> <p>4. Age and gender-disaggregated data on IDPs and other vulnerable groups</p> <p>5. No. of informal settlers assisted with emergency and early recovery interventions/ durable solutions</p> <p>6. Identification of groups with chronic vulnerability and with critical protection needs</p> <p>7. Protection response provided to those identified with chronic vulnerability and linked humanitarian needs</p> <p>8. Protection coordination enabled at regional and inter cluster levels</p>	Coordination	<ul style="list-style-type: none"> To support the Humanitarian Coordinator in ensuring effective coordination of the emergency response and integrated humanitarian action and protection for populations affected by conflict, natural disaster and the chronically vulnerable 	<ul style="list-style-type: none"> Same as Coordination objectives, indicators and targets for Strategic Objective 1 	
	Education	<ul style="list-style-type: none"> Same as Strategic Objective 1 but for the chronically vulnerable 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none">
	Emergency shelter and NFIs	<ul style="list-style-type: none"> Ensure that people with specific needs (female headed households, disabled, elderly, children and people living with HIV and AIDS etc) receive adequate emergency shelter and NFI support Ensure people with specific needs are included in early recovery and development programmes 	<ul style="list-style-type: none"> Number of shelter and NFIs distributed to vulnerable groups Number of assessments and recording of vulnerable populations 	<ul style="list-style-type: none"> 25,000 shelter units 120,000 NFI kits for IDPs, returnees, IDPs, and chronic vulnerable children
	Food Security and Agriculture	<ul style="list-style-type: none"> To reinforce the coping mechanisms of one million very highly food-insecure and vulnerable women, men, children and elderly people affected by conflict and/or disasters, through technical and productive agriculture assistance to increase agricultural productivity and production 	<ul style="list-style-type: none"> Number of farmers assisted Number of people involved in food for work % seed banks established 	<ul style="list-style-type: none"> One million chronically vulnerable targeted for agricultural assistance
	Health	<ul style="list-style-type: none"> To reduce avoidable mortality, morbidity and disabilities among the populations affected by disasters and crisis with a focus on special needs of women and children To timely and effectively respond to the emergency health needs of the population affected by natural and manmade disasters 	<ul style="list-style-type: none"> Number of people covered by essential health services Case fatality rate due to epidemic Percent of targeted 500 new CHWs are identified and activated (trained, integrated into the system and supported by BPHS) from under-served insecure area 	<ul style="list-style-type: none"> 80,000 pregnant and lactating mothers Medical supplies enough to cover the health needs of 1 million people for 1 month are distributed to respond to crisis Case fatality rate caused by epidemic within international standards
	Nutrition	<ul style="list-style-type: none"> Acutely malnourished children, pregnant and lactating mothers are identified and receive timely and appropriate support 	<ul style="list-style-type: none"> Number of people reached 	<ul style="list-style-type: none"> 220,000 children under five 88,000 pregnant and lactating women
	Protection	<ul style="list-style-type: none"> Comprehensive Overview of Affected Populations including mapping, information management and tracking Strengthened Capacity of the Government of Afghanistan for the protection of affected populations 	<ul style="list-style-type: none"> Number of population displacement profiling Disaggregated data on GBV Database on training and research Number of trainings on human rights 	<ul style="list-style-type: none"> Child protection sub cluster established in all 34 provinces Strengthened IDP data management Data and information management on natural disaster-induced displacement enabled by IOM/

AFGHANISTAN

Strategic Objective 2: To respond to humanitarian needs resulting from situations of chronic vulnerability.				
Key Indicators/ Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
		<ul style="list-style-type: none"> • Integrate Protection awareness in humanitarian response • Foster Early Recovery mainstreaming into Protection Cluster Responses 		<p>OCHA</p> <ul style="list-style-type: none"> • Mine action 1389 plans for partners completed • Database on minefields established • GBV Coordination activities mapped • Laws and research on land and landless collected and categorized
	Multi-sector	<ul style="list-style-type: none"> • Facilitate the return and initial reintegration of Afghan returnees and IDPs through provision of cash grant and shelter assistance (returnees) • Ensure multi-purpose monitoring of returns and provide protection and technical support, including follow up with regards to land allocation and housing • Strengthen the Government's capacity to manage and assist reintegration processes • Contribute to reconstruction and rehabilitation of community assets and improve access of the beneficiaries to income generation and livelihood opportunities • Improve access to safe potable water, hygiene knowledge and practice 	<ul style="list-style-type: none"> • Number of returnees and IDPs receiving cash/transportation grant • Number of shelters constructed (returnees) • Number of returnees transiting through Encashment Centres • Number of interviews conducted • Number of land ownership cases registered and followed up • Number of beneficiaries for community-based projects • Number of water projects and beneficiaries 	<ul style="list-style-type: none"> • 165,000 returnees and 20,460 IDPs • 12,895 • 165,000 • About 30% of the total returnee population • To be determined • Some 49,000 • projects (some 50,000 beneficiaries)

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Strategic Objective 3 To develop contingency planning on recognized hazards (with reference to Hyogo Framework Priority 5).				
Key Indicators/Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
1. Number of regions where emergency stocks have been pre-positioned 2. Number of regions where contingency plans have been developed and or updated	Coordination	<ul style="list-style-type: none"> To support the Humanitarian Coordinator in strengthening national/province-level capacity for emergency preparedness and response 	<ul style="list-style-type: none"> Number of regions with pre-positioned stocks for emergencies Number of liaison meetings with ANDMA at national and regional level to support capacity Number of national and regions with Inter Agency Contingency Plans 	<ul style="list-style-type: none"> 6 of 6 regions for 34 provinces 1 a month in each region and national level 1 national and 6 regional
	Education	<ul style="list-style-type: none"> Strengthen the education sector's emergency preparedness and immediate response levels in areas vulnerable to natural disaster and chronic insecurity 	<ul style="list-style-type: none"> Contingency plans developed and updated 	<ul style="list-style-type: none"> All programme areas covered, and having up to date contingency plans
	Emergency Shelter and NFIs	<ul style="list-style-type: none"> Ensure adequate and updated information pertinent to hazardous locations prone to natural hazards Ensure shelter designs and materials consider required mitigating standards 	<ul style="list-style-type: none"> Number of shelters constructed according to national and international standards Number of contingency plans developed or updated 	<ul style="list-style-type: none"> Contingency plans for all programme areas
	Emergency Telecommunications			
	Food Security and Agriculture	<ul style="list-style-type: none"> To stabilize staple food market, create sustainable safety net mechanism at grassroots level, and mitigate risks associated with regional disasters and global low cereal production as well as price hike, contingency plans, preparedness measures and other actions will be taken aiming at most vulnerable women, men, children and elderly people 	<ul style="list-style-type: none"> Percentage market survey done Updated contingency plans Number of people reached 	<ul style="list-style-type: none"> Contingency plans in place in all programme areas
	Health	<ul style="list-style-type: none"> Building preparedness and the capacity of the health sector and partners to respond to manmade and natural disasters 	<ul style="list-style-type: none"> Number of provincial contingency plans (including SOPs) developed and implemented Number of people trained on EPR 	<ul style="list-style-type: none"> Contingency plans for all targeted regions developed and updated At least 5 management staff from 18 high risk provinces are trained on emergency planning and response

AFGHANISTAN

Strategic Objective 3 To develop contingency planning on recognized hazards (with reference to Hyogo Framework Priority 5).				
Key Indicators/Expected outcomes	Cluster/Sector	Cluster/Sector Objective	Cluster/Sector Indicators	Cluster/Sector Target
	Logistics	<ul style="list-style-type: none"> To provide general logistics guidance and support to humanitarian partners in the logistics work group To provide a reliable, efficient and cost effective air service to the humanitarian community and donors in Afghanistan to facilitate the implementation and monitoring of humanitarian activities To ensure adequate capacity to continue absorbing the current passenger traffic and additional requirements to access new locations, with flexibility for medical and security evacs 	<ul style="list-style-type: none"> General surveys and statistical data reviews to be done at least twice a year to make informed decisions on in order to realign performance to requirements 	<ul style="list-style-type: none">
	Nutrition	<ul style="list-style-type: none"> To build the capacity of nutrition partners to respond to nutritional emergencies and to monitor the nutrition situation of disaster prone areas through contingency and preparedness planning 	<ul style="list-style-type: none"> Number of contingency and monitoring plans developed and implemented 	<ul style="list-style-type: none"> Contingency and monitoring plans for all programme areas
	Protection	<ul style="list-style-type: none"> Comprehensive overview of affected populations including mapping, information management and tracking Strengthened Capacity of the Government of Afghanistan for the protection of affected populations Integrate Protection awareness in humanitarian response Foster Early Recovery mainstreaming into Protection Cluster Responses 	<ul style="list-style-type: none"> Number of population displacement profiling Disaggregated data on GBV Database on training and research Number of trainings on human rights 	<ul style="list-style-type: none"> Strengthened IDP database Mine action 1389 plans for partners completed Database on minefields established Coordination activities mapped Laws of land and landless collected and categorized
	WASH	<ul style="list-style-type: none"> To establish and maintain regional inter-agency contingency and preparedness plans for additional regions, and to review/strengthen existing mechanisms. 	<ul style="list-style-type: none"> Number of Inter-Agency contingency and preparedness plans for WASH 	<ul style="list-style-type: none">
	Multi-sector	<ul style="list-style-type: none"> Maintain capacity to meet basic needs of returnees for NFIs, including during winter months, and respond to emergency situations 	<ul style="list-style-type: none"> Number of vulnerable returnee families/individuals receiving NFI assistance 	<ul style="list-style-type: none"> 40,000 families (some 240,000 individuals).

4.4 Criteria for selection and prioritization of projects

A. SELECTION

The project must be consistent with the cluster/sector strategy, and must contribute towards the achievement of one or several of the strategic objectives agreed upon by the HCT for the humanitarian operation in 2011:

- The project must present a clear target in specified operational areas and should not duplicate activities implemented by other organizations
- The implementing agency must have a recognized capacity to implement the project
- The appealing organization must be part of existing coordination structures (cluster/sector working group member)
- The implementation of the project or part thereof must be feasible within the 12-month timeframe
- The project must be cost-effective in terms of the number of beneficiaries and the needs to which the project intends to respond
- Wherever possible, the project shall include national NGOs and other national partners
- Projects should avoid repetition with last year's projects; where such repetition is unavoidable, the proposing organization should justify why the particular project is needed for another year
- Project includes cross-cutting issues (gender, HIV/AIDS, protection, age) for both selection and prioritization purposes, unless absence is clearly justified

B. PRIORITIZATION

- Does the project remedy, mitigate or avert direct, imminent and serious physical harm or threats (violence, disease, or deprivation) to affected people within a short time span? (If yes, 2 points)
- Is the project essential to enabling other projects to remedy, mitigate or avert direct, imminent and serious physical harm or threats to affected people within a short time span? (If yes, 2 points)
- Does the project build vulnerable people's resilience to harm or threats? (If yes, 1 point)
- Do the project build institutional and/or community capacity to remedy, mitigate, or avert direct and imminent physical harm or threats to affected people within a short time span? (If yes, 1 point);
- Is the project definitely feasible (assuming funding) by the proposing organization and planned partners, currently and in the most likely scenario? (If yes, 2 points)
- Are the needs that the project plans to address confirmed by evidence that is solid by reason of first-hand assessment on the ground, or triangulation (multiple independent sources)? (If yes, 2 points); and
- Does the project, where appropriate, include gender aspects (1 point) and a component preventing or reducing the impact of gender-based violence (1 point)? (Maximum 2 points)

4.5 Cluster/Sector Response Plans

For detailed needs and risk analysis, see Section 3 (above). In each cluster/sector response plan below, relevant CAP strategic priorities are denoted by numbers in brackets.

4.5.1 COORDINATION

Cluster/Sector Lead Agency	OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS (OCHA)
Implementing Agencies	ADEO, FAO, HDO, OHCHR, OXFAM Novib, SC Alliance, Tearfund, UNICEF, WHO
Number of Projects	11
Cluster/Sector Objectives	To support the Humanitarian Coordinator in ensuring effective coordination of the emergency response and integrated humanitarian action and protection for populations affected by conflict, natural disaster and the chronically vulnerable; and to strengthen national and province-level capacity for emergency preparedness and response
Total Number of Beneficiaries	Primary beneficiaries: UN agencies, international and national NGOs, donor country representatives and national government line ministries/departments Secondary beneficiaries: Conflict- and natural-disaster-affected populations and chronically vulnerable
Funds Requested	\$15,615,286
Funds Requested Per Priority Level	Immediate: \$13,270,820 High: \$869,774 Medium: \$1,474,692
Contact Information	Tim Pitt: pitt@un.org Joseph Inganji: inganji@un.org Jessica Bowers: bowers@un.org

Priority Areas

Coordinated humanitarian and preparedness assistance is of critical importance, given the significant challenges posed in Afghanistan and the large number of actors present in country. Multiple actors are engaged in this endeavour to promote timely and complementary assistance and preparedness efforts. In partnership with all agencies, the HCT, led by the Humanitarian Coordinator, seeks to provide civil-military and inter-cluster coordination, information management, contingency planning and preparedness, fund-raising, and advocacy.

In addition, the HCT seeks to promote compliance with and respect for the fundamental humanitarian principles of humanity, impartiality, and neutrality while building up credibility with key stakeholders in order to facilitate access, and enhance the quality and quantity of humanitarian action.

With partners, the HCT will also map possible landing sites to access key/priority districts and local NGOs active in these locations to seek their inclusion in rapid assessment missions.

Response Strategies

To meet coordination needs, the HCT seeks to monitor, analyse and share information on impediments to humanitarian assistance to support the HC, clusters/sectors, and wider humanitarian community with timely humanitarian information, strategic analysis, positioning and responses. For this, it is critical the HCT have capacity on the ground to respond to emergencies. This will also ensure an ability to monitor and identify areas of humanitarian needs. Where possible, OCHA will coordinate inter-agency assessments and fulfil its civil-military coordination role. Field-based staff will also strengthen capacity of key stakeholders on humanitarian and protection issues, improving humanitarian contingency planning, and information management capacity.

Senior representatives of the HCT will also establish a dialogue and coordination with all parties to the conflict including armed opposition groups, on humanitarian issues to improve understanding of humanitarian principles and the role of humanitarian organizations.

Key Indicators

The success of the HCT's work will be measured by:

[1, 2, 3]

- number of humanitarian partners participating at regions.
- number of inaccessible areas opened for humanitarian operations.
- number of regions with pre-positioned stocks for emergencies.
- provision of monthly and four-monthly reporting by the clusters/sectors to the HC.
- number of liaison meetings with ANDMA at national and regional level to support capacity.
- monthly mapping of key priority hazard districts.
- number of regular and ad hoc meetings held by the HCT.
- number of follow-up actions on recommendations of the HCT.
- number of strengthened clusters/sectors at the national level.
- number of strengthened or rolled out clusters/sectors or work groups at the regional level.
- number of national and regions with Inter-Agency Contingency Plans.
- number of the CAP quarterly monitoring reports completed.
- inclusive CAP and MYR processes completed in accordance with agreed timelines.
- number of monthly and ad hoc donor meetings.
- number of updated regional 3W.

Monitoring

The compilation of regional and national cluster/sector meetings, monthly humanitarian updates, HCT meeting minutes, and humanitarian donor support group summaries measure effective monitoring. The mid-year review takes stock of achievements and indicates possible adjustments in light of contextual changes. The CAP quarterly monitoring report feeds informs the Annual Report, which provides a summary of humanitarian and coordination progress.

4.5.2 EDUCATION

Cluster/Sector Lead Agency	SAVE THE CHILDREN (SC) AND UNITED NATIONS CHILDREN'S FUND (UNICEF) (CO-LEADS)
Implementing Agencies	Education Cluster member agencies
Number of Projects	10
Cluster/Sector Objectives	<p>Objective 1: Increase access to education retention in school for children and youth affected by conflict / insecurity, natural disasters and/ or chronic under-development, with an emphasis on marginalized groups and promoting gender equality.</p> <p>Objective 2: Ensure quality of teaching including training for teachers and education personnel which includes skills for addressing psycho-social needs of children and youth and results from disasters and/or ongoing conflict or insecurity in some parts of the country.</p> <p>Objective 3: Provide complementary non-formal education, basic/life skills and alternative opportunities for out-of-school children, youth and adults.</p> <p>Objective 4: Strengthen the education sector's DDR and emergency preparedness and immediate response levels in areas vulnerable to natural disaster and chronic insecurity.</p> <p>Objective 5: Strengthen school health and hygiene to prevent or respond to disease outbreaks.</p> <p>Objective 6: Empower local communities and strengthen the capacity of education authorities in central, zone and local target areas to plan, manage and sustain education in emergencies.</p>
Total Number of Beneficiaries	3.5 million
Funds Requested	\$172,723,819
Funds Requested Per Priority Level	Immediate: \$166,587,611 High: \$5,686,208 Medium: \$450,000
Contact Information	John Ekaju: jekaju@unicef.org Colin Alfred: calfred@savechildren.org Calister Mtaló: cmtalo@unicef.org

Table: Disaggregated number of affected population and beneficiaries
(Data regarding the gender of children unknown)

Category of assistance	Beneficiaries Children	Beneficiaries: Adults		
		Female	Male	Total Adults
Repairs to schools	387,500	5,500	13,800	19,300
Winterization of schools	584,327	3,450	8,790	12,240
Disaster preparedness education / training [three projects]	17,580	12,610	12,720	25,330
Emergency education for IDPs, disaster-affected families, at-risk and out-of-school children [three projects]	16,017	38,400		38,400
INEE training courses		763	1,294	2,057
Sub-total excl. School meals & food incentives	1,005,424	60,723	36,604	97,327
NOTE: school meals & food incentives are excluded from the sub-total to avoid possible double-counting, since some recipients of food assistance may also benefit from other interventions.				
School meals + food incentives	2,584,000	371,000	522,000	893,000

Priority Areas

The continuing conflict, natural disasters, and social perceptions affect access to schools for students and teachers, thereby causing a decrease in school attendance. For 2011, priorities for the education cluster include improving school attendance rates with particular emphasis on girls, ensuring the needs of children and youth with special needs and marginalized groups in remote or insecure areas who have limited access to educational and recreational activities. The cluster seeks to increase opportunities, both educational and vocational, for youth in insecure areas, and alternative educational opportunities for children outside formal school systems. In addition, there is a specific focus on children and youth who are in serious need of psycho-social support, teachers who lack skills in child-friendly/participatory teaching methodologies and positive behaviour and classroom management. Advocacy is necessary to reinforce the value of education, especially for girls to raise skill levels of parents and school communities to proactively engage in education.

Response Strategies

The cluster's multi-dimensional strategy includes the provision of food in schools, the re-opening and rehabilitating of schools, and community-based or child-friendly spaces; the provision of tents, extra classrooms, and minor school repairs. School water and improving or providing sanitation facilities is also critically important, as is reintegrating teachers/students and providing teaching and learning materials in conflict and disaster-affected areas.

The cluster intends to provide emergency education facilities in disaster-affected areas through INEE training (focus on EIE Frontline training courses that incorporate INEE components throughout, as well as DRR) in preparation for future emergencies, technical and vocational training opportunities in selected target areas. Additional support is required for students' psycho-social/life-skills and needs by training teachers, thereby ensuring relevant help to those in urgent need. Activities will also include non-formal education and basic skills training opportunities, rapid teacher training courses, and the delivery of appropriate teaching and learning materials for students in "catch up" classes.

Strengthened national/regional/local preparedness and rapid response in education emergency contexts will ensure support to students and teachers, including building capacities of emergency educational actors in education in emergency technical steps, rapid assessments, INEE/quality standards, advocacy, contingency planning, stockpiling of supplies, response planning and monitoring.

Supporting vector control initiatives and health and hygiene promotion campaigns in schools will reduce illness amongst children and teachers and will seek to build the capacity of local education planners and community members to better prepare and respond to emergency contexts.

Key Indicators

[1]

- Number and% of targeted schools provided with adequate water and sanitation facilities in conflict/disaster-affected areas.

[1 and 2]

- The number of children receiving food rations at school.
- The number of girl students / female teachers / adult women receiving food rations as incentives to continue education or training.
- The number of children enrolled in formal or non-formal education in targeted areas.
- School attendance and retention rates, as indicated by number of enrolled children marked 'permanently absent' on classroom registers.
- The number of classrooms repaired/rehabilitated.
- The number of schools supported with essential teaching and learning materials.
- The number of teachers recruited / trained for community-based education and IDP/refugee camp classrooms.
- Percentage of schools trained on the principles and features of child-friendly schools approach.
- Number of children enrolled in Accelerated Learning classes for over-age students who missed normal school.

[3]

- The number of people trained in INEE/ EIE frontline responders training.
- The number of teachers/other education personnel / stakeholders trained in DRR, emergency preparedness and/or psycho-social support in the classroom.
- Number of contingency and preparedness plans in place.
- Number of identified regional and national cluster coordinators.

Monitoring

A monitoring mechanism to assess progress towards the objectives of the Education Response Plan and the individual projects to improve the situation of children, youth and adults affected by crises and natural disasters will be implemented. The Education cluster will ensure adequate reporting and effective information sharing (with OCHA support), with due regard for age and sex disaggregation. A review of the impact of the sectoral working group and progress against implementation plans and progress of the project deliverables will be reviewed.

Strategies for monitoring will include information derived from field progress reports and regular joint reviews, mid-year and annual reviews under the overall supervision of the Education cluster Task Groups, MoE and cluster members, chaired by the education cluster co-coordinators. Each project will identify mid-year and annual objectives and supporting indicators, aligned to the Education Response Plan, which are process-oriented against each of the planned activities. Education Cluster coordinators and cluster members will undertake field visits to project sites, and organize periodic meetings with implementing partners and other stakeholders and beneficiaries to review project implementation status.

Third-party monitoring will be adopted in the insecure and inaccessible areas, by involving local communities, including school management committees for reporting school incidents, school construction, school feeding, and the performance of community-based schools, working with field based agencies, national and local NGOs and the Education and the provincial education departments to monitor these and other cluster priority activities.

4.5.3 EMERGENCY SHELTER AND NON-FOOD ITEMS

Cluster/Sector Lead Agencies	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR) (Lead) & INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM) (Co-Lead)
Implementing Agencies	Various International and National NGO implementing partners
Number of Projects	32
Cluster/Sector Objectives	<p>Objective 1: Ensure preparedness for and response to conflicts and natural disasters by pre-positioning adequate resources and stocks in the regions.</p> <p>Objective 2: Ensure returning refugees from Pakistan and Iran, and displaced people within Afghanistan have adequate shelter and basic household supplies.</p> <p>Objective 3: Ensure that people with specific needs (female headed households, disabled, elderly, and children etc.) receive adequate emergency shelter and NFI support.</p> <p>Objective 4: Ensure people with specific needs are included in early recovery and development programmes.</p> <p>Objective 5: Ensure adequate and updated information pertinent to hazardous locations prone to natural disasters (earthquakes, floods and landslides).</p> <p>Objective 6: Ensure shelter designs and materials consider required mitigating standards.</p>
Total Number of Beneficiaries	145,000 families / 870,000 individuals (NFIs: 120,000 family Kits & 25,000 shelter units)
Funds Requested	\$48,350,479
Funds Requested Per Priority Level	Immediate: \$28,667,901 High: \$19,682,578
Contact Information	Nasir Abel Fernandes: fernandn@unhcr.org Jose Ivan Davalos: idavloas@iom.org

Table: Disaggregated number of affected population and beneficiaries

Category	Affected population			Beneficiaries		
	Female	Male	Total	Female	Male	Total
NFIs	352,800	367,200	720,000	352,800	367,200	720,000
Shelter	73,500	76,500	150,000	73,500	76,500	150,000

Priority Areas

The priority areas for the cluster in 2011 are timely assessment, delivery of shelter for 25,000 families, and adequate NFIs for 120,000 families where needed across the country, with specific emphasis on areas affected by violent conflict, natural disasters, returnee and displaced populations, and identified vulnerable populations. The cluster will target areas especially affected by in the north, north-east, south, south-east, east, west, central and central highland regions.

Cluster proposed coverage

SITE / AREA by Province	ORGANIZATIONS
North and north-eastern regions	UNHCR, IOM, UNICEF, SHA, NRDOAW, ZOA, NRC, ZCO, SCF, ACTED, CARE, ADEO, Action Aid< DoRR, ANDMA
South-eastern region	UNHCR, IOM, UNICEF, IRC, AGRU, APA, DoRR, ANDMA
Central region	UNHCR, IOM, UNICEF, UMCOOR, CARE, SARS, ABR, DoRR, ANDMA, IRC
Southern region	UNHCR, IOM, CARE/ADA, HAPA, DORR, ANDMA
Western region	UNHCR, IOM, UNICEF, DoRR, ANDMA
Central highlands	UNHCR, IOM, CCA, DoRR, ANDMA
Eastern region	UNHCR, IOM, UNICEF, NRC, REURE, APWSPA, AGHCO, IRC, DoRR, ANDMA

Response Strategies

Through a network of participating agencies with stocks, presence, and implementation capacity, the rapid delivery of NFI based upon assessed needs. Primary beneficiaries are Afghan from Pakistan and Iran, IDPs, those affected by armed conflict or natural disasters, and populations identified as particularly vulnerable. Emergency shelter and NFI support is one of the most important responses required to provide social security to populations affected by disasters. The stockpiling of NFIs at regional levels is essential for timely responses.

Key Indicators

The critical indicators include the number of families assessed, the number of NFI kits, shelter requirements, and the proportion of disaster victims provided with humanitarian assistance.

[1, 3]

- Time differential between the onset of disaster and response.
- Time differential between delivery and post-monitoring of NFIs distribution number of shelters and NFIs distributed to vulnerable groups in line with age, gender, and diversity mainstreaming (AGDM) principles.
- Number of assessments and data collection of vulnerable populations.
- Number of Weekly/Monthly reports produced including hazard assessment maps.
- Number of shelters distributed.
- Number of shelters built which meet national standards and designs.

[3]

- Following disaster, number of needs assessments surveys conducted.
- Number of regions with sufficient stock piles of NFIs and Shelter.

Monitoring

Monitoring in the regions will be carried out in accordance with the implementation arrangements, project cycles and objectives, guided and supervised by the Emergency Shelter and NFI cluster. Projects will be monitored through monthly progress reports, monitoring visits to accessible areas and remote monitoring mechanisms in non-accessible areas. Minutes from the regional cluster meetings will provide indicators on progress, constraints and achievements, to be evaluated by the national cluster.

4.5.4 EMERGENCY TELECOMMUNICATIONS

Cluster/Sector Lead Agency	WORLD FOOD PROGRAMME (WFP)
Implementing Agencies	Humanitarian Community
Number of Projects	3
Cluster/Sector Objectives	<p>Objective 1: To obtain license for all unlicensed VHF duplex and simplex frequencies, both UN/NGO Common and agency specific.</p> <p>Objective 2: To obtain license for all unlicensed HF frequencies, both UN/NGO common and agency specific.</p> <p>Objective 3: To standardize the VHF Channels in the country.</p> <p>Objective 4: To standardize the HF channels in the country.</p> <p>Objective 5: To standardize UN/NGO call signs.</p> <p>Objective 6: To standardize UN/NGOs HF selcal.</p> <p>Objective 7: To arrange Telecom Emergency Stock in Country.</p> <p>Objective 8: To organize IT Emergency Preparedness and Response training in five locations.</p>
Funds Requested	\$510,000
Funds Requested Per Priority Level	High: \$410,000 Medium: \$100,000
Contact Information	Mirwais Shinwary, Head of ICT, WFP Afghanistan Email: mireais.shinwary@wfp.org Mob: +93(0)797662080

Priority Areas

Despite years of use, the government of Afghanistan has yet to issue licenses for the use of VHF and HF frequencies used by the humanitarian community in Afghanistan, thereby limiting the quantity and quality of verbal communications systems in country. To remedy this, the cluster seeks to ensure standard and common VHF and HF channels in 2011, call signs and sell calls, new simplex frequencies, and common and specific frequencies. In addition, the cluster will test other frequencies in the VHF and UHF spectrum and train telecoms staff on the cluster approach and emergency response to improve humanitarian responses.

Key indicators

[1, 2, 3]

- Obtaining license for VHF and HF frequencies, used by the humanitarian community in Afghanistan.
- Standardizing VHF and HF channels for the humanitarian community in Afghanistan.
- Standardizing standard call signs and sell calls for the humanitarian community in Afghanistan.
- Arranging Telecom Emergency Stock in the country.
- Organization IT Emergency and Preparedness Response Training in five locations.

Monitoring

The monitoring body will be the ETC members and the progress will be discussed in the monthly and special meetings arrange during 2011. Also the latest status will be reflected in the monthly reports and minutes.

4.5.5 FOOD SECURITY AND AGRICULTURE

Cluster Lead Agencies	FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO) / WORLD FOOD PROGRAMME (WFP), co-leads, and Afghan Aid, deputy lead
Implementing Agencies	Cluster members
Number of Projects	15
Cluster Objectives	<p>Overall objective: To ensure food security and provide support to improve agricultural productivity of vulnerable farmers.</p> <p>Objective 1: To avert an impending acute humanitarian emergency that 7.8 million of most vulnerable adult women and men, children and elderly people affected by conflict and/or natural disasters are highly likely to face, through provision of 129,300 MTs of food and cash/vouchers to procure required basic food.</p> <p>Objective 2: To reinforce the coping mechanisms of one million very highly food-insecure and vulnerable women, men, children and elderly people affected by conflict and/or disasters, through technical and productive agriculture assistance to increase agricultural productivity and production.</p> <p>Objective 3: To stabilize staple food market, create sustainable safety net mechanism at grassroots level, and mitigate risks associated with regional disasters and global low cereal production as well as price hike, contingency plans, preparedness measures and other actions will be taken aiming at most vulnerable women, men, children and elderly people.</p> <p>Objective 4: To timely and effectively respond to the agricultural input/assistance needs of the population affected by conflict and/or natural disaster.</p>
Total Number of Beneficiaries	3.4 million for food assistance and one million people for agriculture assistance
Funds Requested	\$230,657,599
Funds Requested Per Priority Level	Immediate: \$209,023,281 High: \$17,105,128 Medium: \$4,529,190
Contact Information	rebekah.bell@fao.org (Cluster Coordinator) hildegard.tuttinghoff@wfp.org (Cluster Co-Lead) belayderza.Gaga@fao.org (Cluster Co-Lead) ffstocker@afghanaid.org.uk (Cluster Deputy Lead)

Priority Areas

To avert an impending acute humanitarian emergency for 3.4 million of most vulnerable adult women and men, children and elderly people affected by conflict and/or natural disasters across the country, the cluster seeks to ensure the provision of 129,300 MTs of food and cash/vouchers to procure required basic food. The cluster identified the following as priority areas: improved food consumption for targeted emergency-affected households, increased agricultural productivity and production through technical and productive agriculture assistance, reinforced social safety nets in urban settings, and asset creation in fragile transition situations with reduced hazard risks.

Critical areas remain the immediate resumption of wheat planting by 40,000 disasters-affected farming families, increased crop production to enhance food security and reduced dependence, improved farming practices through crop rotation and diversification of agriculture, and awareness-raising on the use of high-yielding wheat seed varieties and dissemination of improved wheat seeds.

Secondary beneficiaries, such as extended families and neighbouring communities, will have access to improved varieties of seed through farmer-to-farmer exchange/sale in subsequent seasons. Building the capacities of provincial governments is also a clear priority, particularly the departments of Agriculture, Irrigation and Livestock, LNGOs, and CBOs.

Response Strategies

Emergency Relief: In order to assure adequate household food consumption in life threatening situations, WFP will provide emergency food assistance through general food distribution to population which have been adversely affected by shocks, as well as IDPs and returnees, mainly in rural areas.

Food for Work: Wherever possible, WFP will use food-for-work (FFW) as a tool for food distribution and will engage beneficiaries in a series of FFW activities, especially in post emergency and early recovery situations.

Urban Social Safety Net: Like the emergency food assistance, the urban social safety net is to ensure adequate household food consumption for extremely vulnerable households. This will reduce vulnerability, provide a level of predictability to daily life schedules, and prevent households from resorting to new forms of survival strategies and traditional coping mechanisms that could have unintended consequences on community relations and resources. Traditionally, the female-headed households, widows and the elderly have the highest beneficiary numbers.

Food-for-Assets (FFA): An integrated package of programme responses aimed at raising agricultural productivity and resilience to shocks.

Food Vouchers: Depending on specific circumstances, voucher-based approaches will help to avoid negative effects on the market due to food assistance and offer market opportunities for farmers. Food vouchers will be provided in lieu of food under other programme activities and does not constitute a separate activity.

Cash for work: provision of cash vouchers to support vulnerable household for at least three months.

Seed and Fertilizer Distribution: Vulnerable rural households lacking seed supplies will receive a kit comprised of 50 kg wheat seed, 50 kg of di-ammonium phosphate and 100 kg of urea fertilizer and/or vegetable seeds in order to increase agriculture productivity and reduce vulnerability of agriculturally productive households.

Animal Feed Distribution: Vulnerable households that own livestock, including Kuchis, will be provided with vouchers for the subsidized purchase of animal feed, along with veterinary medicines, to maintain their livestock and protect assets essential to their livelihoods.

Agriculture and Rural Infrastructure Recovery: Households affected by natural disasters or conflict related losses will be able to access various activities to assist in the recovery of agriculture assets and production and rural assets such as irrigation works, roads and local markets.

Key Indicators

[1, 2]

- Percentage of targeted disaster-affected households/people who meet their daily food requirements.
- The number of targeted food-insecure people who are able to meet their daily food requirements as a percentage of the total food-insecure population.
- The number of targeted borderline food-insecure people who are able to meet their daily food requirements as a percentage of the total borderline food-insecure population.
- Number of hectares of land under cultivation in targeted areas in 2011 as a percentage of the number of hectares of land under cultivation in targeted areas in 2010.
- Percentage of targeted beneficiaries who have access to certified and/or quality-declared wheat seeds by end of 2011.
- Percentage increase in yield of wheat and cereals in targeted areas compared to 2010.
- Percentage reduction of deficiency of wheat and cereals in targeted areas compared to 2010.
- The number of targeted livestock holders who received animal feed following natural disaster or in conflict-affected areas.
- The quantity of animal feed along with veterinary medicines distributed.
- Number of rural infrastructure assets recovered following natural disaster or conflict damage in targeted areas as a percentage of the number of rural assets damaged by natural disasters and conflict damage in targeted areas.

[3]

- The number of Food Security and Agriculture Cluster (FSAC) Early Warning Working Group surveys and updates for the purposes of early warning.

Monitoring

The Food Security and Agriculture Cluster will put in place a cluster-level monitoring system to measure progress quarterly against its log frame. The development of this monitoring system will occur at the same time as the role-out of the Regional FSACs, which is planned for early 2011.

The FSAC Coordination team will work closely with its membership and also OCHA Information Management Unit (IMU) to gather required data regularly. The results of regular monitoring assessments will be shared with FSAC partners as well as at inter-cluster and HCT level and course-correction measures discussed and agreed accordingly which may include advocacy with donors to fund cluster priority projects.

4.5.6 HEALTH

Cluster/Sector Lead Agency	WORLD HEALTH ORGANIZATION (WHO)
Implementing Agencies	Health Cluster members
Number of Projects	10
Cluster/Sector Objectives	<p>Overall objective: To reduce avoidable mortality, morbidity and disabilities among the populations affected by disasters and crisis with a focus on special needs of women and children.</p> <p>Specific objectives:</p> <p>Objective 1: To timely and effectively respond to the emergency health needs of the population affected by natural and manmade disasters.</p> <p>Objective 2: To ensure access to essential health and referral services for high-risk communities affected by chronic vulnerability (un-served, isolated, IDP, Refugees returnees, people living in insecure areas).</p> <p>Objective 3: Building the preparedness and the capacity of the health sector and partners to respond to manmade and natural disasters as a cross cutting issues integrated within both above objectives.</p>
Total Number of Beneficiaries	<p>Total Pop: 2,600,000</p> <ul style="list-style-type: none"> Population affected by acute crisis: 1,600,000 Population at high risk due to chronic vulnerability: 1,000,000 <p>Total Children <5 years of age; 540,000. Total Pregnant & lactating women: 216,000</p> <p>Direct Beneficiaries: 1,000,000 (including the number of curative cases, vaccination, ante-natal clinic (ANC) and deliveries, health education)</p>
Funds Requested	\$40,875,494
Funds Requested Per Priority Level	Immediate: \$37,520,986 High: \$3,354,508
Contact Information	Dr Maria Luiza Galer; galer@afg.emro.who.int Dr Taqdeer: taqdeera@afg.emro.who.int

Disaggregated number of affected population and beneficiaries

Category	Affected population			Beneficiaries		
	Female	Male	Total	Female	Male	Total
Under-five children	264,600	275,400	540,000	53,091	51,009	104,100
Pregnant & lactating women	216,000	0	216,000	45,360	0	45,360

Priority Areas

Afghanistan has some of the world's worst health indicators: infant mortality rate is the world's worst and maternal mortality is the second worst globally. As such, all areas of the country remain a priority; particularly those most affected by violent conflict, and natural-disaster-prone rural areas.

Category	Indicator
Life expectancy at birth	43 years
Infant mortality	129 per 1,000 live births
Under-five mortality	191 per 1,000 live births
Maternal mortality	1,600 per 100,000 live births
Malnutrition in children under five	Underweight: 40%; stunting: 54%; 7% (NNS, 2004) GAM: 16.7%; SAM: 4.7% (MoPH RNA of 22 most vulnerable provinces, 2008)
Fully immunized children	43%
Malaria incidence	298.2 cases per 100,000
Tuberculosis incidence	72,000 cases per year
Main causes of morbidity	Diarrhoeal disease: 18.5%; fever: 18.9%; respiratory illness: 12%

Response strategies

The health sector strategy for 2011 will continue to focus on ensuring timely access to essential health services for people affected by manmade and natural disasters, and people affected by chronic vulnerable communities. Taking into account the dire situation regarding the access to specialized health services for women and children, all interventions will integrate a strong reproductive and child

health component. Building up the EPR system and capacities at all levels will ensure the linkages with early recovery and development, and strengthen the reliance on internal resources.

Approximately 75% of the population is covered by Community Health System, including by community health workers (CHWs). However, remote and insecure areas remain largely uncovered and are where the health system is of critical need (especially regarding Maternal and Child health). To facilitate access to at least community health services for children and women in these unserved areas, additional CHWs will be identified, trained and integrated into the system.

The health strategy will focus on addressing the identified priority needs:

- Ensure access to emergency health care for 1.6 million people affected by natural disaster and conflict through establishment of temporary static and mobile units, implementation of vital public health interventions, and prevention and response to epidemics,
- Immediate access to essential life saving services for 1 million people under-served and affected by other vulnerabilities
- Enhance the capacity of health sector partners and strengthen the EPR system to timely and efficiently respond to emergencies.

Key indicators

[1.2]

- Medical supplies enough to cover the immediate health needs of 2,6 million people are distributed to respond to crisis.
- One functional health facility/10,000 people in areas affected by disasters.
- Case fatality rate due to epidemic within internationally agreed standards.
- Percent of targeted 1 million under-served highly vulnerable population covered by basic health services.
- Percent of targeted 500 new CHWs are identified and activated (trained, integrated into the system and supported by BPHS) from under-served insecure areas.
- One community midwife/10,000 population.

[3]

- Time difference between disaster onset and initiated response maximum 24 hours.
- Percent of outbreaks that are investigated and response initiated within 48 hours of notification.
- At least one health staff/health facility trained on emergency response (incl. epidemic control).
- At least 5 management staff from are trained on EPR hazard mapping and analysis conducted in 18 high risk provinces.

Monitoring

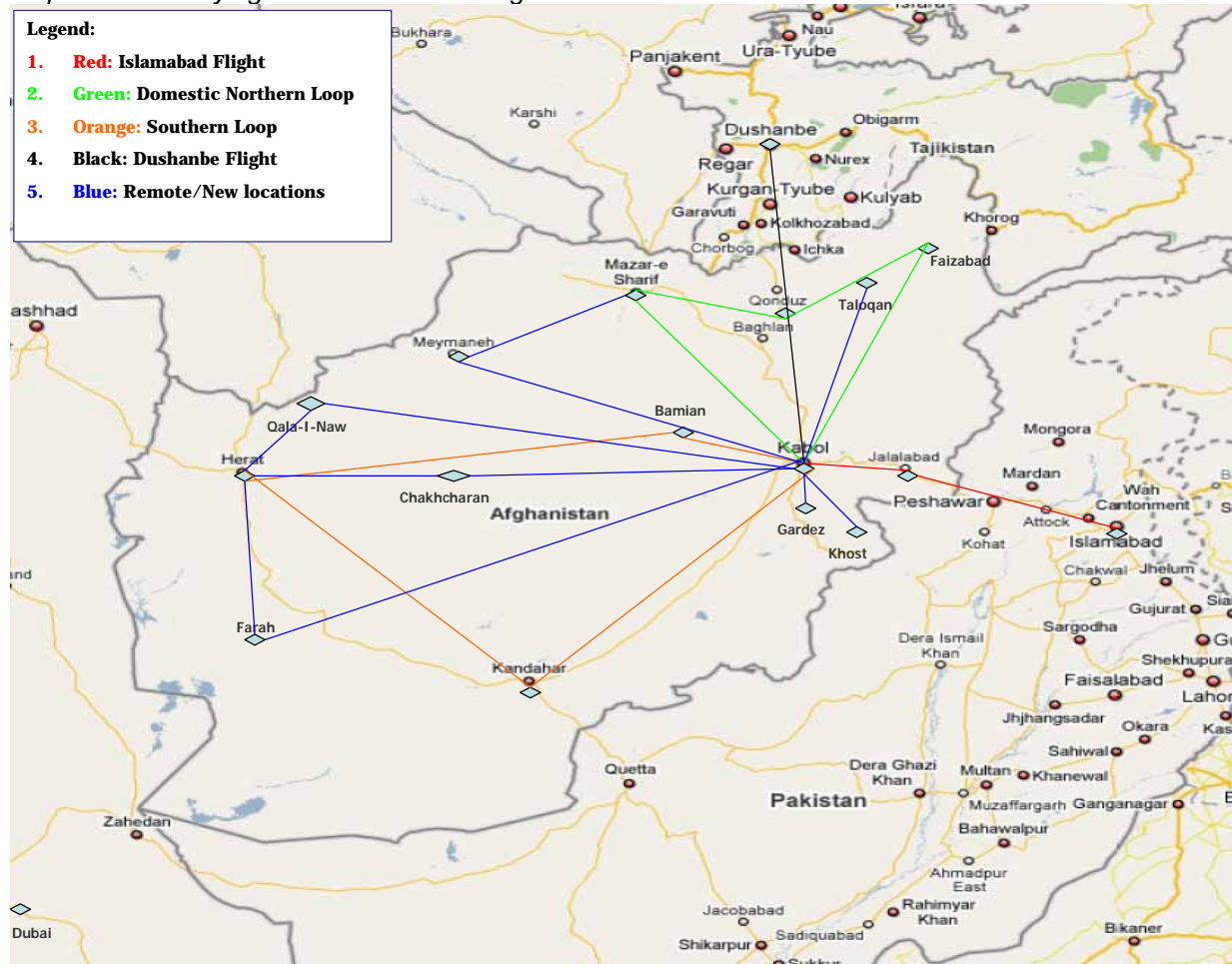
The health cluster will strengthen the monitoring system to be able to measure the progress of implementation against agreed indicators. The following mechanisms and tools will be used:

- Health Resources Availability Mapping System (HeRAMS); the cluster is in the process of developing the mapping that allows regular updating of situation development and identification of priority gaps
- The regular Health Management Information System (HMIS)
- DEWS reports compiled from all provinces regularly distributed to all stakeholders
- Provincial and District health officer networks
- Supervision and monitoring will be conducted by WHO and MoPH staff. In insecure, inaccessible areas the WHO network of polio focal points will be involved in monitoring activities. When necessary, additional staff selected from within targeted communities will be recruited
- Provincial public health coordination mechanism
- Rapid assessment in acute crises situations will be carried out with the support of implementing partners and polio network.

4.5.7 COMMON SERVICES (LOGISTICS)

Cluster/Sector Lead Agency	WORLD FOOD PROGRAMME/ UNITED NATIONS HUMANITARIAN AIR SERVICE (WFP/UNHAS)
Implementing Agencies	WFP/UNHAS, UN and humanitarian partners
Number of Projects	1
Cluster/Sector Objectives	Specific objectives: Objective 1: To provide a reliable, efficient and cost effective air service to the humanitarian community and donors in Afghanistan to facilitate implementation and monitoring of humanitarian activities. Objective 2: To ensure adequate capacity to continue absorbing the current passenger traffic and the additional requirements to access new locations, with the desired flexibility to meet emergencies including medical and security evacuations.
Total Number of Beneficiaries	UNHAS achievements during the period January to September 2010 are: UNHAS assistance provided to at least 300 agencies (30 UN, 200 NGOs, 71 donor & diplomatic missions) <ul style="list-style-type: none"> ▪ Total Target: 25,000 passengers and 120 MTs of cargo ▪ Direct beneficiaries: 19,023 passengers and 87.508 MTs of light cargo transported to 11 different programme sites Direct beneficiaries: Evacuations – 13 security evacuations and two medical evacuations
Funds Requested	\$19,985,980
Funds Requested Per Priority Level	Immediate: \$19,985,980
Contact Information	Matthew Hollingworth: matthew.hollingworth@wfp.org Anthony Freeman: anthony.freeman@wfp.org Jared Komwono: jared.komwono@wfp.org Louis Imbleau: louis.imbleau@wfp.org

Map of UNHAS flying destinations including remote and new destinations.



Response Strategy

In addition to general logistics guidance and support in the logistics working group, WFP will develop scheduled flights based on user community needs that adhere to standard operating and administrative procedures ensures equity and fairness in terms of access and utilization of UNHAS air assets to all participating organizations.

To continuously monitor the safety and quality of service rendered UNHAS will ensure a rigorous implementation of safety procedures, regulations and mitigate risks in the operation area to ensure highest safety standards are maintained.

Another key response capacity is an aircraft fleet and logistical capacity capable of responding to current and emerging passenger and cargo needs, with a priority for assets able to respond to emergency medical and security flights. In addition, UNHAS will support disaster response assessments when and where required if possible.

Key Indicators

The following will be the strategy used to monitor project performance and response to humanitarian air transport needs and emergency medical and security evacuations in 2011.

[1, 2]

As a basis of review, performance indicators include:

- aircraft occupancy rate: 65%.
- number of passengers transported against planned (target: 2,000 passengers per month);
- 100% utilization of contracted hours.
- the number of United Nations agencies and other humanitarian organizations utilizing the service: 300.
- regularity of the eleven identified locations served.
- 100% response to medical and security evacuations.
- implementation of directives and feedback received from the UNHAS Board of Directors (BoD meetings held quarterly while user group committee meetings held at least twice a year) and the user group committees as a basis of project relevance in responding to situation on the ground.

[3]

- General surveys and statistical data reviews to be done at least twice a year to make informed decisions on in order to realign performance to requirements.

4.5.8 MULTI-SECTOR (REFUGEE AND IDP RETURNEES)

Cluster/Sector Lead Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Implementing Agencies	UNHCR, TEARFUND, ABR
Number of Projects	6
Cluster/Sectors Objectives	<p>Overall objective: Facilitate the return and initial reintegration of Afghan returnees and IDPs.</p> <p>Objective 1: Provide initial reintegration support to the returnees through cash grants and shelter assistance (for returnees).</p> <p>Objective 2: Ensure multi-purpose monitoring of returns and provide protection and technical support, including with regard to land allocation and housing.</p> <p>Objective 3: Strengthen the Government's capacity to manage and assist reintegration processes.</p> <p>Objective 4: Contribute to construction/rehabilitation of community assets and improve access of the beneficiaries to income generation and livelihood opportunities.</p> <p>Objective 5: Maintain capacity to meet basic needs for NFIs.</p> <p>Objective 6: Improve access to safe potable water, hygiene knowledge and practice.</p>
Beneficiaries	623,500 Refugee and IDP returnees
Funds Requested	\$90,324,074
Funds Requested Per Priority Level	Immediate: \$1,120,000 High: \$89,204,074
Contact Information	Anatoli Poujai: poujai@unhcr.org Kleva Riza: rizak@unhcr.org

Priority Areas

A major component of this sector is multi-sectoral interventions to address the needs of Afghan returnees from the neighbouring countries of Pakistan and Iran and IDPs in Afghanistan, implemented by UNHCR, operational and implementing partners.

Interventions to support returnee and IDP reintegration are aligned with the goals of the Refugee Returnee and IDP (RRI) sector strategy of the Government's five year Afghanistan National Development Strategy (ANDS). The return of over 5.6 million refugees since 2002 has increased the estimated population of Afghanistan by over 20%. This level of return has put a strain on receiving communities struggling to cope with already limited resources. While reconstruction and development efforts have advanced, security has become more problematic and Afghanistan's capacity to absorb more returns is limited without further targeted support.

Achieving sustainable return and reintegration is becoming more challenging in the current context. Finding solutions for the remaining 2.7 million registered Afghans in the Islamic Republic of Iran and Pakistan represents a complex challenge that humanitarian agencies alone cannot address. The refugees' long stay in exile, poverty, and difficult conditions in many parts of Afghanistan pose formidable obstacles. Increased political engagement, improved management and coordination, and more substantial investments to enhance reintegration are required from both national and international actors.

The identified priority areas focus on such components as the repatriation process and provision of relevant support to the returning refugees and IDPs through housing, income generation and livelihoods support, provision of NFIs, potable water and related activities to fill the existing gaps, these coupled with appropriate capacity-building support to the government departments concerned.

Response Strategy

In this context, for 2011 a more balanced emphasis between solutions and protection is foreseen. The emphasis will be on influencing allocations by governments and donors to key provinces, sectors and programmes to enhance reintegration for refugee and IDP returnees. There will also be a focus on field monitoring, evaluation, and analysis of the durability of return, refugee and migratory movements.

Voluntary repatriation will remain the preferred solution for many Afghans. The multi-sectoral approach supporting return anticipates different modes of return, advocacy on behalf of national

programmes affecting reintegration, and institutional development to support broader government engagement. A key responsibility will be to ensure that the principle of voluntary return is respected. 2011 will see a further effort for the return and reintegration of protracted IDP groups, and local settlement for a reduced population group. A greater role of the Government in the management of IDP issues will be encouraged.

Given the unpredictability of the operational environment, agencies will work incrementally towards the goals established by the ANDS while improving responses to forced displacement affecting returnees and IDPs.

The voluntary repatriation of Afghan refugees from Pakistan and Iran will continue, but at greatly reduced levels compared with the pre-2006 era. Rising insecurity, political instability and economic and social problems in Afghanistan have constrained voluntary repatriation. The number of conflict-induced IDPs is likely to increase as a consequence of intensified military operations.

Progress towards solutions of land disputes between returnees groups and local populations will be further sought through an integrated, area-based approach benefiting all parties.

Monitoring

Monitoring arrangements form an integral part of the project cycle and consist on the following essential elements:

- Permanent monitoring of the repatriation process at the Encashment Centres and in the areas of return.
- Beneficiary selection.
- Field visits to the beneficiary communities and monitoring through partners in non-accessible areas.
- Meetings with the authorities and partners.
- Implementation progress reports and appropriate data collection.
- Adjustments may be warranted if the results of multi-functional monitoring suggest amendments to the projects.

4.5.9 NUTRITION

Cluster/Sector Lead Agency	CLUSTER CO-CHAIR BY FAO & UNICEF
Implementing Agencies	Nutrition Cluster partners
Number of Projects	17
Cluster/Sector Objectives	<p>General objective: To alleviate the impact of disasters and shocks affecting the nutritional status of children and mothers in Afghanistan.</p> <p>Objective 1: Acutely malnourished children, pregnant and lactating mothers are identified and receive timely and appropriate support.</p> <p>Objective 2: Nutritional status of children, pregnant and lactating women is protected from further deterioration</p> <p>Objective 3: To build the capacity of nutrition partners to respond to nutritional emergencies and to monitor the nutrition situation of disaster prone areas.</p>
Beneficiaries	<p>Affected population: 2.7 million (IDPs, Returnees, drought, flood, and conflict related and the most under-served population)</p> <p>Direct beneficiaries: 104,100 acutely malnourished <5 years 45,360 malnourished pregnant & Lactating women.</p>
Funds Requested	\$27,417,503
Funds Requested Per Priority Level	Immediate: \$26,289,306 High: \$1,128,197
Contact Information	Basra Hassan: bhassan@unicef.org Silvia Kaufmann: silvia.kaufmann@fao.org

Disaggregated number of affected population and beneficiaries

Category	Affected population			Beneficiaries		
	Female	Male	Total	Female	Male	Total
Under-five children	264,600	275,400	540,000	53,091	51,009	104,100
Pregnant & lactating women	216,000	0	216,000	45,360	0	45,360

Priority Areas

Malnutrition has life-long physical and mental impacts. Therefore, evidence-based measures to treat and prevent malnutrition are the centre of the cluster’s focus. These areas are as follows:³¹

- Enhancing the IYCF strategy by integrating in the nutrition intervention programmes such as CMAM and scaling up at community level and tackling micronutrient deficiencies. This includes WFP support for children and pregnant / lactating women to be treated for moderate malnutrition.
- Treating cases of malnutrition while addressing its underlying causes, activities will be implemented in an integrated and coordinated manner with nutrition, health, WASH, and food/livelihood security clusters.
- Nutrition monitoring will be improved by building the capacity of BPHS implementers through the establishment of nutrition surveillance and nutrition surveys when and where needed. This will be established to allow flexibility to respond to emerging needs.
- Capacity-building of partners on proper Emergency preparedness and response to deliver quality nutrition interventions.

Key indicators

- Number of sites following Afghanistan CMAM Guidelines.
- Number of children treated for SAM.
- Number of MAM children treated.
- Performance indicators in line with SPHERE standard.
- Number of mothers with SAM children receiving education on proper IYCF.
- Number of mothers in the community empowered with nutrition education/counselling on initiation, exclusive breastfeeding and continuation after six months and timely & proper complementary feeding.
- Number of mothers receiving micronutrient supplementation.

³¹ Lancet Series Interventions for maternal and child under-nutrition and survival, 2008.

- Number of mothers receiving nutrition education on maternal nutrition. Number of children receiving Vitamin A supplement, zinc, de-worming, multiple micronutrient.

Response Strategy

The nutrition strategy is centred on the prevention of malnutrition and therapeutic care for afflicted. Children, pregnant, and lactating women are the primary target groups, as they are considered the first to show signs of malnutrition in a crisis. In addition, the disabled will be considered high-risk groups if and when malnutrition is found.

The priority initiatives under the minimum package of nutrition in emergencies, as in the 2010 HAP, are as follows:

- Rapid nutrition assessments and surveillance/monitoring.
- Hospital-based management of SAM (TFUs).
- CMAM for severely and moderately malnourished children 6-59 months of age.
- Provision of supplementary food for pregnant and lactating women.
- Protection of breastfeeding in emergencies and breastfeeding counselling.
- Complementary feeding counselling, participatory food preparation and cooking sessions using local products.
- Establishment of demonstration gardens and family kitchen gardens (support to restore home based food production).
- Micronutrient supplementation and promotion of access to fortified food.
- Nutrition education and promotion.

Key indicators

The priorities are as follows:

- Regularly updated 3Ws (what, who, where), with emphasis on the emergency nutrition response implemented provinces and districts and will be updated on quarterly basis.
- The establishment of nutrition surveillance systems in vulnerable districts, including disaster prone and under-served areas.
- Gender sensitivity to ensure boys, girls and women exercise their rights, with an emphasis on any cultural practices that inhibit women achieving optimal nutrition for herself and her children.
- Admission and performance indicators of CMAM programmes will be monitored on monthly basis and analysed data will be shared with cluster members, presented at the Monthly Nutrition Cluster Bulletin and reported to donors as requested.
- Rapid assessment and surveys in formerly inaccessible areas whenever opportunity arises.
- Capacity-building of BPHS partners on nutrition assessment, including surveillance and surveys.

Monitoring

The following will be the strategy used to monitor the programmes and the nutritional situation of the community at large:

- Nutrition Cluster in the process of producing 3Ws (what, who, where) with emphasis on the emergency nutrition response implemented provinces and districts and will be updated on quarterly basis.
- Admission and performance indicators of CMAM programmes will be monitored on monthly basis and analysed data will be shared with cluster members, presented at the Monthly Nutrition Cluster Bulletin and reported to donors as requested.
- In 2011 establishments of nutrition surveillance in the vulnerable districts including the flood-affected areas and under-served and drought prone areas such as Ghazni is scheduled. Surveys will be done only in areas where there is need to do. Rapid assessment will be conducted in situations where comprehensive nutrition assessment is not possible.
- Capacity-building of BPHS partners on nutrition assessment both surveillance and surveys will be implemented. The analysis of the results will allow tracking impact and changes, hence allowing for evaluation of the emergency response.
- Several of the BPHS implementers are planning to conduct knowledge-attitudes-practices assessments and that will help us know which areas of intervention need to be strengthened.

4.5.10 PROTECTION

Cluster/Sector Lead Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR) AND NORWEGIAN REFUGEE COUNCIL (NRC) (DEPUTY CHAIR)
Implementing Agencies	NPO/PRAA, SC – Sweden/Norway, UNAMA HRU, OCHA, Afghan Women’s Network, Children in Crisis (CIC), OSDR, Oxfam Novib, ADA, IOM, CHA, Voluntary Association of Rehabilitation of Afghanistan, Legal Aid Organization of Afghanistan, SC, War Child UK, Fund Afghanistan, AIHRC, Ministry of Labour and Social Affairs, BBC Afghan Education Project, MoRR, MoLSAMD, United Nations Development Fund for Women (UNIFEM), MAPA/UN Mine Action Service, UNFPA, UN-HABITAT
Number of Projects	7
Cluster/Sector Objectives	Objective: Enable the protection of civilian populations with humanitarian needs
Total Number of Beneficiaries	Civilian and vulnerable populations of Afghanistan
Funds Requested	\$7,489,089
Funds Requested Per Priority Level	Immediate: \$5,995,855 High: \$1,493,234
Contact Information	Sumbul Rizvi Cluster co-ordinator – UNHCR (rizvi@unhcr.org), Jawed Wali wali@unhcr.org

Table: Disaggregated number of affected population and beneficiaries

Category	Beneficiaries		
	Female	Male	Total
Refugee Returnees	80,850	84,150	27,500 families
Conflict-induced IDPs profiled	216,079	224,897	73,496 families
Extremely vulnerable conflict-induced IDPs and refugee returnees in displacement in mixed settlements and in accessible areas	147,000	153,000	50,000 families
GBV	[UNFPA]		
Children	[UNICEF]		
Mine Action	[MACCA]		1,303,553 (this is based on land scan data on populations within 500m of a minefield)

Priority Areas

On Protection of civilian issues, there will be preparedness for and response to conflict and natural disasters and support for conflict-related contingency planning. This will include investigation, monitoring and documenting of protection of civilians incidents; advocacy for compensation to reduce the effects of conflict on civilians as well as adherence of international law and human rights law. Monitoring the impact of the armed conflict on civilians will remain a key activity for humanitarian access. The cluster will also advocate through regional mechanisms, including responses in all clusters. The cluster will also profile and monitor displacement through strengthened community and partner networks, therefore encouraging appropriate responses.

Intervention in violent disputes and clashes involving housing, land and property (HLP) rights in Afghanistan which are both: (1) a fundamental cause of localized conflict and forced displacement, (2) a result arising from the decades of armed conflict; and, (3) the results of natural disaster. Protection of HLP rights remains one of the major gaps in the humanitarian response in Afghanistan. In this context, disputes over land and access to its natural resources (water sources, pasture and agriculture land) continue to pose immediate and urgent protection challenges to the humanitarian community. The HLP TF, therefore, consider as a priority the need to reinforce its role as the main provider of guidance on HLP rights to humanitarian actors and planned humanitarian actions in Afghanistan.

The Child Protection Sub-Cluster will be strengthened nationally in 2011 and rolled out to the region utilising existing member monitoring mechanisms such as through CPAN, the MRM on children and armed conflict, and individual member organizations monitoring systems. In addition the Child Protection Sub-Cluster will develop a monitoring strategy to conduct regular monitoring and reporting on priority areas identified by the sub-cluster.

AFGHANISTAN

MACCA monitors all mine clearance and mine risk education projects in Afghanistan, whether UN or bilaterally funded. Activities include mapping, all known contaminated areas, clearance, and Mine Risk Education (MRE) sessions. These are verified and collated in the National database.

Map or table of proposed coverage per site

SITE / AREA by Province	ORGANIZATIONS
Northern Region	GoA, UNHCR, UNICEF, NRC, Afghanistan Independent Human Rights Commission (AIHRC), GTZ, SC, Child Fund Afghanistan, Legal Aid Organization of Afghanistan (LAOA), MRM on Children in Armed Conflict
Central Region	GoA, UNHCR, UNICEF, UNIFEM, UNFPA, NRC, AIHRC, German Technical Cooperation Society (GTZ), Children in Crisis, MRM on Children in Armed Conflict, LAOA, ILF, Terre des Hommes, Aschiana
Eastern Region	GoA, UNHCR, UNICEF, NRC, AIHRC, GTZ, <i>Terre des Hommes (TdH)</i> , SC, MRM on Children in Armed Conflict
Western Region	GoA, UNHCR, UNICEF, NRC, AIHRC, GTZ, Intersos, War Child Holland, Voice of Women, MRM on Children in Armed Conflict, AIHRC
Southern Region	GoA, UNHCR, UNICEF, NRC, AIHRC, HAPA, SC, MRM on Children in Armed Conflict, AIHRC
Central Highlands	GoA, UNHCR, UNICEF, AIHRC
South-east region	GoA, UNHCR, NRC, AIHRC

Response Strategies

Violence against women is not only under-reported it is accentuated by the segregation of women from public life, justification of violence by interpretation of laws and harmful practices. Increased insecurity and restrictions on women's movements and employment significantly hinders access to maternal and reproductive health. Widows and female-headed households in particular struggle to meet their basic needs and face direct threats from AGE, compounding the overall negative impact of the conflict in limiting safe access to schools.

The Child Protection strategy is to prevent and respond to abuse, violence, neglect and exploitation of children. The target group are all children, both boys and girls in 34 provinces. Priority needs are: capacity for effective coordination, rapid needs assessments, and referral to appropriate services for children. Timely monitoring will be completed, as will community-based psycho-social services available for all children in need of assistance in a child-friendly and gender sensitive manner. The cluster will render, where required, family tracing, reunification and reintegration services. In addition to the identification of community-based alternative care; and the capacity of all relevant professionals will be strengthened. Trainings will be conducted for law enforcement officials on best practice as set out in national and international legislation in dealing with children in emergency. Occupational standards and curriculum for an accredited social work training programme will be developed and endorsed.

The Mine Action programme is to reduce mortality and morbidity among conflict affected populations through clearance of landmines and other explosive remnants of war and mine risk education targeting most-at-risk populations.

Key Indicators

[1-2]

- Number of regions with Protection Coordination fora.
- Updated tracking of conflict-induced displacements.
- Number of regions with IDP protection coordination fora.
- Number of regions with GBV coordination fora.
- Number of regions where coordination of Child Protection established.
- Number of trainings on protection of IDPs, PoC, Child Protection, GBV referral.
- Number of landless vulnerable IDP and refugee returnees that have access to LAS.
- Number of IDPs for whom a durable solution is achieved.
- Percent of progress compared to 2010 by MACCA/ DMC and stakeholders toward achieving 1389 Integrated Operational Framework.

- Number of regional Mine Clearance Emergency Response Units (ERU) and areas covered.

[1-2-3]

- Timeframe between conflict and disaster onset and access to affected areas and information sharing on Protection and Assistance needs of IDPs.

3

- Number of trainings to strengthen GBV Prevention and Response capacity of duty bearers, service providers and stakeholders at provincial and country level strengthened.
- Number of regions trained on CPiE and CP coordination.
- Number of tools for monitoring and reporting on protection issues amongst relevant stakeholders at national level.

Monitoring

Effective monitoring is measured through implementation rates, cluster or working group meetings at provincial, regional, and national meetings, regular reports, implementation rates, and engagement with relevant authorities. The mid-year review takes stock of achievements and indicates possible adjustments in light of contextual changes. Implementing partner reporting is also of critical utility.

4.5.11 WATER, SANITATION AND HYGIENE

Cluster/Sector Lead Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF) (Lead) DANISH COMMITTEE FOR AID TO AFGHAN REFUGEES (DACAAR) (Deputy Lead)
Implementing Agencies	WASH Cluster Partners
Number of Projects	21
Cluster/Sector Objectives	Objective: Support emergency response and recovery activities; by ensuring that victims of conflict, natural disasters and chronically vulnerable (or under developed) populations have safe, gender and environment friendly, and equitable access to safe drinking water and adequate sanitation within reasonable reach, along with effective education programmes on sanitation, hygiene promotion and operation and maintenance
Total Number of Beneficiaries	1,453,776 (IDPs, Returnees, natural or conflict affected, and the under-served population Children: 789,629 Women: 291,785 Others (male) : 367,362
Funds Requested	\$24,683,661
Funds Requested Per Priority Level	Immediate: \$19,032,484 High: \$2,418,600 Medium: \$3,232,577
Contact Information	Samay Saquib (UNICEF), ssaquib@unicef.org Gerry Garvey (DACAAR), cowsp@dacaar.org

Disaggregated number of affected population and beneficiaries

Category	Affected population			Beneficiaries		
	Female	Male	Total	Female	Male	Total
Water Supply	712,350	741,426	1,453,776	712,350	741,426	1,453,776
Sanitation	142,500	148,000	290,500	142,500	148,000	290,500
Hygiene	712,350	741,426	1,453,776	712,350	741,426	1,453,776

Priority Areas

Proposed coverage per site

SITE / AREA (by Regions)	ORGANIZATIONS
Central	UNICEF
Central Highlands	Caritas, Helvetas, Oxfam, SCA, Tearfund, UNICEF
Eastern	SCA, UNICEF
Northern	AADA, ACF, Afghan Aid, DWHH, Helvetas, Intersos, MTDO, Tearfund, UNICEF
North-eastern	Afghan Aid, Oxfam, SCA, UNICEF
Southern	Oxfam, UNICEF
South-eastern	UNICEF
Western	ACF, Afghan Aid, Medair, UNICEF

Taking into consideration the strategic focus areas and the trend of natural and manmade emergencies in Afghanistan the WASH cluster has identified the following priority areas for 2011:

- Provision of safe drinking water, sanitation and hygiene education with a particular focus on the natural and conflict related disaster-affected areas and chronically vulnerable population.
- Contribution to the reduction and prevention of water borne and communicable diseases such as cholera, diarrheal diseases and other related infections.
- Emergency WASH activities – in collaboration with the Government and other partners – with particular focus on hand-pump water supplies, spring-fed pipe schemes and other types of gravity flow schemes and improved traditional water systems; water tanking and water disinfection by chlorine and purification tablets.
- Prioritizing projects that include operation and maintenance systems and sanitation and hygiene education components.
- Documenting emergency projects on WASH and encourage replication.
- Reinforcing synergies among partners to avoid duplication and pooling of own organizational resources to meet the emerging challenges of WASH.

- Ensuring compliance to gender markers at relevant stages of WASH interventions. The partners will be encouraged to identify, monitor and report on how WASH services are ensuring gender equality.
- Establish and maintain regional Inter-agency Contingency and Preparedness Plan for additional regions, and review to strengthen and update the existing national and regional plans.

Response Strategies

A key strategy for the WASH Cluster is to integrate its humanitarian coordination and response activities within the ongoing programme and structures that exist to further WASH development. In this respect the WASH Cluster agencies will actively seek to work with functioning Government capacity at the provincial level and influence disaster management (DM) policy at the national level through demonstration of good practices. This requires:

- support emergency response and recovery activities; by ensuring that victims of conflict, natural disasters and chronically vulnerable populations have safe and equitable access to safe drinking water and adequate sanitation within reasonable reach, along with effective education programmes on sanitation, hygiene promotion and operation and maintenance.³²
- a reduction of water-borne diseases through expanding hygiene education to all social groups through a variety of culturally acceptable modes, promotion of treatment of water through bio-sand filters (long term), disinfection using purification tabs and chlorine, and other affordable treatment methods. Special hygiene needs of women and girls will be taken into consideration and culturally appropriate services developed in consultation with them.
- prioritization of community- Participation of women, men, girls and boys in identifying, establishing and maintaining safe, equitable and culturally appropriate WASH services needs.
- increased utilization of renewable energy water sources (solar and wind driven pumps) and traditional water sources such as rainwater harvesting (storage reservoirs), provided that community-based operation and maintenance is ensured.

Consistent with the above, early recovery initiatives through placing intermediate solutions will be undertaken and built into emergency programme design leading to developmental activities . This aims to enable the affected populations to return to their homes, i.e. when floods, drought or earthquakes occur.

When crises occur, the WASH Cluster agencies will intervene to address risk of disease outbreak, focusing specifically on diarrhoea risk reduction. This implies the need and focus on the key interventions known to be most effective; hand washing with soap, safe management of excreta, household water quality and safe storage.

Key indicators

[1]

- Number of beneficiaries disaggregated by age and gender with access to safe drinking water.
- Number of beneficiaries disaggregated by age and gender with access to appropriate sanitation facilities.
- Number of beneficiaries disaggregated by age and gender participating in hygiene promotion campaigns.

[3]

- Number of regional inter-agency contingency and preparedness plans for WASH.

³² Water provision includes the construction of strategic water points (in areas where shallow groundwater is not available or groundwater does not have satisfactory physical, chemical and bacteriological quality, construction of community water supplies (in places where groundwater can be extracted up to a depth of 70 meters and where a community based O&M is ensured), construction of spring-fed pipe water supply schemes with due consideration to water right issues and water quality, traditional water storage techniques, and water tanking with consideration of water quality and cost effectiveness.

Monitoring

Humanitarian assessment and monitoring is more complex to address as there has not been national-level agreement on what key WASH indicators should be used. The global WASH Cluster will produce a comprehensive system via the "Survey Tool," with assessment and monitoring formats. The WASH Cluster will also focus on facilitating better sharing of assessment information and identifying resources to collate and synthesize the variety of assessment information. In 2011 WASH Cluster will seek to use and adapt global tools where assessment information from other sources is not available.

Information management capacity will therefore be required to bring together information from a multitude of potential sources and assist in processing this information. It is important that Information Managers capacity is identified and available for support to WASH Cluster coordinators. In the longer term, further Information Management preparedness measures will be undertaken, including on tools such as the Initial Rapid Assessment.

Reviews and regular meetings will be held with the partners to track progress. Joint WASH Cluster monitoring visits will be organized in the field. Meanwhile, agencies will collect all the information and data from their field offices and prepare reports, which will be sent to WASH Cluster Lead for compilation. The Cluster Lead will prepare monthly reports and submit these to the HC and MRRD.

To ensure that the WASH-specific humanitarian needs meet the needs of the entire population, focused efforts will be made to access and include the needs of vulnerable population especially women and girls. The gender indicators developed by WASH will be used to guide this effort. In evaluating WASH submissions to CAP, gender issues will be considered at three levels.

5. CONCLUSION

Afghanistan remains a country beset by violent conflict, recurrent man-made and natural disasters, and chronic under-development, evident by abysmal development indicators. All measurements suggest the majority of people in Afghanistan, after 30 years of war and repeated natural disasters, reside on the precipice of chronic and acute vulnerability. The increasing conflict must also be placed in the context of endemic poverty in Afghanistan linked to chronic lack of development and accountability including corruption and abuse of power by state authorities. Additionally, discrimination and social exclusion of ethnic minority groups compound the problem. The concerns of millions of Afghans are enormous, including food and nutrition security, forced displacement, water, sanitation and hygiene, livelihood assistance, and social protection – particularly for women and children. The country's political and economic landscape remains extremely fragile, characterized by rampant corruption, and disputed election results. In addition, Afghanistan is highly susceptible to political and social unrest, and not least natural disasters of its neighbours. These collective challenges directly impact the ability, and capacity, of targeted humanitarian assistance.

This appeal is an effort not only to ameliorate human suffering, but also act as a benchmark and foundation for recovery and development assistance in the country. Critical to the success of this appeal is the safety and security of civilians, free and safe humanitarian access for the aid community, and sustained financial support to ensure assistance reaches the most needful populations. For this, it is incumbent that all actors respect fundamental principles of humanity, impartiality, and neutrality.

Meanwhile the humanitarian community continues to work closely at ensuring strategic and operational levels across the spectrum of UN system, including through contributions to the Integrated Strategic Framework, UNDAF, and the CAP. In addition, the international community provides support to the Government of Afghanistan at federal, provincial, and district levels.

ANNEX I. LIST OF PROJECTS

Table IV: List of Appeal projects (grouped by sector)

Consolidated Appeal for Afghanistan 2011
as of 15 November 2010
<http://fts.unocha.org>

Compiled by OCHA on the basis of information provided by appealing organizations.

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
COMMON SERVICES (LOGISTICS)					
AFG-11/CSS/39747/561	Provision of Humanitarian Air Services in Afghanistan	WFP	19,985,980	A. IMMEDIATE	Multiple locations
Sub total for COMMON SERVICES (LOGISTICS)			19,985,980		
COORDINATION					
AFG-11/A/39559/123	Strengthening Food Security and Agriculture Cluster coordination, strategic planning and information management in Afghanistan	FAO	1,193,720	A. IMMEDIATE	Multiple locations
AFG-11/CSS/37200/5157	Kandahar- Emergency Response in DRR (drought and flood) for Returnees, IDPs, and vulnerable communities	TEARFUND	274,419	A. IMMEDIATE	Kandahar
AFG-11/CSS/37253/5157	Bamyan (Yakalang District)- Emergency Response in DRR (drought and flood) for vulnerable communities	TEARFUND	815,000	A. IMMEDIATE	Bamyan
AFG-11/CSS/37642/12912	Community-based disaster preparedness and risk management in Balkh, Jawzjan and Samangan provinces	ADEO [Afghanistan]	380,000	C. MEDIUM	Balkh
AFG-11/CSS/38291/5362	Community-based Integrated Disaster Risk Reduction Programme in Baghlan; Faryab, Saripul, Samangan and Balkh Provinces of Afghanistan	OXFAM Netherlands (NOVIB)	1,094,692	C. MEDIUM	Multiple locations
AFG-11/CSS/39109/14545	Effective disaster risk reduction in Balkh and Samangan provinces through community-based disaster risk management	HDO	145,000	A. IMMEDIATE	Multiple locations
AFG-11/CSS/39647/5025	Protection of Civilians Advocacy Advisor	OHCHR	176,491	A. IMMEDIATE	Kabul
AFG-11/CSS/39791/119	Humanitarian Coordination and Advocacy in Afghanistan	OCHA	10,073,410	A. IMMEDIATE	Multiple locations
AFG-11/E/39800/6079	Education Cluster Coordination and Information Management	SC	222,000	B. HIGH	Multiple locations
AFG-11/H/39597/124	Nutrition cluster coordination support for Afghanistan	UNICEF	592,780	A. IMMEDIATE	Multiple locations
AFG-11/H/39623/122	Health Cluster Coordination	WHO	647,774	B. HIGH	Multiple locations
Sub total for COORDINATION			15,615,286		
EDUCATION					
AFG-11/E/38098/1024	Enhanced disaster preparedness in Balkh province through effective live saving skills training.	Johanniter Unfalhilfe e.V.	236,000	A. IMMEDIATE	Balkh
AFG-11/E/38368/14504	Improving protective environment for children (children working in the street and child labour) and realizing their right in Herat Province	RWDOA	142,800	B. HIGH	Herat
AFG-11/E/38490/1024	Capacity Building of School Teachers in Kabul City to Enhance Life Saving Skills (Disaster Preparedness and First Aid) for Pupils	Johanniter Unfalhilfe e.V.	699,000	A. IMMEDIATE	Kabul
AFG-11/E/38513/13815	Emergency education for disaster affected children in Balkh and Jawzjan provinces	Action Aid	450,000	C. MEDIUM	Jawzjan
AFG-11/E/39144/5645	Capacity Building Initiative for Rolling-Out Minimum Standards for Education in Emergencies	CARE International	404,819	B. HIGH	Multiple locations
AFG-11/E/39145/5263	Disaster Management Training/ school safety in Charikar, Said Khail and Jabul Saraj	CHA	96,214	B. HIGH	Parwan

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Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
AFG-11/E/39160/298	Emergency Repairs for Conflict-Affected and Natural Disaster Affected Schools	IOM	5,042,375	B. HIGH	Multiple locations
AFG-11/E/39307/14545	Quality Primary Education Project	HDO	461,016	A. IMMEDIATE	Multiple locations
AFG-11/E/39716/124	Winter emergency preparedness	UNICEF	5,329,000	A. IMMEDIATE	Multiple locations
AFG-11/F/39164/561	Education sector component of WFP's Relief Food Assistance to tackle food security challenges in Afghanistan	WFP	159,862,595	A. IMMEDIATE	Multiple locations
Sub total for EDUCATION			172,723,819		
EMERGENCY SHELTER AND NFIs					
AFG-11/S-NF/37527/5150	Shelter assistance for IDPs & IDP returnees in Jawzjan province	ZOA Refugee Care	790,000	A. IMMEDIATE	Jawzjan
AFG-11/S-NF/37528/5150	Shelter assistance for refugee returnees and Natural disaster induced IDPs in Saripul province	ZOA Refugee Care	900,000	A. IMMEDIATE	Sari Pul
AFG-11/S-NF/37645/12912	Permanent Shelter for upcoming Disaster victim families in Northern Provinces, Afghanistan	ADEO [Afghanistan]	720,000	A. IMMEDIATE	Multiple locations
AFG-11/S-NF/37646/12912	Emergency shelter (tents) for victims of natural disasters in Northern Afghanistan (Balkh, Jawzjan, and Sari Pul provinces)	ADEO [Afghanistan]	200,000	A. IMMEDIATE	Multiple locations
AFG-11/S-NF/37901/12912	Shelter Assistance to Flood Affected Families in Samangan Province, Afghanistan	ADEO [Afghanistan]	495,000	A. IMMEDIATE	Samangan
AFG-11/S-NF/37910/12660	Emergency Shelter for Flood Affected Families in Faiz Abad, Jawzjan	SHA	990,000	A. IMMEDIATE	Jawzjan
AFG-11/S-NF/37974/14512	Shelter assistance to conflict affected families in Qaysar District, Faryab province	SUWA	445,000	A. IMMEDIATE	Faryab
AFG-11/S-NF/37988/14033	Emergency Shelter Assistance to Flood-Affected families in Faizabad district of Jawzjan Province	ZCO	674,000	A. IMMEDIATE	Jawzjan
AFG-11/S-NF/38150/14520	Shelter Assistance for 200 flood-affected families in Pashtun Kot district of Faryab Province	NRDOAW	345,000	A. IMMEDIATE	Faryab
AFG-11/S-NF/38265/6397	Shelters for REFUGEES & IDPs returnees in Faryab	DHSA	2,250,000	A. IMMEDIATE	Faryab
AFG-11/S-NF/38457/5645	Effective risk reduction for flood affected communities in Fayzabad district, Jawzjan province through community self-built housing and risk reduction management.	CARE International	1,448,226	A. IMMEDIATE	Jawzjan
AFG-11/S-NF/38507/13815	Emergency shelter in Kaldar and Shortepa district of Balkh province	Action Aid	767,200	A. IMMEDIATE	Balkh
AFG-11/S-NF/39024/13995	Shelter and winterization NFIs assistance for 200 vulnerable families in Faryab province	ACT-Afghanistan	379,000	A. IMMEDIATE	Faryab
AFG-11/S-NF/39026/5834	Emergency shelter and NFI assistance to victims of natural disasters and conflict in Northern Afghanistan	NRC	400,000	A. IMMEDIATE	Balkh
AFG-11/S-NF/39035/13995	Shelter and winterization NFIs assistance for 198 vulnerable families in Parwan province	ACT-Afghanistan	375,210	A. IMMEDIATE	Parwan
AFG-11/S-NF/39050/13995	Shelter and winterization NFIs assistance for 300 vulnerable families in Logar province	ACT-Afghanistan	568,500	A. IMMEDIATE	Logar
AFG-11/S-NF/39063/6458	Emergency Response to Flood Induced Shelter and Infrastructure Damage in Pashtunkot and Ghormach districts (Faryab)	ACTED	942,970	B. HIGH	Faryab
AFG-11/S-NF/39068/13995	Shelter and winterization NFIs assistance for 1,000 vulnerable families in Herat, Ghor, Farah and Badghis provinces	ACT-Afghanistan	1,995,000	A. IMMEDIATE	Herat
AFG-11/S-NF/39077/13995	Shelter and winterization NFIs assistance for 400 vulnerable families in Baghlan, Kunduz and Badakhshan provinces	ACT-Afghanistan	798,000	A. IMMEDIATE	Baghlan
AFG-11/S-NF/39115/298	Capacity development, emergency shelter and NFI assistance in the Northern Region.	IOM	4,273,080	A. IMMEDIATE	Multiple locations
AFG-11/S-NF/39126/6079	Emergency assistance to children affected by disasters in Northern Afghanistan	SC	618,000	A. IMMEDIATE	Multiple locations

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Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
AFG-11/S-NF/39131/5157	Humanitarian Relief Aid to Jawzjan disaster impacted families	TEARFUND	67,400	B. HIGH	Jawzjan
AFG-11/S-NF/39133/5157	Humanitarian Relief Aid to Kandahar disaster impacted families	TEARFUND	67,400	B. HIGH	Kandahar
AFG-11/S-NF/39134/5157	Humanitarian Relief Aid to Parwan disaster impacted families	TEARFUND	67,400	B. HIGH	Parwan
AFG-11/S-NF/39137/5834	Emergency Shelter for returnees and IDPs in Herat	NRC	857,962	A. IMMEDIATE	Herat
AFG-11/S-NF/39139/5645	Effective risk reduction for flood affected households in Kohband and Mahmood Raqi districts of Kapisa province through community self-built housing, improved water and irrigation systems and establishment of risk reduction committees.	CARE International	1,680,000	B. HIGH	Kapisa
AFG-11/S-NF/39141/120	Reintegration of Afghan IDPs	UNHCR	12,020,578	B. HIGH	Multiple locations
AFG-11/S-NF/39149/5834	Emergency Shelter for GBV survivors and EVI at risk of GBV	NRC	573,686	A. IMMEDIATE	Herat
AFG-11/S-NF/39152/298	Country-wide Humanitarian Assistance and Coordination	IOM	4,727,037	A. IMMEDIATE	Multiple locations
AFG-11/S-NF/39188/298	Emergency Community-based Shelter Construction Assistance to the Vulnerable Afghan Returnees, Deportees, and IDPs in the Southern, Central and Northern Regions	IOM	4,836,830	B. HIGH	Multiple locations
AFG-11/S-NF/39574/14548	Shelter implementation for vulnerable returnee and IDP families in southern region2	HAPA	2,100,000	A. IMMEDIATE	Multiple locations
AFG-11/S-NF/39578/14550	Construction of 560 Shelters in Sorobi District ,Kabul Province for returnee and IDP families	ABR	978,000	A. IMMEDIATE	Kabul
Sub total for EMERGENCY SHELTER AND NFIs			48,350,479		
EMERGENCY TELECOMMUNICATIONS					
AFG-11/CSS/38986/561	Improving the Telecommunications System utilized by the Humanitarian Community in Afghanistan	WFP	-	B. HIGH	Multiple locations
AFG-11/CSS/39679/561	Emergency Teleocmms Stock in the Country	WFP	410,000	B. HIGH	Kabul
AFG-11/CSS/39680/561	IT Emergency Preparedness and Response Training in five locations	WFP	100,000	C. MEDIUM	Multiple locations
Sub total for EMERGENCY TELECOMMUNICATIONS			510,000		
FOOD SECURITY AND AGRICULTURE					
AFG-11/A/38692/5362	Alleviation of food insecurity in three districts of Ghor (Chaghcharan, Daulatya, Lalwasarjantal) and 2 districts of Badgis (Qala E naow, Abkamary) provinces through cash for work program.	OXFAM Netherlands (NOVIB)	440,040	C. MEDIUM	Multiple locations
AFG-11/A/38968/5120	Emergency response and agriculture recovery in disaster and conflict affected villages of Afghanistan	OXFAM GB	4,580,000	B. HIGH	Multiple locations
AFG-11/A/38987/5095	Strengthening the Resilience of Farmers through the Rehabilitation and protection of Road Access, Agriculture Land, and Irrigation Structures	MEDAIR	536,800	C. MEDIUM	Bamyan
AFG-11/A/38988/5095	Emergency response to communities affected by flooding through the Rehabilitation of Road Access, Agriculture Land, and Irrigation Structures in Daykundi	MEDAIR	845,900	C. MEDIUM	Daykundi
AFG-11/A/38989/5095	Improved food security in Yawan and Raghistan, Badakhshan	MEDAIR	343,200	A. IMMEDIATE	Badakhshan
AFG-11/A/39001/5255	Emergency food assistance and agriculture and livestock recovery in villages prone to conflict and natural disasters in Badakhshan and Ghor	Afghanaid	4,318,000	A. IMMEDIATE	Multiple locations
AFG-11/A/39123/5286	Emergency response and Agriculture recovery in disaster and conflict affected villages in Balkh and Jowzjan provinces	AREA	647,350	C. MEDIUM	Balkh
AFG-11/A/39135/5286	Emergency response to food insecure and flood affected people in Ningarhar and Laghman provinces	AREA	1,209,100	C. MEDIUM	Ningarhar

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Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
AFG-11/A/39153/5102	Emergency response to flood/drought-affected communities through improved agricultural and home-based food-processing technology	UNIDO	850,000	C. MEDIUM	Laghman
AFG-11/A/39551/123	Immediate support to vulnerable populations in flood affected and food insecure areas of Afghanistan through the provision of basic agricultural packages for autumn 2011 and spring 2012 planting seasons	FAO	11,771,540	A. IMMEDIATE	Multiple locations
AFG-11/A/39554/123	Strengthening agricultural based livelihoods and food security of vulnerable, food insecure farming families through the emergency provision of animal feed for the 2011 feeding seasons	FAO	11,846,340	B. HIGH	Multiple locations
AFG-11/F/38573/5276	Food aid to highly vulnerable populations in Pasaband and Taywara districts, Ghor province	MADERA	1,349,912	A. IMMEDIATE	Ghor
AFG-11/F/38575/5276	Food aid to highly vulnerable populations in Behsud II district, Wardak province	MADERA	671,114	A. IMMEDIATE	Wardak
AFG-11/F/39009/5186	Cash for work to ensure food security of the flood and earthquake affected most vulnerable households of Dare Suf Bala and Dare Suf Payin Districts, Samangan Province	ACF	678,788	B. HIGH	Samangan
AFG-11/F/39124/561	Enhancing Resilience and Food Security in Afghanistan	WFP	190,569,515	A. IMMEDIATE	Multiple locations
Sub total for FOOD SECURITY AND AGRICULTURE			230,657,599		
HEALTH					
AFG-11/H/39010/124	Access to essential maternal, newborn and child health services for the communities affected by natural and manmade disasters.	UNICEF	4,272,589	A. IMMEDIATE	Multiple locations
AFG-11/H/39048/5195	Access to essential maternal and child health amongst un-served, high risk communities in Badakhshan through the provision of integrated emergency health care and referral services.	MERLIN	494,395	B. HIGH	Badakhshan
AFG-11/H/39049/13073	Mobile Health Clinics for IDP and Returnee and hosting community in Kabul	SHRDO	162,086	B. HIGH	Kabul
AFG-11/H/39132/1171	Provision of Emergency Obstetric Care Services in Azra and Kharwar districts.	UNFPA	71,140	A. IMMEDIATE	Logar
AFG-11/H/39136/1171	Provision of basic emergency health services, especially reproductive health services, for the under-served populations in Bamiyan and Faryab provinces	UNFPA	534,623	A. IMMEDIATE	Multiple locations
AFG-11/H/39140/13107	Basic Integrated Healthcare Services for Under-served Refugee Returnees in Kunar and Laghman Provinces, Afghanistan	IMC UK	98,774	B. HIGH	Multiple locations
AFG-11/H/39562/5326	Ensure access to essential integrated primary health care (PHC) services for under-served conflict affected communities in Zabul and Laghman provinces.	IBN SINA	287,064	B. HIGH	Multiple locations
AFG-11/H/39619/122	Access to emergency integrated health services for the communities affected by humanitarian crisis with emphasis on reproductive and child health.	WHO	5,429,984	A. IMMEDIATE	Multiple locations
AFG-11/H/39634/561	Health Component of Releif Food Assistance to tackle Food Security Challenges	WFP	27,212,650	A. IMMEDIATE	Multiple locations
AFG-11/H/39702/122	Access to essential maternal and child health services in under-served insecure districts through the expansion of Community Health Workers network in Kandahar, Uruzgan, Wardak and Zabul districts	WHO	2,312,189	B. HIGH	Multiple locations
Sub total for HEALTH			40,875,494		

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Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
MULTI-SECTOR					
AFG-11/MS/37171/5157	Kandahar - Integrated and Sustainable Services for Returnees and Host Communities	TEARFUND	699,958	B. HIGH	Kandahar
AFG-11/MS/37176/5157	Faryab - Integrated and Sustainable Services for Returnees and Host Communities	TEARFUND	317,263	B. HIGH	Faryab
AFG-11/MS/37178/5157	Jawzjan - Integrated and Sustainable Services for Returnees and Host Communities	TEARFUND	715,149	B. HIGH	Jawzjan
AFG-11/MS/39146/120	Repatriation and reintegration of Afghan returnees	UNHCR	76,809,799	B. HIGH	Multiple locations
AFG-11/MS/39151/120	Reintegration of Afghan IDPs with focus on vulnerable categories	UNHCR	10,661,905	B. HIGH	Multiple locations
AFG-11/MS/39587/14550	Construction of 100 water points in different villages of Sorobi District, Kabul Province	ABR	1,120,000	A. IMMEDIATE	Kabul
Sub total for MULTI-SECTOR			90,324,074		
NUTRITION					
AFG-11/H/37659/14465	Community-based Therapeutic Care (CTC)	CAF	307,973	B. HIGH	Multiple locations
AFG-11/H/38397/13073	Nutrition Project in IDP camps in Kabul as well as Alice Guan returnee camp	SHRDO	44,292	B. HIGH	Kabul
AFG-11/H/38399/5362	Integrated CMAM and IYCF in Herat and Samangan Provinces	OXFAM Netherlands (NOVIB)	620,995	A. IMMEDIATE	Multiple locations
AFG-11/H/38467/6079	Community Management of Acute Malnutrition project in Balkh, Faryab, Sarepul and Nengarhar provinces	SC	640,444	A. IMMEDIATE	Faryab
AFG-11/H/38980/124	Nutrition emergency preparedness and response action plan	UNICEF	6,924,229	A. IMMEDIATE	Multiple locations
AFG-11/H/39008/5195	Response to and prevention of malnutrition of the remote and under-served vulnerable populations in Badakhshan through integration of community-based nutrition services into mobile teams	MERLIN	775,932	B. HIGH	Badakhshan
AFG-11/H/39012/5186	Community-based management of acute malnutrition through nutrition and care practice activities amongst the internal displaced people and the most vulnerable population living in the Kabul informal settlements	ACF	350,138	A. IMMEDIATE	Kabul
AFG-11/H/39014/5186	Strengthening Nutrition Surveillance for appropriate emergency response	ACF	243,574	A. IMMEDIATE	Multiple locations
AFG-11/H/39107/122	Improved access to emergency nutrition care for severely malnourished children with complication	WHO	651,955	A. IMMEDIATE	Multiple locations
AFG-11/H/39108/561	Nutrition support to tackle food security challenges for children and, pregnant and lactating women	WFP	14,054,425	A. IMMEDIATE	Multiple locations
AFG-11/H/39162/5095	Community-based Therapeutic care and education	MEDAIR	594,000	A. IMMEDIATE	Badakhshan
AFG-11/H/39170/14540	Community-based Management of Acute Malnutrition (CMAM) in five districts of Faryab province	AADA	295,519	A. IMMEDIATE	Faryab
AFG-11/H/39187/14540	Community-based Management of Acute Malnutrition (CMAM) in nine districts of Ghazni province	AADA	295,519	A. IMMEDIATE	Ghazni
AFG-11/H/39286/12666	To build the capacity of Public Nutrition Department (PND) of Ministry of Public Health (MoPH) and Basic Package of Health Services (BPHS) NGOs to develop and monitor nutrition emergency programs for vulnerable groups including women and children in disaster prone areas in Afghanistan	MI	361,660	A. IMMEDIATE	Badakhshan
AFG-11/H/39406/123	Prevention of deterioration of malnutrition through the promotion of local food products	FAO	1,095,248	A. IMMEDIATE	Multiple locations

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Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
AFG-11/H/39713/14523	Community-based Management of Acute Malnutrition in Helmand Province	ACTD	109,600	A. IMMEDIATE	Hilmand
AFG-11/H/39721/14523	Community-based Management of Acute Malnutrition in Badghis Province, Afghanistan; A Nutrition Project	ACTD	52,000	A. IMMEDIATE	Badghis
Sub total for NUTRITION			27,417,503		
PROTECTION					
AFG-11/MA/38146/5116	Mine Action: Emergency Response Capacity and Mine Risk Education	UNMAS	4,952,000	A. IMMEDIATE	Multiple locations
AFG-11/P-HR-RL/38142/6076	Psychosocial and Legal Aid for Women affected by sexual and gender based violence in Herat	MM	460,100	B. HIGH	Herat
AFG-11/P-HR-RL/38578/14533	Protection of women and girls at risk of domestic abuse in Faryab, Jawzjan and Sari Pul provinces.	CCA	145,000	B. HIGH	Multiple locations
AFG-11/P-HR-RL/39037/5834	Information, counselling and legal assistance (ICLA) for refugees and IDPs in Northern Afghanistan	NRC	400,000	A. IMMEDIATE	Balkh
AFG-11/P-HR-RL/39147/120	Protection and assistance for IDPs	UNHCR	643,855	A. IMMEDIATE	Multiple locations
AFG-11/P-HR-RL/39167/1171	Life-saving Services for Survivors of Gender Based Violence (GBV)	UNFPA	298,134	B. HIGH	Multiple locations
AFG-11/P-HR-RL/39312/7039	Humanitarian and protection assistance for families evicted from Kabul's informal settlements (KIS).	UN-HABITAT	590,000	B. HIGH	Kabul
Sub total for PROTECTION			7,489,089		
WATER,SANITATION AND HYGIENE					
AFG-11/WS/37261/5157	Provision of emergency water supply, sanitation and hygiene facilities in flood and drought affected villages of Yakawlang district in Bamyan province	TEARFUND	989,000	A. IMMEDIATE	Bamyan
AFG-11/WS/37279/5157	Provision of emergency water supply, sanitation and hygiene facilities to drought affected families in 4 districts of Faryab province	TEARFUND	600,000	C. MEDIUM	Faryab
AFG-11/WS/37288/5157	Provision of emergency water supply, sanitation and hygiene facilities in flood and drought affected and IDP villages of Jawzjan province	TEARFUND	1,311,000	A. IMMEDIATE	Jawzjan
AFG-11/WS/37884/5660	Emergency integrated access to water and sanitation in Haidari Khana Village, Qaysar District, Faryab Province, Afghanistan.	INTERSOS	212,995	C. MEDIUM	Faryab
AFG-11/WS/38102/14510	Reduction of child mortality and risk of water born diseases through provision of safe drinking water in Qaysar district of Faryab province	MTDO	129,000	C. MEDIUM	Faryab
AFG-11/WS/38411/5754	Emergency Water, Sanitation and Hygiene education in Yakawlang district of Bamyan Province	SCA	213,400	C. MEDIUM	Bamyan
AFG-11/WS/38421/5754	Integrated Emergency Rural Water, Sanitation and Hygiene education in Hesarak & Mohmandarah districts of Ningarhar province.	SCA	213,400	B. HIGH	Nangarhar
AFG-11/WS/38428/5754	Emergency Rural Water, Sanitation and Hygiene education in Imam Saheb districts of Kunduz province.	SCA	151,400	B. HIGH	Kunduz
AFG-11/WS/38456/5095	School Wash - Clean water, sanitation and hygiene education at schools	MEDAIR	256,450	B. HIGH	Badakhshan
AFG-11/WS/38617/5006	Life saving and sustaining WASH project for conflict-affected IDPs in Sheberghan district of Jawzjan province	DWHH	500,000	B. HIGH	Jawzjan
AFG-11/WS/38976/5120	Emergency Water, Sanitation and Hygiene Promotion	OXFAM GB	2,674,000	A. IMMEDIATE	Multiple locations
AFG-11/WS/38979/5095	Strengthening the resilience of rural communities of Afghanistan through Rural Water Supply, Sanitation Improvement and Hygiene Education interventions	MEDAIR	760,000	C. MEDIUM	Bamyan
AFG-11/WS/38981/5095	Strengthening the resilience of rural communities of Afghanistan through Rural Water Supply, Sanitation Improvement and Hygiene Education interventions	MEDAIR	676,000	B. HIGH	Badakhshan

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Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Requirements (\$)	Priority	Location
AFG-11/WS/39015/5186	Addressing emergency WASH needs of natural disaster and cholera prone population in Dara I Sufi Pain and Dara-I-Sufi Bala districts of Samangan Province	ACF	920,368	A. IMMEDIATE	Samangan
AFG-11/WS/39016/5255	Emergency public health, sanitation and hygiene education assistance to highly vulnerable communities affected by disasters and conflict in Samangan, Ghor and Badakhshan provinces	Afghanaid	1,519,000	A. IMMEDIATE	Multiple locations
AFG-11/WS/39018/5186	Addressing emergency WASH Needs of flood and conflict affected host communities and IDP population of Sharack and Du Layana districts of Ghor Province	ACF	877,386	A. IMMEDIATE	Ghor
AFG-11/WS/39036/6631	Increased WASH access for sustained health improvement of the rural women and children in Kahmard and Saighan districts/Bamyan province	HELVETAS	334,000	C. MEDIUM	Bamyan
AFG-11/WS/39038/6631	Increased WASH access for sustained health improvement of the rural women and children in Ruy-i-Doab/Samangan province	HELVETAS	402,000	B. HIGH	Samangan
AFG-11/WS/39043/8798	Improved living conditions for remote rural communities through WASH	Caritas Germany (DCV)	983,182	C. MEDIUM	Daykundi
AFG-11/WS/39114/124	Provision of Emergency Drinking Water, Sanitation and Hygiene Education for the natural disaster and conflict affected, and under-served population	UNICEF	10,741,730	A. IMMEDIATE	Multiple locations
AFG-11/WS/39327/14540	Provide life saving water, sanitation and hygiene support to un-served populations in three remote communities in Kohistan district of Faryab province.	AADA	219,350	B. HIGH	Faryab
Sub total for WATER,SANITATION AND HYGIENE			24,683,661		
CLUSTER NOT SPECIFIED					
AFG-11/SNYS/39795/8487	Emergency Response Fund for Afghanistan (projected needs \$8 million)	ERF (OCHA)	-	A. IMMEDIATE	Multiple locations
Sub total for CLUSTER NOT SPECIFIED			-		
Grand Total			678,632,984		

Table V: Summary of requirements (grouped by location)

Consolidated Appeal for Afghanistan 2011 as of 15 November 2010 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by appealing organizations.

Location	Requirements (\$)
Multiple locations	630,667,816
Badakhshan	3,501,637
Badghis	52,000
Baghlan	798,000
Balkh	2,830,550
Bamyan	3,648,200
Daykundi	1,829,082
Faryab	6,776,541
Ghazni	295,519
Ghor	2,227,298
Herat	4,029,548
Hilmand	109,600
Jawzjan	6,945,775
Kabul	4,530,007
Kandahar	1,041,777
Kapisa	1,680,000
Kunduz	151,400
Laghman	850,000
Logar	639,640
Nangarhar	1,422,500
Parwan	538,824
Samangan	2,496,156
Sari Pul	900,000
Wardak	671,114
Grand Total	678,632,984

ANNEX II. PROJECTED HOUSEHOLDS AT RISK OF CONFLICT AND NATURAL DISASTER

Projected number of households³³ affected by conflict and natural disaster

Scenarios		North	North-east	East	South	West	Central	TOTALS	
Best	Natural - low	20,000	4,000	8,000	1,155	2,000	22,000	Natural - low	57,155
	Natural - high	20,000	5,000	15,000	1,155	2,000	22,000	Natural - high	65,155
	Human - low	3,000	2,000	0	3,500	3,000	47,000	Human - low	58,500
	Human - high	3,000	3,000	0	3,500	3,000	47,000	Human - high	59,500
Worst	Natural - low	25,000	10,000	45,000	2,805	5,000	66,000	Natural - low	153,805
	Natural - high	25,000	15,000	60,000	2,805	5,000	66,000	Natural - high	173,805
	Human - low	11,000	5,000	14,688	8,500	18,000	172,000	Human - low	229,188
	Human - high	11,000	7,000	14,688	8,500	18,000	172,000	Human - high	231,188
Most Likely	Natural - low	22,000	8,000	18,000	2,100	3,000	33,000	Natural - low	86,100
	Natural - high	22,000	9,000	50,000	2,100	3,000	33,000	Natural - high	119,100
	Human - low	6,000	3,000	0	5,100	8,500	94,000	Human - low	116,600
	Human - high	6,000	4,500	0	5,100	8,500	94,000	Human - high	118,100

³³ Number of households determined during the 2011 CAP workshops held in six regions from 3-11 October 2010.

ANNEX III. DONOR RESPONSE TO THE 2010 APPEAL**Table VI: Summary of requirements and funding (grouped by cluster)**

Afghanistan Humanitarian Action Plan 2010 as of 15 November 2010 http://fts.unocha.org								
Compiled by OCHA on the basis of information provided by donors and appealing organizations.								
Cluster	Original requirements (\$) A	Revised requirements (\$) B	Carry-over (\$) C	Funding (\$) D	Total resources available (\$) E=C+D	Unmet requirements (\$) B-E	% Covered E/B	Uncommitted pledges (\$) F
COMMON SERVICES	28,398,296	27,064,925	3,601,870	18,490,978	22,092,848	4,972,077	82%	-
EDUCATION	27,093,437	33,144,241	-	689,939	689,939	32,454,302	2%	-
EMERGENCY SHELTER	50,275,661	50,802,560	-	26,403,262	26,403,262	24,399,298	52%	-
FOOD SECURITY AND AGRICULTURE	372,539,155	368,691,762	121,020,622	173,548,706	294,569,328	74,122,434	80%	-
HEALTH	10,673,254	12,702,186	-	6,236,306	6,236,306	6,465,880	49%	-
MULTI-SECTOR	78,208,770	79,714,395	-	15,618,220	15,618,220	64,096,175	20%	-
NUTRITION	8,434,443	8,669,571	-	6,263,336	6,263,336	2,406,235	72%	-
PROTECTION	258,356,564	154,274,534	-	104,782,136	104,782,136	49,492,398	68%	-
WATER, SANITATION AND HYGIENE	36,581,681	39,444,136	-	6,760,816	6,760,816	32,683,320	17%	-
CLUSTER NOT YET SPECIFIED	-	-	-	31,236,361	31,236,361	n/a	n/a	-
Grand Total	870,561,261	774,508,310	124,622,492	390,030,060	514,652,552	259,855,758	66%	-

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 15 November 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

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Table VII: Summary of requirements and funding (grouped by appealing organization)

Afghanistan Humanitarian Action Plan 2010 as of 15 November 2010 http://fts.unocha.org								
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Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Appealing organization	Original requirements	Revised requirements	Carry-over	Funding	Total resources available	Unmet requirements	% Covered	Uncommitted pledges
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)		(\$)
	A	B	C	D	E=C+D	B-E	E/B	F
ACF	800,000	1,847,000	-	2,222,590	2,222,590	- 375,590	100%	-
ACT Alliance	-	38,758	-	38,758	38,758	-	100%	-
ACTED	17,950,083	16,210,941	3,222,751	1,048,493	4,271,244	11,939,697	26%	-
ADA	1,978,205	1,978,205	-	-	-	1,978,205	0%	-
ADEO [Afghanistan]	1,064,000	1,213,308	-	214,308	214,308	999,000	18%	-
Afghanaid	6,293,690	6,293,690	-	449,468	449,468	5,844,222	7%	-
AMI	-	93,392	-	93,322	93,322	70	100%	-
ARAA	340,046	340,046	-	-	-	340,046	0%	-
AREA	692,000	692,000	-	60,000	60,000	632,000	9%	-
Award	-	273,493	-	273,403	273,403	90	100%	-
AWEC	118,812	118,812	-	-	-	118,812	0%	-
AWN	193,000	193,000	-	-	-	193,000	0%	-
BERO	727,600	727,600	-	-	-	727,600	0%	-
BRAC	2,836,000	2,836,000	-	-	-	2,836,000	0%	-
CARE International	1,197,262	1,984,023	-	786,761	786,761	1,197,262	40%	-
CHA	92,320	92,320	-	-	-	92,320	0%	-
CIC	568,577	638,055	-	-	-	638,055	0%	-
CoAR	3,649,208	3,649,208	-	-	-	3,649,208	0%	-
CRS	7,294,090	2,789,697	-	2,789,697	2,789,697	-	100%	-
DACAAR	500,000	2,024,955	-	-	-	2,024,955	0%	-
ERF (OCHA)	-	-	-	2,428,386	2,428,386	n/a	n/a	-
FAO	20,314,060	20,314,060	-	14,828,499	14,828,499	5,485,561	73%	-
HELVETAS	-	200,500	-	200,000	200,000	500	100%	-
IBNSINA	550,000	550,000	-	-	-	550,000	0%	-
IMC UK	1,662,319	1,538,819	-	-	-	1,538,819	0%	-
iMMAP	1,437,184	1,079,290	-	-	-	1,079,290	0%	-
INTERSOS	-	368,340	-	368,340	368,340	-	100%	-
IOM	13,618,465	13,618,465	-	7,716,100	7,716,100	5,902,365	57%	-
IRC	1,700,000	1,700,000	-	1,109,741	1,109,741	590,259	65%	-
MAPA	244,400,000	140,400,000	-	96,202,127	96,202,127	44,197,873	69%	-
MDM	118,513	-	-	-	-	-	0%	-
MEDAIR	1,990,000	1,990,000	-	1,018,436	1,018,436	971,564	51%	-
MERLIN	197,527	552,884	-	454,121	454,121	98,763	82%	-
M-HDR	-	-	-	-	-	-	0%	-
MMRCA	203,280	203,280	-	-	-	203,280	0%	-
NPO-RRAA	1,374,137	1,960,972	-	515,429	515,429	1,445,543	26%	-
NRC	14,038,600	14,038,600	-	7,458,149	7,458,149	6,580,451	53%	-
NRDOAW	-	142,453	-	142,453	142,453	-	100%	-
OCHA	10,105,286	8,595,424	3,601,870	5,948,954	9,550,824	- 955,400	100%	-
OSDR	1,974,720	1,974,720	-	-	-	1,974,720	0%	-
OXFAM GB	9,814,100	9,814,100	-	1,220,741	1,220,741	8,593,359	12%	-
OXFAM Netherlands (NOVIB)	2,565,275	2,494,902	-	373,152	373,152	2,121,750	15%	-

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Appealing organization	Original requirements	Revised requirements	Carry-over	Funding	Total resources available	Unmet requirements	% Covered	Uncommitted pledges
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)		(\$)
	A	B	C	D	E=C+D	B-E	E/B	F
SAF	-	53,179	-	-	-	53,179	0%	-
SC	7,052,896	6,071,267	-	1,441,322	1,441,322	4,629,945	24%	-
SCA	-	837,000	-	700,000	700,000	137,000	84%	-
SHA	1,062,260	-	-	-	-	-	0%	-
SHRDO	118,552	137,427	-	92,115	92,115	45,312	67%	-
SRP	-	383,723	-	383,723	383,723	-	100%	-
STARS	419,138	419,138	-	-	-	419,138	0%	-
TEARFUND	1,115,000	1,115,000	-	400,000	400,000	715,000	36%	-
UMCOR	479,211	-	-	-	-	-	0%	-
UNESCO	110,712	-	-	-	-	-	0%	-
UNFPA	1,438,224	1,359,463	-	1,038,973	1,038,973	320,490	76%	-
UNHCR	104,751,062	106,256,687	-	58,448,180	58,448,180	47,808,507	55%	-
UNICEF	15,595,594	24,794,578	-	6,979,025	6,979,025	17,815,553	28%	-
UNOPS	7,622,995	7,622,995	-	-	-	7,622,995	0%	-
WFP	347,542,420	347,542,420	117,797,871	167,259,597	285,057,468	62,484,952	82%	-
WHO	7,088,838	7,812,926	-	4,600,502	4,600,502	3,212,424	59%	-
ZCO	-	325,667	-	325,667	325,667	-	100%	-
ZOA Refugee Care	3,806,000	4,205,528	-	399,528	399,528	3,806,000	10%	-
Grand Total	870,561,261	774,508,310	124,622,492	390,030,060	514,652,552	259,855,758	66%	-

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 15 November 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table VIII: Total funding per donor (to projects listed in the Appeal)

Afghanistan Humanitarian Action Plan 2010 as of 15 November 2010 http://fts.unocha.org			
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Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
Carry-over (donors not specified)	124,622,492	24%	-
Japan	118,931,444	23%	-
United States	92,082,765	18%	-
Canada	32,162,169	6%	-
European Commission	31,623,787	6%	-
Netherlands	15,849,890	3%	-
Australia	14,053,269	3%	-
Central Emergency Response Fund (CERF)	11,019,952	2%	-
Allocations of unearmarked funds by UN agencies	9,785,594	2%	-
Norway	9,649,151	2%	-
Sweden	9,508,509	2%	-
Germany	8,966,343	2%	-
Denmark	7,515,685	1%	-
Russian Federation	5,000,000	1%	-
Belgium	4,777,397	1%	-
India	3,818,509	1%	-
Finland	3,171,689	1%	-
United Kingdom	2,272,650	0%	-
France	1,391,294	0%	-
Austria	1,336,078	0%	-
Ireland	1,302,319	0%	-
Afghanistan	1,178,410	0%	-
Italy	1,094,675	0%	-
Spain	1,045,305	0%	-
Luxembourg	912,083	0%	-
Others	1,581,093	0%	-
Grand Total	514,652,552	100 %	-

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 15 November 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table IX: Non-Appeal funding (per IASC standard sector)

Other humanitarian funding to Afghanistan 2010
as of 15 November 2010
<http://fts.unocha.org>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Sector	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
COORDINATION AND SUPPORT SERVICES	11,141,155	8%	-
ECONOMIC RECOVERY AND INFRASTRUCTURE	7,832,466	6%	-
EDUCATION	280,987	0%	-
FOOD	4,850,279	4%	-
HEALTH	2,509,696	2%	-
MINE ACTION	3,321,592	2%	-
PROTECTION/HUMAN RIGHTS/RULE OF LAW	3,008,569	2%	-
SAFETY AND SECURITY OF STAFF AND OPERATIONS	215,372	0%	-
SHELTER AND NON-FOOD ITEMS	3,357,144	2%	-
WATER AND SANITATION	5,481,286	4%	-
SECTOR NOT YET SPECIFIED	93,356,291	69%	7,828,825
Grand Total	135,354,837	100%	7,828,825

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 15 November 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

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Table X: Total humanitarian assistance per donor (Appeal plus other*)

Afghanistan 2010
as of 15 November 2010
<http://fts.unocha.org>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
Japan	146,315,444	23%	-
United States	129,728,351	20%	-
Carry-over (donors not specified)	124,622,492	19%	-
European Commission	50,688,375	8%	7,828,825
Canada	32,627,467	5%	-
Germany	25,954,189	4%	-
Australia	21,450,543	3%	-
Norway	18,463,840	3%	-
Netherlands	15,849,890	2%	-
Denmark	11,110,856	2%	-
Central Emergency Response Fund (CERF)	11,019,952	2%	-
Sweden	10,146,171	2%	-
Allocations of unearmarked funds by UN agencies	9,785,594	2%	-
Ireland	6,480,800	1%	-
Belgium	6,126,925	1%	-
Russian Federation	5,000,000	1%	-
France	4,671,286	1%	-
India	3,818,509	1%	-
United Kingdom	3,512,709	1%	-
Finland	3,352,591	1%	-
Luxembourg	1,735,668	0%	-
Italy	1,602,934	0%	-
Austria	1,601,330	0%	-
Afghanistan	1,178,410	0%	-
Spain	1,045,305	0%	-
Poland	500,000	0%	-
Switzerland	475,559	0%	-
Allocation of funds from Red Cross / Red Crescent	325,859	0%	-
Czech Republic	273,225	0%	-
Private (individuals & organisations)	233,162	0%	-
Korea, Republic of	117,600	0%	-
Romania	75,301	0%	-
Croatia	75,000	0%	-
Lithuania	42,052	0%	-
Grand Total	650,007,389	100%	7,828,825

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

* Includes contributions to the Consolidated Appeal and additional contributions outside of the Consolidated Appeal Process (bilateral, Red Cross, etc.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 15 November 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

ANNEX IV. ACRONYMS AND ABBREVIATIONS

ABR	Afghan Bureau for Reconstruction
ACF	<i>Action Contre la Faim</i> (Action Against Hunger)
ACTED	Agency for Technical Cooperation and Development
ADA	Afghanistan Development Association
AGDM	age, gender, and diversity mainstreaming
AGE	anti-government elements
AIHRC	Afghan Independent Human Rights Committee
ANC	ante-natal care
ANDMA	Afghanistan Natural Disaster Management Authority
ANDS	Afghanistan National Development Strategy
ANSO	Afghan NGO Safety Office
APC	Afghan Protection Cluster
ARCS	Afghanistan Red Crescent Society
BHCs	basic health centres
BPHS	basic primary health services
CAP	Consolidated Appeal or Consolidated Appeal Process
CARE	Cooperative for Assistance and Relief Everywhere
CBOs	community-based organizations
CERF	Central Emergency Response Fund
CFR	case fatality rate
CHA	Coordination of Humanitarian Assistance
CHW	community health worker
CIC	Children in Crisis
CIDA	Canadian International Development Agency
CMAM	community-based management of acute malnutrition
CPAN	Child Protection Action Network
CPIE	Country Programme Interim Evaluation
DACAAR	Danish Committee for Aid to Afghan Refugees
DEWS	Disease Early Warning System
DMC	Department of Mine Clearance
DoRR	Department of Refugees and Repatriation
DRR	disaster risk management
ECHO	European Commission Directorate-General for Humanitarian Aid and Civil Protection
EPI	expanded programme on immunization
EPR	emergency preparedness and response
ERC	Emergency Relief Coordinator
ERF	Emergency Response Fund
ERU	Emergency Response Units
ERW	explosive remnants of war
ESC	Emergency Shelter and Non-Food Items Cluster
ETC	Emergency Telecommunications Cluster
EWS	early warning system
FAO	Food and Agriculture Organization of the United Nations
FFA	food-for-asset
FFW	food-for-work
FSAC	Food Security and Agriculture Cluster
GAM	global acute malnutrition
GoA	Government of Afghanistan
GTZ	<i>Deutsche Gesellschaft für Technische Zusammenarbeit</i> (German Technical Cooperation Society)
HAP	Humanitarian Action Plan
HCT	Humanitarian Country Team
HDI	human development index
HLP	housing, land and property
IACP	Inter-agency Contingency Plan
ICAO	International Civil Aviation Organization
ICT	information and communication technologies
IDP(s)	internally displaced person (people)

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IED	improvised explosive device
IEHK	interagency emergency health kit
IMF	international military forces
IMSMA	Informational Management System of Mine Action
IMU	Information Management Unit
IOM	International Organization for Migration
ISAF	International Security Assistance Force
IYCF	infant and young children feeding
LAOA	Legal Aid Organization of Afghanistan
LAS	Land Allocation Schemes
MACCA	Mine Action Coordination Center of Aghanistan
MAM	moderate acute malnutrition
MERLIN	Medical Emergency Relief International
MICS	multiple indicator cluster survey
MMR	maternal mortality rate
MoE	Ministry of Education
MoLSAMD	Ministry of Labour, Social Affairs, Martyrs and Disabled
MoPH	Ministry of Public Health
MoRR	Ministry of Refugees and Repatriation
MRE	mine risk education
MRM	monitoring and reporting mechanism
MRRD	Ministry of Rural Rehabilitation and Development
MUAC	mid-upper-arm circumference
NFIs	non-food items
NGO(s)	non-governmental organization(s)
NRC	Norwegian Refugee Council
NRVA	National Risk and Vulnerability Assessment
OCHA	Office for the Coordination of Humanitarian Affairs
OHCHR	Office of the High Commissioner for Human Rights
ORS	oral rehydration salt
OSDR	Organization for Sustainable Development and Research
Oxfam NOVIB	<i>Nederlandse Organisatie voor Internationale Bijstand (Oxfam Netherlands)</i>
PC	Protection Cluster
RIDPTF	Regional Internally Displaced Person Task Force
RITFs	Regional IDP Task Forces
RRI	Refugee Returnee and IDP
SAM	severe acute malnutrition
SC	Save the Children
SC-UK	Save the Children-United Kingdom
SCWAM	Supreme Council for Water Affairs Management
UAE	United Arab Emirates
UN	United Nations
UNAMA	United Nations Assistance Mission in Afghanistan
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNDSS	United Nations Department of Safety and Security
UNESCO	United Nations Educational, Scientific, and Cultural Organization
UNFPA	United Nations Population Fund
UN-HABITAT	United Nations Human Settlements Programme
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
UNOPS	United Nations Office for Project Services
VAM	vulnerability analysis and mapping
WASH	water, sanitation and hygiene
WFP	World Food Programme
WHO	World Health Organization
WSG	Water and Sanitation Group

Consolidated Appeal Process (CAP)

The CAP is a tool for aid organizations to jointly plan, coordinate, implement and monitor their response to disasters and emergencies, and to appeal for funds together instead of competitively.

It is the forum for developing a strategic approach to humanitarian action, focusing on close cooperation among host governments, donors, and non-governmental organizations (NGOs), the International Red Cross and Red Crescent Movement, International Organization for Migration (IOM) and United Nations agencies. As such, the CAP presents a situation analysis, assessment of humanitarian needs, and response plans. It encompasses the humanitarian aid programme cycle:

- Strategic planning leading to a Common Humanitarian Action Plan (CHAP)
- Resource mobilization leading to a Consolidated Appeal or a Flash Appeal
- Coordinated programme implementation
- Joint monitoring and evaluation
- Revision, if necessary
- Reporting on results

The CHAP is the core of the CAP: it is a strategic plan for humanitarian response in a given country or region. The CHAP includes:

- A common analysis of the context in which humanitarian action takes place
- An assessment of needs
- Best-case, worst-case, and most likely scenarios
- A clear statement of longer-term objectives and goals
- Prioritized response plans, including a detailed mapping of projects to cover all needs
- A framework for monitoring the strategy and revising it if necessary

Under the Humanitarian Coordinator's leadership, and in consultation with host governments and donors, the Humanitarian Country Team develops the CHAP at the field level. This team includes Inter-Agency Standing Committee (IASC) members and standing invitees (UN agencies, IOM, the International Red Cross and Red Crescent Movement, and NGOs that belong to ICVA, Interaction or SCHR). Non-IASC members, such as national NGOs, can also be included.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal document. The document is launched globally near the end of each year to enhance advocacy and resource mobilization. An update, known as the Mid-Year Review, is presented to donors the following July.

Donors generally fund appealing agencies directly in response to project proposals listed in appeals – the CAP does not contain a funding pool or channel. The **Financial Tracking Service (FTS, fts.unocha.org)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of appeal-funded needs and worldwide donor contributions.

In summary, the CAP is how aid agencies join forces to provide people in need with the best available protection and assistance, on time.

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