HUMANITARIAN RESPONSE PLAN
MID-YEAR REVIEW
OF FINANCING, ACHIEVEMENTS AND RESPONSE CHALLENGES

AFGHANISTAN

184 MILLION
US$ RECEIVED AS OF JUN 2017

US$ 184m received
US$ 599m requested

2.4 MILLION
BENEFICIARIES ASSISTED

2.4m reached
5.2m to be assisted
6.6m people in need

Photo: Jim Huylebroek
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OVERVIEW OF THE CHANGES IN CRISIS: SITUATIONAL MONITORING

**CONFLICT DISPLACED**

179,000

**NATURAL DISASTER AFFECTED**

3,500,000

**CIVILIAN CASUALTIES**

5,000

**AFGHAN RETURNEES**

387,000

**ARMED CLASHES AND AIR STRIKES**

**AFGHAN RETURNEES FROM IRAN & PAKISTAN**

**CONFLICT AND RELATED DISPLACEMENTS**

**NATURAL DISASTERS AND RELATED DISPLACEMENTS**

**TRAUMA CASES**

**CONFLICT INDUCED DISPLACEMENT**

**Number of IDPs by province (thousands)**

Number of IDPs by province (thousands)

Number of IDPs by province (thousands)

Number of IDPs by province (thousands)

Notes: All cumulative figures and maps cover 1 Jan to 30 Jun 2018. (1) Conflict displacement figures for 1 Jan to 30 Jun 2018, OCHA; IDP figures prior to Jan 2016 from UNHCR. (2) Slow and sudden onset natural disasters, OCHA, IOM, FSAC, Jan-Jun 2018. (3) A civilian casualty is defined as a civilian killed or injured resulting directly or indirectly from conflict related violence. Data source: UNAMA Human Rights Unit, Jan-Jun 2017. (4) IOM (undocumented Afghan returnees), UNHCR (Afghan refugee returnees). (5) Various sources. (6) Health cluster.
The humanitarian situation in Afghanistan worsened in the first half of 2018, primarily due to the most severe drought since 2011 and increased violence throughout Afghanistan. The humanitarian response during the first half of the year has been hampered by underfunding and insecurity. The drought – as a result of the La Niña phenomenon, associated with reduced rain and snowfall levels – has left more than 9.9 million people food insecure, (integrated phase classification/IPC 3) and 3.6 million people projected to be at Emergency level IPC 4 in the period November 2018 to February 2019. Following revisions to the 2018 HRP, a total of almost 3.5 million food insecure people in 20 provinces of Afghanistan were identified as having acute humanitarian food needs. Over 112,000 Afghans were displaced from their homes in Badghis, Hirat and Ghor provinces, the worst-affected provinces, to places where they could seek help in Hirat city and Qala-e-Now city. The response to the drought in areas of origin was slow, which contributed to a displacement crisis in the Western region, where the shelter response has been inadequate to date, with people continuing to live in scattered sites in dire makeshift housing.

Civilian casualties remained at similar levels to 2016 and 2017 although there have been worrying trends in terms of the way most people were killed or injured, with increasing numbers of people affected by IEDs (both suicide and non-suicide) and aerial bombardment compared to previous years. UNAMA recorded 5,122 civilian casualties (1,692 deaths and 3,430 injuries) between January and June 2018, only a slight decrease of three percent from 2017 levels. Almost half (45 per cent) of the civilian casualties were caused by suicide and non-suicide Improvised Explosive Devices (IED) attacks used by NSAGs, an increase from 2017. Ground engagements were the second cause of civilian casualties (29 per cent), followed by targeted and deliberate killings (eight per cent), aerial operations (eight per cent) and explosive remnants of war (four per cent), mostly affecting civilians located in Kabul, Nangarhar, Faryab, Helmand and Ghazni provinces. Casualties in Nangarhar Province more than doubled (1,494) compared to 2017 levels.

Asymmetric tactics on both sides of the conflict, including search operations, suicide and complex attacks, as well as assaults on solitary outposts/checkpoints, contributed to more than 61,400 trauma cases. During the reporting period, it was possible for most trauma cases to be treated in healthcare facilities in the province where the injuries were sustained. Of these, almost 23,600 cases were treated in First Aid Trauma Posts (FATPs), six per cent below 2017 levels.

The peace process in Afghanistan has been characterized by a “talking” phase, in which President Ashraf Ghani offered to engage in talks with the Taliban, without preconditions; followed by a more recent ceasefire offer to the Taliban over Eid al-Fitr. At the same time, the security situation remained highly unstable, with 50 security incidents in 21 provinces on the day of a Taliban spring offensive announcement in April 2018. Meanwhile, Islamic State Khorasan (ISK) activities have been intensifying in urban areas such as Kabul and Jalalabad, particularly against schools and education officials, but also against voter registration centres and mosques, through suicide and complex attacks. In Nangarhar Province, for example, half of the civilian casualties were produced by ISK IED attacks. Some 13 incidents were related to ISK threats on girls schools, in retaliation to air strikes against ISK strongholds. The worsening insecurity in Nangarhar, arising from ISK attacks on government facilities, fighting between ISK and the Taliban, government operations against NSAG and cross-border shelling, has led to a significant number of displaced people, many of whom remain in protracted crisis, increasing pressure on already overburdened systems (health, education, jobs, rents, crime rates) that are struggling to deliver. In addition, the insecurity had led to a limited coverage of needs in contested areas, with most I/NGOs unwilling or unable to intervene due to security concerns.

The levels of insecurity, particularly the violent nature of attacks between NSAG and government forces, displaced over 175,000 people during the reporting period. According to the latest Special Inspector General for Afghanistan Reconstruction (SIGAR) report, during the reporting period, there were 229 districts under the control or influence of the Afghan Government which equates to 56 per cent of the total number of districts and is at a similar level to 2017. According to the same report, 65 per cent of the Afghan population live in government-controlled or influenced areas. If the current levels of displacement continue and there is fresh violence associated with the October elections, it is projected that HRP displacement projections for 2018 of 450,000 people, are likely to be reached, if not surpassed.
Protection issues continued to remain at the centre of the humanitarian crisis. In addition to the physical safety risks to civilians living in areas of conflict and the increasing pressures facing those living in displacement, people have had to endure significant interruptions to vital services as a result of the closure of healthcare facilities and attacks on education facilities. Over 544,000 children (203,000 girls and 341,000 boys) have been deprived of education as a result of over 131 attacks on schools, many of which have been used as voter registration centres. This is double the number of attacks in the first half of 2017. The risks of child marriage and child labour are compounded for these out of school children, who lack the institutional protection of schools. Additionally, children now represent a staggering 89 per cent of all victims of Explosive Remnants of War (ERW).

The latest Aid Worker Security Report indicates that Afghanistan is the most dangerous country in the world for aid workers, ahead of South Sudan and Syria. During the first half of 2018, the humanitarian space continued to deteriorate, after an increased number of incidents targeting aid workers. The first half of 2018 registered a 20 per cent increase in the total number of incidents against aid workers, assets and humanitarian activities, from 142 during the first half of 2017 to 171 in 2018. Similarly, there were 13 aid workers killed, an increase of 44 per cent on last year, while the number of aid workers injured more than doubled, from 10 to 23 in the first half of 2018. The number of aid worker abductions also doubled, from 20 in the first half of last year to 40 in the first half of 2018. Healthcare staff have also faced increased risks as a result of security incidents at healthcare centres (closures/occupations) with 80 incidents registered in 2018, 16 per cent more than 2017. As humanitarian access to people located in hard to reach areas has increased, there has also been an increase in safety incidents for aid workers (kidnapping, threats, killings, injuries).

While returns from Pakistan decreased significantly, new arrivals from Iran simultaneously accelerated, with almost 429,000 Afghans crossing the Iranian border between January and June 2018, more than double the number of returns over the same period in 2017. Returns from Pakistan are down to 20,301 people, dramatically down on the same period last year. The most vulnerable 20 per cent of those returning receive humanitarian assistance, in particular unaccompanied migrant children (now the largest group amongst those with vulnerabilities), single females and female headed households, and emergency medical cases. The overwhelming trend of return from Iran is associated with the downturn of the Iranian economy, where the local currency has plunged over 50 per cent in the past six months against the US Dollar, affecting employment opportunities for Afghans, who are no longer able to save and send home remittances. The returns have particularly overwhelmed the humanitarian response at the border crossing point at Milak (Nimroz), where Ministry of Repatriation and Refugee staff experienced difficulties in keeping up with the registration and secondary vulnerability assessments. The inadequate facilities at the border point are resulting in many Afghans bypassing registration and not receiving the emergency assistance they need. The two crossings in Nimroz and Hirat have had to cope with a 124 per cent increase in returnees in 2018, compared to 2017. The returns have also affected the capacity of host communities to absorb the new arrivals. Despite the unprecedented arrival levels, at the end of the reporting period, IOM has had to reduce its provision of humanitarian assistance for returnees at the border crossing points due to insufficient funding. This reduction has potentially had a life-altering impact on thousands of returning Afghans who are no longer able to receive the humanitarian assistance they need.

Lastly, OCHA has initiated the Whole of Afghanistan Assessment, to inform the 2019 Humanitarian Needs Overview. As part of the inter-sectoral needs assessment, multiple population groups will be canvassed through a household-level survey, key informant interviews in hard to reach areas and focus group discussions to expand and clarify certain quantitative findings.
STRATEGIC PLANNING AND BUDGET REVISIONS
Increasing humanitarian needs have necessitated two revisions to the multi-year Humanitarian Response Plan since the beginning of the year. The first revision was related to the drought in May 2018 where the main changes included the addition of 2.2 million drought-affected people in need, increasing the total number of people in need from 3.3 million to 5.5 million people, of which 4.2 million were targeted for assistance.

The second revision of the HRP, at the mid-year review point, was focused on updating the drought PIN figure to 3.6 million. People in need estimates for sudden onset disasters and returnees were revised down from 670,000 to 360,000 due to a reduced number of natural disasters and a reduction of returnees in need from Pakistan. These changes brought the total PIN figure to 6.6 million and the number of people to be assisted to 5.2 million.

The main operational implications of these revisions were in the following sectors: For FSAC, needs increased from 1.9 million to five million people as a result of the unprecedented drought; for health needs increased from 1.6 million to 2.6 million also as a result of the drought; for WASH there was an increase from 1.1 million to two million people in need, also as a result of the drought. During the first six months of 2018, the humanitarian community reached almost 2.4 million people out of a revised Afghanistan Humanitarian Response Plan. Out of the 2.4 million people reached, 51 per cent are children and 28 per cent are women.

Almost US$178 million was received out of a total drought-revised requirement of $593 million or 30 per cent of the funds requested. During the drought revision done in May 2018, clusters increased their requirements for the drought response: FSAC increased its requirements from $90.6 million to $185 million, a figure that was further increased at the mid-year review point to $231 million; Nutrition requirements increased from $55.7 million by $7.9 million to US$62.4 million; WASH raised their requirements by $14.2 million at the drought revision and reduced its requirements at the mid-year review point to $33.3 million; and the ESNFI cluster kept their initial requirements of $53 million for the drought response. In parallel, the Health cluster increased its requirements to $48.7 million, by $7.1 million, allowing for additional drought-affected people to be targeted. The Protection cluster maintained its initial requirements of $66.5 million, made up of $59.4 million for cluster activities and $7.1 million specifically for the refugee response.

The bulk of the revisions are the result of the drought, for which an additional 2.2 million people are now being targeted by the FSAC cluster; 870,000 people are targeted by the WASH cluster; one million people are targeted by the health cluster; 60,000 people are targeted by the ESNFI cluster; 100,000 people are targeted by the Nutrition cluster; and an additional 40,000 people are targeted by EiE partners.
The overall number of people in need at the time of the original HRP was 3.3 million people. The figure was updated to 4.2 million people in May 2018, as a result of the drought revision, with the addition of 2.2 million people by the FSAC cluster. The original number of people in need was further updated at the mid-year review point to 6.5 million, when the FSAC cluster further updated its people in need estimate with an additional 3.1 million people, compared to original needs of 1.9 million people.

The overall number of people projected to be displaced by the conflict in 2018, remains the same at the mid-year review point, at 450,000 people, including prolonged IDPs.

The overall number of people in need as a result of natural disasters has increased to 3.64 million, from 290,000 people. Within the natural disaster-affected people, there are two subsets. The first is people who are in need as a result of sudden onset disasters (floods/avalanches) which stood at 180,000 people at the time of the original HRP and has since been revised down to 80,000 people in need due to reduced incidents in the first half of the year and the annual trend that these disasters are less likely in the second half of the year. The second group is people in need as a result of slow onset disasters which stood at 110,000 people in the original version of the HRP and has now increased to 3.56 million as a result of the drought.

As of the mid-year review point, IOM projects 670,000 total returns from Pakistan (30,000) and Iran (640,000) in 2018 - a figure that represents a much lower return from Pakistan and a much higher one from Iran than originally anticipated. According to IOM estimates, up to 20 per cent of the returnees from Iran need humanitarian assistance, including unaccompanied minors, single women, and women-headed households. At the mid-year review point only 16,000 of returning Afghans could be assisted by IOM, with many missing out on much-needed assistance due to funding restrictions. Thus accounting for the number of people already assisted and the number of people that could not be assisted, IOM estimated that 84,000 persons will need humanitarian assistance by end of 2018.

Similarly, UNHCR estimates that total refugee returns in 2018 will range between 15,000 and 20,000 persons. In the first half of 2018 only 7,951 registered Afghan refugees repatriated to the country, with the majority arriving from Pakistan (92 per cent) and smaller numbers coming from Iran and other countries. Returns have been significantly lower compared to the 33,325 people who returned during the first half of 2017. With improved protection and socio-economic conditions in Pakistan, including the extension of the validity of Proof of Registration Cards by the Government of Pakistan until 30 September 2018, and considering ongoing security concerns in Afghanistan and the current drought, returns for the year are likely to remain lower than initially expected.
# Revised Needs and Targets

## Revised Needs and Targets

### People in Need

<table>
<thead>
<tr>
<th>Sector</th>
<th>Immediate needs</th>
<th>Chronic Needs</th>
<th>Conflict displaced</th>
<th>Conflict affected</th>
<th>Nat. dis. affected</th>
<th>Slow onset</th>
<th>Sudden onset</th>
<th>Afghan returnees</th>
<th>Host communities</th>
<th>Refugees &amp; asylum seekers</th>
<th>% Men</th>
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<td><strong>22%</strong></td>
<td><strong>57%</strong></td>
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1 Education in Emergencies  2 Emergency Shelter & Non-food Items  3 Food Security & Agriculture Cluster  4 Water, Sanitation & Hygiene  5 Multi-purpose Cash

### People to Receive Assistance

<table>
<thead>
<tr>
<th>Sector</th>
<th>Projected assistance required</th>
<th>People to receive assistance</th>
<th>Conflict displaced</th>
<th>Conflict affected</th>
<th>Nat. dis. affected</th>
<th>Slow onset</th>
<th>Sudden onset</th>
<th>Afghan returnees</th>
<th>Host communities</th>
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<th>% Men</th>
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<td>21%</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>6.57M</strong></td>
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<td><strong>0.38M</strong></td>
<td><strong>1.54M</strong></td>
<td><strong>2.69M</strong></td>
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<td><strong>0.28M</strong></td>
<td><strong>0.13M</strong></td>
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<td><strong>22%</strong></td>
<td><strong>22%</strong></td>
<td><strong>56%</strong></td>
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</table>
The ongoing drought has implications for the Education in Emergencies Working Group (EiEWG) humanitarian response in 2018, with targets and funding needing to be revised accordingly.

Education in Emergencies remains underfunded, with only 26.7 per cent of total requirements according to FTS at the end of the reporting period. The limited funding has constrained the EiEWG from reaching its 2018 targets, thereby jeopardizing the future of children who remain out of school. However, the EiEWG continues to advocate with donors and other partners to mobilise more funds for education. Also, an Education Cannot Wait (ECW) multi-year proposal was recently submitted to the secretariat for an education response in Afghanistan, for which funds are yet to be committed.

**Emergency Shelter & Non-Food Items**

As of June 2018, the cluster (excluding refugee requirements) had received US$9.9 million against its initial requirement of $46.5 million, 54 per cent below funding levels at the same time in 2017. Moreover, the cluster was only able to assist a total of 235,737 people against the total target of 720,000 people, or 33 per cent compared to 39 per cent of people who were reached during the same period in 2017. While the cluster continues to make efforts to solicit bilateral donor funding, it continues to face challenges in receiving accurate funding reports from some partner agencies due to their internal policies. However, with current trends, especially the limited funds being received for the upgrading of shelter and medium-term shelter support, the cluster might soon need to revise its budgets and targets related to transitional shelters for the rest of the year.

The cluster’s overall requirements for 2018 increased by $6.5 million to respond to drought affected people, bringing the total ask to $53 million. Given that $9.9 million has already been received, the cluster requires a total of $36.6 million for the remainder of 2018 and will continue to prioritise the following activities, including responding to drought-induced displacements and promoting multi-sectoral responses in coordination with the WASH, FSAC and Protection clusters:

- Provision of emergency shelter and NFI including winterization assistance through the primary modality of cash assistance, as well as in-kind support where cash-based interventions are not feasible.
- Mitigation of further protection risks by providing safer and more dignified living conditions through the upgrading of existing shelters that are in poor condition, especially for the upcoming winter. This will include support to construct solarised verandas to increase insulation and reduce the cost for heating materials.
- Enhancing response capacities in the field including developing contingency plans, pre-positioning of emergency shelter materials and NFI in strategic locations, building capacity, and strengthening coordination mechanisms at the field level.
- Monitoring and reporting, conducting assessments and post-distribution monitoring to ensure an evidence-based response, producing information management products which transparently communicate progress against needs and targets.
- Supporting efforts toward durable solutions through the provision of tools, materials and technical support for transitional shelter construction, integrated programming with other clusters, linkages with livelihood actors and advocacy, as well as strengthening coordination with national and local authorities.
Overall HRP requirements for the cluster have been revised up to US$231 million, with the inclusion of an additional 3.5 million people affected by the drought, of whom 2.5 million people are to be assisted. Of the total amount, only $27 million, or 12 per cent, has so far been received during the reporting period, although additional funds are in the process of being confirmed and will be reflected on FTS in due course.

The cluster’s strategic response has changed significantly since the HRP was originally devised because of the recent impact of the drought in Afghanistan. Limited or failed harvests, as well as reduced livestock production, led to food insecurity and reduced income for households reliant on agriculture, livestock and agricultural labour. The revised food security response includes support to agriculture, livestock farmers and agricultural labourers. Based on the estimated drought severity impact across the 20 most affected provinces, the revised cluster plan includes food assistance to an additional 2.5 million rural people at risk of severe food insecurity. Assistance will be in the form of in-kind food or cash-based transfers, costing up to $14 million per month, for a maximum of six months - a total cost of $84 million. Thus, of the six-month response it is expected that four months i.e. ($56 million) will be spent during the remaining part of 2018, while up to $28 million will be used in 2019. Another US$10.7 million is requested for livelihoods protection support in 2018. This will cover the cost of feed, vaccination and treatment for livestock protection, as well as seeds and fertilisers to support agriculture. The cluster is planning to provide four months of this assistance in 2018 and two months in early 2019, based on when seasonal needs are highest.

In view of the current humanitarian situation, for the remainder of 2018 the cluster will focus on the provision of emergency health services, including trauma care to those affected by conflict and drought in 72 priority districts, as well as addressing the public health risks from emergencies, particularly the control of communicable diseases. From earlier programming, the cluster has identified a significant gap in post-trauma rehabilitation (prosthetics, physiotherapy) and post-conflict psychosocial support. The Health cluster has expanded its priorities under trauma care to include rehabilitation and psychosocial support in health emergencies to cover the full spectrum of trauma care. These will be incorporated into the overall response plan.

Given the increased population affected by drought, conflict, displacement and increased numbers of returnees, the Health cluster now estimates the number of people in need of assistance is 2.6 million people, up from 1.6 million people when the HRP was originally developed. With this expanded case load, the replenishment and stockpiling of emergency supplies and kits will remain a central priority to allow for the timely delivery of health assistance.

The existing disease early warning system has been very useful in the early detection of and timely response to outbreaks, as well as in providing trend data which can be used for targeting, programming and contingency planning. In the second half of 2018, the cluster will further strengthen these surveillance systems and continue to respond to outbreaks, particularly in drought-affected areas.

As noted above, 2018 has seen an unprecedented number of attacks on healthcare facilities. The Health cluster has prioritised awareness of international humanitarian law and will continue to closely monitor attacks and their impact on access to health services. In 2018, the Health cluster will standardise a matrix to report on health-related attacks to improve the quality of this information.
**NUTRITION**

Given the significant decline in the number of returnees from Pakistan, progress in the provision of life-saving emergency nutrition services fell short of the originally planned targets. Hence, the following revision is proposed under cluster Objective 1 (Deliver timely life-saving nutrition services for vulnerable population groups affected by new crises, focusing on appropriate infant and young child feeding practices in emergencies, micronutrient interventions, nutritional supplementation and optimal maternal nutrition.)

<table>
<thead>
<tr>
<th>ACTIVITIES</th>
<th>ORIGINAL TARGET</th>
<th>REVISED TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number and proportion of children 6-59 months among new crisis affected populations who received vitamin A supplementation</td>
<td>43,151</td>
<td>10,788</td>
</tr>
<tr>
<td>Number and proportion of returnee children 6-59 among new crisis affected populations screened for acute malnutrition</td>
<td>43,151</td>
<td>10,788</td>
</tr>
<tr>
<td>Number and proportion of boys and girls aged 6-59 months and pregnant and lactating women at risk of acute malnutrition among new crisis affected populations who received BSFP</td>
<td>53,359</td>
<td>13,340</td>
</tr>
<tr>
<td>Number and proportion of mothers with children 0-23 months among new crisis affected population who received counseling on IYCF in Emergency optimal practices</td>
<td>49,248</td>
<td>12,312</td>
</tr>
</tbody>
</table>

The revision in the target for activities under Objective 1 results in a reduction of funding requirements by US$1.18 million from the total requirement of $63 million.

**PROTECTION**

While the overall 2018-2021 HRP response plan remains relevant to addressing the Protection cluster’s strategic priorities for the second half of 2018, it is expected that the focus of some interventions will be recalibrated in order to respond to newly identified factors, especially the current drought and the possible escalation in attacks against schools and other violations of IHL, especially around the time of the parliamentary elections. As the cluster’s HRP response is currently underfunded (although a significant portion of the funding remains under ‘sector not-reported’ on FTS), mobilization of resources to fill significant funding gaps is an outstanding priority for the cluster. Sensitization of partners on the need to report to FTS is required to overcome this challenge. In recognition of this funding shortfall, the cluster managed to secure part of the 2018 CHF second Standard Allocation ($2 million) to respond to the protection needs of drought-affected communities. At the same time the cluster has been engaging bilaterally with different donors to mobilise resources on the possibility of filling significant response gaps, especially for child protection and gender-based violence-related needs.

The parliamentary elections planned in October 2018 are an unknown factor in terms of the operational landscape with the possibility of growing levels of political tensions, conflict and volatility which may exacerbate access constraints. The extent to which the elections might expose civilians to heightened protection risks, especially IHL and HR violations, forced displacement and restricted access to basic services, especially healthcare and education, is difficult to predict, however heightened operational and financial preparedness is needed to provide a relevant and timely response if required, especially through prevention and mitigation initiatives.

Stronger linkages between the Health and Protection clusters are also sought on relevant issues of common interest, such as the development of a comprehensive disability and victim assistance strategy and response; enhanced operational and planning integration around GBV response; and the development of a common advocacy and resource mobilization strategy to address IHL violations related to attacks on schools and clinics. Moreover, engagement with health actors would also be required to explore the possibility of establishing a Physical Rehabilitation and Disability Working Group to lead a more coordinated response on this issue.

Moreover, considering the highly negative impact of explosive devices on civilians due to lack of awareness and proper marking during the reporting period, Mine Action partners would be interested to include mine/ERW marking in the list of HRP activities, which would not require any budget revision.

As of 30 June 2018, the cluster had received $6.3 million against its total HRP requirement of $67 million, including refugees, which represents a 63 per cent funding decrease compared to the same period in 2017. As such, the Protection sector is only 10.7 per cent funded in relation to its overall HRP requirements for 2018. The cluster requires a total of almost US$60 million up to the end of year, of which a UNHCR cash grant makes up $19 million and IOM $11 million.
In line with the ICCT plan and HCT instructions, WASH cluster partners have revised their HRP targets to accommodate the urgent needs of 980,000 drought-affected people who risk displacement if water scarcity is not addressed in a timely manner. Key achievements include:

1. 1.63 million people reached with drinking water as per cluster standard: a 980,000 person increase from the original HRP target of 650,000.
2. 500,000 people reached with sanitation facilities as per cluster standard: a 120,000 person increase from the original HRP target of 380,000.
3. 1.4 million people reached with hygiene kits and hygiene promotion messages as per cluster standard: a 750,000 person increase from the original HRP target of 750,000.

Based on revised caseloads and targets, the WASH cluster proposes to increase its requirements to US$39 million from US$24 million in the original HRP (already approved and included in the revised HRP 2018-2021).

The budget requirements and PiN figure for MPC will not change, as most of the changes related to the drought are covered under FSAC in the drought-related HRP revision that has already been already published. Any further changes in PiN or budget requirements for the drought will also be captured under FSAC.

UNHCR is increasingly seeking to engage development actors from the international community and advocates for the inclusion of refugees in Afghanistan’s national development programmes.
PROGRESS AGAINST

STRATEGIC AND CLUSTER OBJECTIVES
REVISED STRATEGIC AND CLUSTER OBJECTIVES

NORTH WAZIRISTAN AGENCY

- Number of beneficiaries supported (thousands)
- Pakistan refugee movement
- Afghan refugee and undocumented Afghan returns enter from Iran and Pakistan

Source: Cluster partners

CONFLICT SEVERITY

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Target</th>
<th>Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education in Emergencies</td>
<td>0.4m</td>
<td>0.17m</td>
</tr>
<tr>
<td>Emergency Shelter &amp; NFIs</td>
<td>0.7m</td>
<td>0.24m</td>
</tr>
<tr>
<td>Food Security &amp; Agriculture</td>
<td>3.8m</td>
<td>1.61m</td>
</tr>
<tr>
<td>Health</td>
<td>1.8m</td>
<td>0.45m</td>
</tr>
<tr>
<td>Nutrition</td>
<td>0.7m</td>
<td>0.22m</td>
</tr>
<tr>
<td>Protection</td>
<td>1m</td>
<td>0.39m</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>1.6m</td>
<td>0.5m</td>
</tr>
<tr>
<td>Multi-Purpose Cash</td>
<td>0.3m</td>
<td>0.14m</td>
</tr>
<tr>
<td>Refugee Chapter</td>
<td>0.1m</td>
<td>0.08m</td>
</tr>
<tr>
<td>TOTAL</td>
<td>5.2m</td>
<td>2.4m</td>
</tr>
</tbody>
</table>

* Although steps have been taken to reduce double counting of beneficiaries across the clusters, some duplication may still exist.

** Includes assistance to returnees and IDPs displaced prior to Jan 2018.

AVAILABLE (US$)

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Target</th>
<th>Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education in Emergencies</td>
<td>US$29m</td>
<td>US$30m</td>
</tr>
<tr>
<td>Emergency Shelter &amp; NFIs</td>
<td>US$47m</td>
<td>US$53m</td>
</tr>
<tr>
<td>Food Security &amp; Agriculture</td>
<td>US$91m</td>
<td>US$231m</td>
</tr>
<tr>
<td>Health</td>
<td>US$41m</td>
<td>US$49m</td>
</tr>
<tr>
<td>Nutrition</td>
<td>US$56m</td>
<td>US$62m</td>
</tr>
<tr>
<td>Protection</td>
<td>US$59m</td>
<td>US$67m</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>US$24m</td>
<td>US$39m</td>
</tr>
<tr>
<td>Multi-Purpose Cash</td>
<td>US$37m</td>
<td>US$36m</td>
</tr>
<tr>
<td>Refugee Chapter</td>
<td>US$23m</td>
<td>US$23m</td>
</tr>
<tr>
<td>TOTAL</td>
<td>US$550m</td>
<td>US$599m</td>
</tr>
</tbody>
</table>

PEOPLE TO BE ASSISTED

- 0.38M conflict displaced
- 1.54M conflict affected
- 2.77M nat. disaster affected
- 0.13M host communities
- 0.28M Afghan returnees
- 0.1M refugees & asylum seekers

AVAILABE (US$)

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Target</th>
<th>Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education in Emergencies</td>
<td>US$184M</td>
<td>US$184M</td>
</tr>
<tr>
<td>Emergency Shelter &amp; NFIs</td>
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<td>US$4m</td>
</tr>
<tr>
<td>Food Security &amp; Agriculture</td>
<td>US$27m</td>
<td>US$27m</td>
</tr>
<tr>
<td>Health</td>
<td>US$11m</td>
<td>US$11m</td>
</tr>
<tr>
<td>Nutrition</td>
<td>US$22m</td>
<td>US$22m</td>
</tr>
<tr>
<td>Protection</td>
<td>US$17m</td>
<td>US$17m</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>US$16m</td>
<td>US$16m</td>
</tr>
<tr>
<td>Multi-Purpose Cash</td>
<td>US$13m</td>
<td>US$13m</td>
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<tr>
<td>Refugee Chapter</td>
<td>US$10m</td>
<td>US$10m</td>
</tr>
<tr>
<td>TOTAL</td>
<td>US$184M</td>
<td>US$184M</td>
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### ACHIEVEMENTS AGAINST THE HRP

**FUNDING FOR 2018**

<table>
<thead>
<tr>
<th>Clusters</th>
<th>Orig. Request</th>
<th>Revised Requirements</th>
<th>Available</th>
<th>Rep. Partners</th>
</tr>
</thead>
<tbody>
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<td>Education in Emergencies</td>
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<td>US$30m</td>
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<td>US$53m</td>
<td>US$10m</td>
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<td>US$231m</td>
<td>US$27m</td>
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<td>Health</td>
<td>US$41m</td>
<td>US$49m</td>
<td>US$11m</td>
<td>34</td>
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<tr>
<td>Nutrition</td>
<td>US$56m</td>
<td>US$62m</td>
<td>US$22m</td>
<td>29</td>
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<td>Protection</td>
<td>US$59m</td>
<td>US$67m</td>
<td>US$17m</td>
<td>46</td>
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<td>Water, Sanitation &amp; Hygiene</td>
<td>US$24m</td>
<td>US$39m</td>
<td>US$16m</td>
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<td>Multi-Purpose Cash</td>
<td>US$37m</td>
<td>US$36m</td>
<td>US$13m</td>
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<td>Refugee Chapter</td>
<td>US$23m</td>
<td>US$23m</td>
<td></td>
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<tr>
<td>Aviation</td>
<td>US$16m</td>
<td>US$16m</td>
<td>US$10m</td>
<td></td>
</tr>
<tr>
<td>Coordination</td>
<td>US$16m</td>
<td>US$16m</td>
<td>US$17m</td>
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</tr>
<tr>
<td>Cluster Not Specified</td>
<td></td>
<td></td>
<td>US$36m</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>US$550m</td>
<td>US$599m</td>
<td><strong>US$184m available</strong></td>
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</table>

**PEOPLE REACHED**

<table>
<thead>
<tr>
<th>Clusters</th>
<th>Target</th>
<th>Reached</th>
<th>Men</th>
<th>Women</th>
<th>Boys (U18)</th>
<th>Girls (U18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education in Emergencies</td>
<td>0.4m</td>
<td>0.17m</td>
<td>1,100</td>
<td>1,300</td>
<td>81,200</td>
<td>83,900</td>
</tr>
<tr>
<td>Emergency Shelter &amp; NFIs</td>
<td>0.7m</td>
<td>0.24m</td>
<td>47,900</td>
<td>49,700</td>
<td>70,400</td>
<td>67,800</td>
</tr>
<tr>
<td>Food Security &amp; Agriculture</td>
<td>3.8m</td>
<td>1.61m</td>
<td>351,900</td>
<td>334,500</td>
<td>471,100</td>
<td>451,800</td>
</tr>
<tr>
<td>Health</td>
<td>1.8m</td>
<td>0.45m</td>
<td>107,400</td>
<td>157,200</td>
<td>112,700</td>
<td>70,800</td>
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<td>Nutrition</td>
<td>0.7m</td>
<td>0.22m</td>
<td>0</td>
<td>49,800</td>
<td>91,700</td>
<td>77,000</td>
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<tr>
<td>Protection</td>
<td>1m</td>
<td>0.39m</td>
<td>108,300</td>
<td>143,100</td>
<td>71,000</td>
<td>68,500</td>
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<td>104,900</td>
<td>133,800</td>
<td>133,400</td>
<td>131,600</td>
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<td>0.3m</td>
<td>0.14m</td>
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<td>42,100</td>
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<td>0.1m</td>
<td>0.08m</td>
<td>14,200</td>
<td>8,600</td>
<td>30,700</td>
<td>24,600</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>5.2m</td>
<td>2.4m</td>
<td>510,500</td>
<td>576,300</td>
<td>569,700</td>
<td>634,200</td>
</tr>
</tbody>
</table>

* The funding available is a combination of funding reported to FTS and in-country reporting. Requirements for Refugee Chapter are included in the cluster totals.
PROGRESS AGAINST STRATEGIC OBJECTIVES

1. Save lives in areas of highest needs

Humanitarian partners saved lives during the first half of 2018 with 151 humanitarian organisations reaching over 2.4 million people, out of a target of 5.2 million people, in 386 districts of Afghanistan. Humanitarians also reached over 1.1 million people in the provinces of highest need, including as Nangarhar, Kunduz, Faryab and Badghis where there are continued impacts from conflict and drought. Despite the high level of drought needs in both displacement areas and areas of origin within the Western region, there has not been a commensurate increase in operational presence by humanitarian partners with only 34 being present in the area, similar to before the drought. This compares to 55 organisations in the eastern region, 50 in the north eastern region, 47 in the southern region and 37 in the north.

The Food Security and Agriculture cluster reached more than 1.6 million people with food, cash and livelihoods support out of a revised target of 3.85 million. Over 224,000 people, or 49 per cent of the overall target, received household items to meet their basic needs during the second quarter, up from 14 per cent during the first quarter of 2018.

The Health cluster reached over 61,000 people with trauma care, up from almost 54,000 in the first half of 2017, or a rise of 14 per cent. Of these, the cluster treated over 47,000 cases in the provinces where people sustained their injuries, over 58 per cent of the target, in an effort to treat people as close as possible to where the injury was sustained, improving their treatment outcomes. A total of 21 new First Aid Trauma Posts (FATPs) came into operation, (35 per cent of the target) allowing the trauma healthcare system to further increase its capacity to treat trauma cases in the provinces where injuries occurred. The Health cluster was able to care for 23,000 trauma cases in FATPs, also 35 per cent of the target.

During the reporting period, partners reached 141,518 people in need in 42 hard-to-reach districts, or 184 per cent of the target. More children with severe acute malnutrition (over 110,000 children – 59 per cent of the target) and moderate acute malnutrition (34,000 children or 19 per cent of the target) were discharged after having completed a course of treatment in the first part of 2018.

2. Reduce protection violations and increase respect for international humanitarian law

In the first part of 2018, children continued to be exposed to protection threats as a result of conflict, their proximity to explosive remnants of war (ERW) and the presence of armed actors in and around schools. Children account now for an overwhelming 89 per cent of all ERW victims, up from 81 per cent during the same reporting period in 2017. Children also represent one third of all victims from pressure-plate improvised explosive devices (PPIEDs). Against this background almost 9,000 children (or 41 per cent of the goal) who saw their rights violated benefited from case management services, including referral to relevant services. Almost 62,000 children affected by internal displacement received psychosocial support through static and mobile child services. Over 2,200 unaccompanied minors deported from Iran received child protection services, including psychological first aid and family reunification.

Gender inequalities continue to remain extreme in Afghanistan, where women and girls face barriers to participation in economic and political spheres. Gender-based violence remains pervasive, with recent findings indicating that over 87 per cent of women have experienced some form violence, while 56 per cent of married women reported having experienced physical, sexual or emotional violence from their husbands. Against this backdrop, more than 61,000 women, girls, boys and men (81 per cent of the goal), have been reached through community dialogues as part of community mobilization efforts to prevent gender-based violence. In parallel, protection monitoring reached over 95,000 people, including tracking of incidents of GBV, child protection threats, domestic violence, early marriage and child labour. Gradually, GBV has emerged as a significant cross-cutting intervention which is being integrated to health, WASH, Nutrition and FSAC programming. Over 25,000 GBV survivors received assistance through an integrated multi-sectoral response, or 244 per cent of the goal.
During the reporting period, the Housing Land and Property (HLP) task force was instrumental in drafting a new legal framework on land allocation. The draft of the executive decree on the identification and allocation of land for returnees and internally displaced Afghans was approved in March 2018 and more recently approved by the President. By the time of the mid-year review, the decree had not yet been gazetted, which is the final step before implementation. In addition, almost 40,000 people received HLP support, or 88 per cent of the goal. Over 8,500 people gained legal identity, including civil documentation, or 44 per cent of the goal, as a result of HLP support. Over 11,000 benefited from HLP legal assistance, or 79 per cent of the target.

Meanwhile, in Pakistan, the protection environment for the more than 1.4 million Afghans with Proof of Registration (PoR) cards did not record any reports of increased harassment. While initially the Government of Pakistan only extended the PoR cards to January 30, it subsequently extended them to 30 June and now until the end of September, after which the new government is expected to grant a one-year extension until September 2019. The same temporary extensions have been extended to Afghan Citizen Card (ACC) holders.

Lastly, a UNHCR ProCAP consultant developed a new HCT Protection Strategy, following detailed discussions in the HCT that aimed to ensure the strategy was as sharp in its focus as the multi-year HRP, was realistic in nature, was people focused and that it followed a set of commonly agreed priorities. Despite the extensive consultations, some members of the HCT still considered the outcome unsuitable for tackling the challenges in Afghanistan, which are first and foremost, a protection crisis.

People struck by sudden onset crises get the help they need, on time

The limited occurrence of sudden onset crises within the reporting period, with only small-scale flooding and avalanches occurring in Badghis, Sar-e-Pul, Balkh, Samangan, has meant that related humanitarian needs have been lower than initially anticipated. A total of 141,000 people affected by natural disasters received timely assistance, or nine per cent of the target. No large-scale displacements were seen as a result of flash floods, avalanches or earthquakes.

This has, however, been offset by an increase in needs as a result of the slow onset drought. As such, the disaster-related strategic objective is being adjusted to reflect this strategic change. The response to the drought had been minimal, up until August 2018, as a result of delays in the mobilization of humanitarian activities.

An Emergency Response Preparedness exercise was conducted during the first and second quarters and identified the major response risks facing Afghanistan as drought, the return of undocumented Afghans and conflict-related displacement. In addition, the multi-cluster mission to Spin Boldak sought ways to improve border point conditions and found that livelihoods interventions in the region are very limited or non-existent, despite a clear need and that returnees are unable to start trade-based livelihoods activities due to a lack of capital. The mission to Spin Boldak estimated that it would cost approximately US$10 million to improve facilities at the border point, which is estimated to receive up to 30 per cent of arrivals into Afghanistan.

Lastly, the reporting period saw USAID and Australian Aid allocate emergency funds to respond quickly to people's needs. In total, Australia announced approximately AUD 60 million for the Afghanistan-Pakistan, of which AUD 39 million will be allocated for Afghanistan, primarily to WFP and UNFPA, including for first and second quarter programming. The US also announced additional funding of almost US$30 million for the twinning programme that aims to pair a part of Afghanistan's Strategic Grain Reserve with sufficient funds to mill, fortify and distribute the wheat, together with other essential foods (pulses, oil, salt and PlumpyDoz) and provide these to drought-impacted Afghans in 20 affected provinces.
During the first half of the year, the ICCT developed a workplan that prioritized several activities for completion, including the Whole of Afghanistan (WoA) Assessment and the Emergency Response Preparedness (ERP) bi-annual exercise; the HCT Protection Strategy; and the CERF Rapid Response allocation as a way to kick-start the drought response. A humanitarian architecture review was also planned, although this has since been delayed until the first quarter of 2019.

In advance of the HNO and HRP workshops scheduled for the third quarter of 2018, the ICCT prioritized improving the evidence base underpinning humanitarian activities. The ICCT devised the WoA Assessment, which is a comprehensive, multi-sectoral assessment to measure the nature and intensity of humanitarian needs across the country. In parallel with the survey, the ICCT developed an inter-sectoral severity scale for the WoA Assessment and for the HNO to allow for a better inter-cluster response in 2019, 2020 and 2021. The scale allows clusters to prioritise where they can ensure the highest impact from their response and the best sequencing of activities. Meanwhile, the HCT Protection Strategy was finalized and will act as a set of agreed priorities for responding to the protection crisis in Afghanistan. The document is closely aligned to the HRP and is focused on achievable results. Despite its adoption, some members of the HCT continued to voice concerns over the document’s scope and analysis. In parallel, the first ERP bi-annual exercise was successfully completed in the first quarter of 2018 and the second round was scheduled for July 2018 with results due in late September for the second part of 2018. It is worth noting that the mid-year ERP process accurately predicted the most drought-affected provinces: Badghis, Ghor and Daykundi, with these projections confirmed later by the FSAC Emergency Food Security Assessment.

Meanwhile, the CERF allocated US$12 million to the FSAC, Nutrition and WASH clusters to deliver life-saving humanitarian responses to people affected by the drought, in addition to the US$15 million channeled through the Afghanistan Humanitarian Fund, with both investments aimed at kick-starting the overall drought response.

Community engagement – Awaaz

As part of efforts to improve engagement with communities and to uphold Grand Bargain commitments related to accountability to affected populations, in May 2018 the humanitarian community launched Awaaz, a community engagement platform for the humanitarian response in Afghanistan, which is intended to be a single point of contact through which Afghans affected by conflict and natural disaster can receive critical information connecting them to the assistance they need and through which they can provide feedback on the humanitarian response.

Awaaz is a confidential, toll-free hotline designed to help swiftly track and route a two-way flow of information between affected people and humanitarian partners operating in the country. Working to fill a communication gap in the humanitarian response and promote accountability to affected people at an agency-specific and collective level, Awaaz’s facilitation of community engagement is helping partners to better align their response to the actual needs as reported by communities.

By dialing 4-1-0, anyone with a mobile phone in Afghanistan can connect to one of Awaaz’s eight multi-lingual operators, four of whom are women, without being charged by their network carrier. Since Awaaz began taking calls in May, call centre operators have handled more than 14,000 calls from Afghans from across the country, allowing Awaaz to share information with affected populations, flag urgent protection cases, provide information on cross-sectoral issues, identify gaps in services, close the loop on feedback and complaints, and highlight community engagement needs. During the first six months of its existence, Awaaz made 86 referrals to partners, out of which 87 per cent resulted in answers being provided by Awaaz back to affected people. Furthermore, in an effort to increase transparency, ACF used Awaaz’s number as a secondary number on their hotline cards.
Overview

More than 3.7 million children in Afghanistan continue to suffer the consequences of conflict and natural disasters, 60 per cent of whom are girls. Over 500,000 children have been deprived of education, with approximately 1,000 schools destroyed or closed due to insecurity, lack of infrastructure and teachers in the first half of 2018. It is estimated that 460,000 children have been affected by school closures. Also, many children are forced to live too far from their nearest school due to insecurity and are therefore unable to access education due to the associated security risks and costs associated with travel.

Since January 2018, there has been a significant upward trend in reported attacks against education facilities. Between January and June, a total of 131 direct attacks against schools were documented, out of which 39 were related to the ongoing election process. This compares with a total of 68 verified attacks on schools in the whole of 2017. In the reporting period, initial information indicates that a total of 870 education-related incidents have occurred including attacks on schools, threats, intimidation, or ground engagement in the vicinity.

Internally displaced, returnee and vulnerable host community children are the main targets of Education in Emergencies assistance in rural and remote areas. In some cases, children in urban areas also have extremely limited access to quality education because the government schools have low capacity to absorb the extra number of internally displaced and returnee children, while the host community children themselves are competing for the limited available resources. Children who are out of school are vulnerable to child labour, exploitation, sexual abuse, drug addiction, recruitment by armed opposition groups and other protection risks.

To address the education needs of these crisis-affected children, EiE partners have been working to assess the situation and mobilise resources to establish community-based education or to support formal schools. Strategies have included accompanying teachers, constructing temporary learning spaces (tents) and providing teaching and learning materials. Six to nine-year-old children are supported through community-based education (CBE), i.e. an education in emergencies approach. Children who are above nine, and under 15 years old, are
supported through Accelerated Learning Programmes (ALP) which will follow the CBE policy and the formal Government curriculum.

The EiEWG has recognised that entities such as the School Management Shura (SMS), District Management Councils (DMCs), parents, religious leaders and community elders need to be organised to support their children’s enrollment in education. These stakeholders need to be informed about the importance of education for their children and their future. Their behaviors also need to be changed towards their children’s education, especially for girls, and they need to know what type of education services are available for their children when they return from other countries or become displaced to other provinces or areas. In response, EiEWG partners have designed and implemented training for these groups, in coordination with the Directorate of Social Mobilisation and Shura (DSMS) from the Ministry of Education.

The number of children who need education in emergencies support has increased in the first half of 2018 from 430,000 to 470,000 people. One of the major reasons is the continued conflict and the high level of insecurity in various parts of Afghanistan. People have been displaced and children have started missing classes, due to reduced family resources and education becoming a lower priority.

**Progress towards needs**

In the first half of the year, EiEWG partners provided quality education to over 140,000 children and adolescents in 45 districts and 12 provinces, by establishing 2,600 temporary learning spaces; providing teaching and learning materials to over 140,000 learners; by recruiting and training of 6,500 teachers; and conducting social mobilisation training to School Management Shura members on the right to education, particularly for girls.

To address the growing trend of attacks against education facilities, EiEWG partners continued to advocate through the Task Force on Children in Armed Conflict, the Special Representative on Children and Armed Conflict, as well as the Ministry of Education. A response plan was developed, outlining mitigation measures linked to 4,498 schools, which were designated by the Government of Afghanistan as voter registration and polling centres for the 2018 parliamentary elections. Mitigation measures included:

1. Based on the MoU signed between MoE and the Election Commission, schools can be used for a maximum of three days only during election/voting. Classes were to be cancelled one day before the election, the day of and the day after the election. EiEWG partners planned to conduct visits to ensure that schools were not used beyond these three days, to decrease the likelihood of attacks.
2. The EiEWG advocated with the Commission for locations other than schools to be used to respect the schools’ neutrality.
3. The EiEWG advocated with GoIRA to uphold its commitments towards the Oslo Safe School Declaration and adopt practical measures to protect schools.
4. The EiEWG worked with the MoE to approve informal education programmes, such as home-based education, or distance education during periods when students cannot go to school.
5. Finally, the EiEWG is working on the development of a standardised Comprehensive Schools Safety Framework (CSSF) that includes mitigating and coping measures, including training to teachers and school personnel on school evacuation, establishing alarm systems and fire extinguishers etc.

**Assessments**

The EiEWG is following the EiE prioritisation matrix and REACH assessment findings on identified education needs. Geographical locations are prioritised based on the high number of returnee and internally displaced children in need, using data from UNHCR, IOM and UNOCHA.

**Cross cutting issues**

The Working Group’s accountability to affected populations is delivered through school-based shuras (School Management

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**Children (affected by emergencies) and youth who have access to quality primary and secondary education**

- **Target**: 351,000
- **Enrolled**: 140,000 (40%)
- **Established**: 2,600 (43%)
- **Reached**: 6,500 (43%)

Continued on page 40
Similar to 2017, this year the Emergency Shelter/NFI cluster has focused on meeting the emergency needs of those displaced by conflict and natural disaster, as well as both documented and undocumented returnees. Assistance has included emergency shelter (cash-for-rent, tents, plastic sheeting) and non-food items or NFIs such as blankets, jerry cans, kitchen sets, soap, clothing and eating utensils. Vulnerable families were assisted with cash or in-kind support to upgrade existing shelters in poor condition, enabling more dignified and safer living conditions.

Approximately 167,288 people displaced by conflict were identified as being in need of emergency shelter and NFI assistance mainly in Jawzjan, Faryab, Kunduz, Takhar and Badakhshan provinces in the Northern and Northeastern regions of Afghanistan through various inter-agency rapid needs assessments using the HEAT tool. According to the Afghanistan Hard To Reach Areas Needs Assessment, Round One, March 2018 in 46 hard-to-reach, conflict-affected districts, most families are living in precarious conditions, where shelters are partially damaged and therefore do not protect the families from the elements, nor provide for their privacy and safety. This is compounded by overcrowding, resulting in some families sharing the same accommodation with their animals. This is particularly of concern for women and girls. According to IOM - Humanitarian Assistance Programme (HAP) assessments, 59,136 people affected mainly by flash floods, particularly in the Northern and Eastern regions, needed NFIs. Of those affected, 19,425 people whose homes were completely destroyed needed emergency shelter, while 39,453 people needed assistance to repair their damaged shelters. In Muqur district, of Badghis province, flash floods damaged almost 80 per cent of homes and water sources. Some 14,196 people needed to repair their partially damaged shelters. Moreover, 20,629 people displaced by drought in the Western region were found to be in need of emergency shelter.

While the Emergency Shelter/NFI cluster response was mainly driven by conflict and natural disaster, there was a decrease in both these kinds of assistance in the first half of 2018, compared to the same period.
the previous year. Those assisted due to conflict fell by 17 per cent given the decrease in conflict-related displacement, and there was a 32 per cent decrease in the number of people assisted due to natural disasters, from 53,459 down to 35,854 people. This is because there have been fewer floods in 2018 due to the lack of rainfall. However, the deficit in precipitation has also resulted in a drought which has caused widespread displacement of over 112,000 people and has generated emergency shelter and NFI needs for some 90,000 individuals.

The cluster assisted 17,947 returnees, compared to 131,724 people who were provided with emergency shelter and NFIs during the same period in 2017. This significant 86 per cent decrease is due to fewer returns this year from Pakistan and lower funding levels to meet the needs of returnees from Iran.

Progress towards needs

As of 30 June 2018, a total of 235,737 individuals out of 720,000 people targeted by the cluster received emergency shelter and NFI assistance through cash and in-kind distributions. Of those assisted, 21 per cent were women, 29 per cent were boys, 20 per cent were men and 30 per cent were girls, across 177 districts. Ten per cent of those assisted (23,345 individuals) are in hard-to-reach districts in 34 provinces. In addition, 95,915 people, including those in prolonged displacement, received additional shelter and NFI assistance to improve their living conditions and mitigate further protection and health-related risks. As a result of the various shelter and NFI initiatives, including cash assistance to 124,527 individuals, vulnerable families were protected from the elements, the privacy of families (particularly women and girls) was improved, and those whose homes were repaired are now living in more dignified and safer conditions. Further shelter/NFI assistance has also been provided through multi-purpose cash grants which are reported separately. Following-up on assistance through post-distribution monitoring (PDM) remains a major challenge. Of the 235,737 people who were assisted, only 5,663 individuals have so far been followed-up through PDM. However, a few partners have indicated that PDM is ongoing and results are expected to be reported during the next quarter.

The cluster has an operational capacity of 54 partners comprising 22 national NGOs, 3 UN agencies and 29 international NGOs, as well as the IFRC and ARCS. Compared to 2017, the capacity of national partners has increased enabling the delivery of greater assistance in more hard to reach areas.

Under the cluster’s first HRP objective, partners responded to the emergency shelter and NFI needs of the most vulnerable people affected by natural disaster and armed conflict, as well as returnees:

- As of mid-2018, 17,465 people had received emergency shelter assistance, out of the 163,380 people targeted. The achievement results do not reflect the full response since most of the assistance was provided through multi-purpose cash that is reported elsewhere.
- By the end of the reporting period, 224,347 had been provided with NFI packages out of the 453,289 people targeted.
- 56,019 people were assisted in 24 hard-to-reach districts by 30 June 2018.
- No progress has thus far been made against the indicator related to winterization. This assistance is planned in the last quarter of the year.
- Under the second HRP cluster objective, partners mainly focused on having sufficient stocks to meet the immediate needs of the 546,276 targeted people in need.
- As of mid-year, stock levels across the country could only cover 30 per cent (163,882 people) of the 546,276 people targeted.
- Some 20 rapid market assessments were conducted to make an informed decision on possible cash-based interventions including cash for rent, shelter upgrades and NFIs. In most areas, cash was shown to be the preferred modality based on accessibility and functionality of markets.

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Overview

Afghanistan is currently facing the worst drought in the past five years, affecting 20 provinces and close to 3.5 million people across the country as of the middle of the year, especially in the western region. Over 115,000 drought-affected people have migrated in Ghor, Badghis and Herat provinces and people need food, water and shelter support. The Emergency Food Security Assessment (EFSA), which was ongoing at the end of the reporting period, will provide a comprehensive picture and further details on the number of drought-affected people. Given the drought, the impact of crop pests on farmers was minimal in the first half of the year, as there were few, if any, crops to be affected.

In 2018, a much higher number of undocumented Afghans returned home from Iran during the reporting period compared to 2017. Yet, of the 449,242 undocumented returnees who returned, primarily from Iran, the cluster was only able to reach 61,085 people, or approximately 13 per cent of the target, with protection assistance and 1,535 with livelihoods assistance. Returns from Iran have accelerated due to the loss of job opportunities in Iran associated with the depreciation of the Iranian currency. Despite the increased numbers of people returning to Afghanistan, the assistance has not kept up, as most returnees are considered economic migrants and are not being targeted with humanitarian assistance. Returns from Pakistan have occurred at significantly lower levels in 2018 than in 2017 (17,000 in 2018 versus 70,000 in 2017), reducing the number of people for whom support has been mobilised compared to the same time last year.

Numbers of documented returnees also remained low compared to the same period last year. Fewer than 8,000 refugees had returned to Afghanistan by the end of June 2018, over 90 per cent of whom were from Pakistan. UNHCR provided cash-for-food to 7,915 people and WFP provided in-kind food assistance to 4,360 people. The cluster reached almost 100 per cent of the target at the border while almost 57 per cent were reached in places of origin, despite difficulties to assist in remote locations.

The number of conflict-affected, displaced people decreased by 15 per cent in the first six months in 2018. A total of 179,000 people
became displaced in the six months to June 2018, compared with 195,926 people who were displaced in the same period last year. As in previous years, the actual number of people assisted was above the initial target due to the provision of the assistance in the first couple of months of the year to people who had been displaced in 2017.

Some 44,332 Pakistani refugees living in Khost and Paktika provinces continued to rely on food assistance from WFP to meet their immediate needs in light of limited livelihood opportunities. UNHCR findings indicate food security remains the primary concern raised by refugees in community consultations. The beneficiaries of food assistance include malnourished children, as well as pregnant and lactating women.

Over 500,000 drought-affected people are estimated to need livelihoods protection assistance in the form of fodder and livestock vaccination support. Wheat production in 2017 was estimated to be 57 per cent below the five-year average, and 2018 production has seen an additional deficit of two million MT. This has negatively impacted on the availability of animal fodder, leading to a deterioration in the condition of livestock and causing distress-selling of animals. Across the 20 drought-affected provinces, fodder prices have more than doubled and milk production has decreased by 40 per cent. Livestock products are a major source of nutritious food and income for vulnerable farmers, especially women-headed households. Livestock production has gone down and livestock sale prices have decreased on average by 20-30 per cent since October 2017. Concurrently, agricultural labour opportunities have declined, and combined with increasing migration of rural workers, have resulted in reduced casual labour wages throughout the country.

The recent Agriculture Prospect Report indicates a 17 per cent reduction in total irrigated cultivated land areas and a 48 per cent reduction in rain-fed cultivated land to date in 2018, compared to 2017. The decreases correspond to a six per cent reduction in the production of wheat cultivated on irrigated land and a 71 per cent decrease in wheat produced from rain-fed land so far in 2018, compared to 2017. Almost three quarters of interviewed farmers claimed a reduction in income compared to last year as a result. 71 per cent of interviewed farmers mentioned that they faced shortages of fodder, decreases of animal prices and livestock deaths. Around 90 per cent of the interviewed farmers reported that they did not have animal feed until the end of the year. Around 82 per cent of interviewed farmers reported that they had less irrigation water than last year.

According to the ALCS survey, the overall level of food insecurity increased by 33 per cent to 3.4 million people in the first half 2018. This has further increased vulnerabilities created by escalating poverty since 2013-14. The food security situation in the second half of 2018 and early part of 2019 will be exacerbated by the decrease in agriculture and livestock production; the Afghan currency devaluation against the USD; a rise in fuel prices; the increased risk premium associated with transportation and reduced labour opportunities, particularly for Afghans living in Iran. The Iranian currency has also plunged against the US Dollar and consequently towards the Afghan currency to the extent that labour opportunities for Afghans in Iran are not attractive anymore.

**Progress twoords needs**

Overall, Food Security and Agriculture cluster partners reached 1.6 million people out of a revised target of almost 3.9 million people. This represents 42 per cent of the target population being reached with both food and livelihoods assistance. The overall target was moved up by 1.4 million people as a result of the drought revision conducted in May 2018. Out of the 3.2 million people targeted with food, 1.28 million or 40 per cent received food assistance (Objective 1). Of the 1.2 million people targeted with livelihoods assistance 343,635 people, or 27 per cent were reached (Objective 2). A lack of funding is the main reason why progress towards these livelihood assistance and food distribution targets has been slower than hoped. Progress towards the cluster’s third HRP objective, including the EFSA and IPC survey activities, will be reported in the third quarter.

Security incidents remained very high during the reporting period. Cluster partners reported that Badakhshan, Farah, Ghazni, Paktika, Uruzgan, Kunduz, Hilmand and Kandahar

Number and % of IDP, returnee, refugee and non-displaced conflict-affected women, men and children of all ages who receive timely and adequate food assistance

<table>
<thead>
<tr>
<th>Number and % of IDP, returnee, refugee and non-displaced conflict-affected women, men and children of all ages who receive timely and adequate food assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assisted 1,126,844</td>
</tr>
<tr>
<td>Target 1,422,417</td>
</tr>
<tr>
<td>79%</td>
</tr>
</tbody>
</table>

Number of affected people receiving in-kind food assistance

<table>
<thead>
<tr>
<th>Number of affected people receiving in-kind food assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assisted 1,286,718</td>
</tr>
<tr>
<td>Target 1,842,613</td>
</tr>
<tr>
<td>70%</td>
</tr>
</tbody>
</table>

Number of IDPs in HTR areas receiving food assistance

<table>
<thead>
<tr>
<th>Number of IDPs in HTR areas receiving food assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reached 48,180</td>
</tr>
<tr>
<td>Target 50,000</td>
</tr>
<tr>
<td>96%</td>
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</tbody>
</table>

Continued on page 42
Cluster reporting provided by: Health Cluster

Overview
During the second quarter of 2018, the Health cluster prioritised responding to the needs of drought-affected people, with an additional 351,000 people identified as being in need of urgent health services due to limited access to quality and quantity water. A Health cluster assessment in Herat and Badghis in August 2018 showed that drought-affected people were particularly impacted by severe malnutrition and infectious diseases, with 40 per cent of households reporting acute watery diarrhea. Funding limitations up until the end of June prevented a greater mobilisation of health assistance related to the drought. An additional US$7 million is needed to address the urgent health needs of people affected by the drought until the end of the year.

At the same time, ongoing conflict continues to generate the need for trauma care in many provinces, a 14 per cent increase in the number of people requiring trauma care, from 53,875 people affected in the first half of 2017 to 61,418 people in the first half of 2018. Health care facilities and health care workers have also been increasingly targeted by parties to the conflict in the first half of 2018 (mainly NSAGs), compared to 2017, limiting the availability of health services to the population. In the first half of 2018, up to 3.4 million Afghans were, at some point, deprived of health care services due to attacks on healthcare workers or health facilities.

Emergency primary healthcare needs continue to rise for displaced people in areas where humanitarian organisations have limited access and where population movement continues to over-stretch existing, under-resourced services. Many of the almost 450,000 returnees from Iran required additional health services at border points, including mental health and psychosocial support, as well as treatment for communicable diseases, with some requiring referral for further treatment. According to IOM, it was only possible for a tiny fraction of these returnees to be reached with services.

Disease has also taken a toll in the first half of the year. So far in 2018, the country has reported the highest number of cases of Crimean Congo Hemorrhagic Fever (239) in 21 years, mostly in the same geographic area as the drought, including a record number of deaths (32). Measles outbreaks have also been on the rise, requiring nationwide supplementary immunization activities. During the reporting period, there were 201
outbreaks of measles and 2,692 measles cases. This is a 104 per cent increase in the number of measles patients compared to 2017.

Progress towards needs

The Health cluster focused on three key priorities during the first half of 2018:

1. Establishment of trauma care facilities in high-risk conflict-affected districts. A total of 21 trauma care facilities have been established in Kandahar, Laghman, Herat and Nangarhar provinces, representing 35 per cent of the overall target for 2018.
2. Provision of emergency, life-saving health services, including reproductive and newborn care.
3. Preparedness for and prevention of disease outbreaks including as a result of the drought.

Achievements

Key achievements of the cluster included responding to the emerging drought crisis, improving trauma care in conflict-affected areas, particularly Kabul, Kunar, Kunduz and Nangarhar; providing emergency health services to returnees in Nimroz, Nangarhar and Hirat provinces; and surveillance and clinical management of infectious diseases such as measles and CCHF which has been reported in 29 provinces.

The activities of cluster partners were heavily focused on drought-affected people. The target population included people living in areas with limited healthcare access, such as Hirat, Sar-e-Pul, Badghis, Ghor, Nimroz and Kandahar provinces. Under the Health cluster, 18 Interagency Emergency Health Kits, 10 trauma kits, eight pneumonia kits and 12 diarrhea kits have been distributed in response to the emergency drought crisis. NGO needs for supplies have been higher than ever.

Progress was made towards treating more trauma cases in the provinces where people sustained injuries in the conflict. A total of 47,789 cases were treated during the first half of 2018, or 58 per cent of the 2018 target. This figure suggests that trauma coverage is gradually improving. In addition, 23,578 cases of conflict-related trauma were treated in First Aid Trauma Posts in the first half of 2018, which represents 35 per cent of the target. This achievement is comparable to last year’s progress at the same point in the HRP cycle. Furthermore, in the first half of 2018, a total of 21 trauma care units were established or 35 per cent of the target. There have been increased attacks on healthcare facilities and the cluster is working to raise awareness of IHL as it relates to attacks on health care facilities, while simultaneously building additional care units in the second half of the year.

In the first half of 2018, Afghanistan recorded a total of 298 incidences of disease outbreak, which is more than initially anticipated. This is most likely related to increased population movements, socio-economic factors and the drought. Surveillance systems continue to be functional and all outbreaks were responded to within 48 hours.

The Health cluster continues to conduct gap analyses of under-served areas. Targeted mapping exercises show that in Nimroz 46 per cent and in Kunduz 32 per cent of the population cannot access health services within two hours. In Ghor, 59 per cent of the population cannot access health services. This mapping also shows that in Nimroz and Kunduz provinces, 52 per cent of people do not have adequate access to secondary referral care. Mapping of access in other provinces is ongoing.

During the reporting period, the cluster’s response capacity remained similar to the previous year, with a similar number of health partners compared to 2017 and similar access to all provinces. A total of 42 hard-to-reach areas have received health assistance in the first half of the year. Access to hard-to-reach areas for health partners is a direct consequence of limited financial resources rather than security issues related to access. In the first half of 2018, 75 health facilities were closed and 28 were damaged, affecting access for almost 3.4 million people. In Zabul Province, some 34 health facilities were closed, nearly all of those in the province.

Assessments

A district-level Health Emergency Risk Assessment (HERA) began in 304 districts in 2017 and has now been completed. The assessment, covering 32 provinces, includes an analysis
Overview

The humanitarian situation in Afghanistan remains fragile due to continued conflict and now drought. Young children and their mothers, affected by both acute and protracted emergency situations, continue to suffer from multiple nutritional deprivations. Nutrition assessments undertaken by nutrition cluster partners over the last six months, reveal continued high levels of acute malnutrition across the country and that needs remain high.

SMART and Rapid SMART nutrition surveys found either serious \([10-14.9\%]\) or critical level \((\geq 15\%\) GAM rate\) of the nutritional status in the provinces of Logar, Zabul, Kunduz, Kunar, Uruzgan, Badghis, Kandahar and Jawzjan. As a result, there was an increase in acute malnutrition or wasting during the months of January to June 2018. If needs are not tackled, the severity of acute malnutrition among children under five may deteriorate further and result in more complicated cases in the coming months.

The increase in magnitude and severity of acute malnutrition has stretched the capacity of health and nutrition facilities to provide treatment services. In the medium to long-term, children will face a heightened vulnerability to chronic malnutrition.

The nutritional trend analysis shows an increase in the GAM rate – by weight for height Z-score (WHZ) in most provinces assessed during the period of January to June 2018 (from 7.5\% to 7.8\% in Kunduz, from 11.8\% to 14.4\% in Kunar, from 9.4\% to 11.2\% in Zabul and from 6.8\% to 7.15\% in Logar province). In addition, Rapid SMART nutrition surveys in some of the hotspot locations which are severely affected by drought including Badghis, Kandahar and Jawzjan provinces reported very high levels of malnutrition, especially the displaced people, as well as the Kochi/Nomad population.

The combined GAM rates \([\text{by both Weight for Height Z-Score and Mid Upper Arm Circumference (MUAC)}\text{ criteria}\]

1. National Nutrition Survey (NNS) - 2013
2. Nutrition SMART Survey, Kunduz Province, ACF, April-2018
5. Nutrition SMART Survey, Logar Province, ACF, January-2018
together] show that the level of wasting among children under five exceeded the emergency threshold in Badghis (19.7 per cent), Kandahar (22.3 per cent) and Jawzjan (27.4 per cent). The rapid nutrition assessment by World Vision in Hirat Province, identified a GAM rate of 24 per cent and a SAM rate of 4 per cent among the protracted IDP population, as well as a staggering 25 per cent GAM and nine per cent SAM among the newly displaced population. This increase in the malnutrition rate spiked the overall number of Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) cases covered in the HRP. An estimated increase of 125,000 cases of acute malnutrition is attributed to the impact of the drought.

Progress towards needs

In response to critical nutrition needs identified in the 2018 HRP, cluster partners provided lifesaving nutritional support to crisis-affected children and women in priority districts in response to the emergency nutrition needs of displaced, returnee and refugee population groups in various parts of the country. Mid-way through the year, the Nutrition cluster is on track to meet most of its planned targets, even if the coverage of lifesaving nutrition interventions continues to be increasingly affected by conflict-related access constraints, limiting the ability of the cluster to meet all the identified nutritional needs. Over the reporting period, the Nutrition cluster supported the treatment of 122,000 children (46 per cent boys; 54 per cent girls) under the age of five suffering from SAM across the country and registered recovery rates of 86 per cent. These treatment outcome indicators are well within SPHERE standards. The children with SAM who received therapeutic nutritional support during this period represent about 58 per cent of the overall Nutrition cluster target for 2018 of 209,000 children under the age of five with SAM.

In addition, across the country the Nutrition cluster supported the treatment of 69,714 children (46 per cent boys; 54 per cent girls) under the age of five with MAM, and achieved recovery rates of 66 per cent. The treatment outcome indicators fall short of the SPHERE standards (Recovery rate > 75 per cent). The number of children with MAM provided with supplementary food through the targeted supplementary feeding programme (TSFP) during this period represents nearly 25.7 per cent of the overall Nutrition cluster target for 2018 of 239,675 children with MAM under the age of five. Furthermore, the Nutrition cluster provided therapeutic nutritional support to 55,729 pregnant and lactating women (PLW) with acute malnutrition (MUAC <230mm). The number of acutely malnourished PLW provided with therapeutic nutritional support during this period represents almost 41 per cent of the overall Nutrition cluster target for 2018 of 137,040 PLW. The under-achievements in MAM treatment to children under five and PLW are due to funding shortfalls during the reporting period. Overall, the nutrition cluster had received 33 per cent of the funding requested by end of June 2018.

Ensuring the timely provision of emergency nutrition support to displaced, returnee and refugee population groups is critical to preventing acute malnutrition, as well as associated morbidity and mortality in young children. During the reporting period, a total of 13,195 children aged 6-23 months among new IDP populations across the country received supplementary food through a blanket supplementary feeding programme (BSFP). During the reporting period a total of 1,221 returnee children aged 6-59 months received Vitamin A supplementation. Furthermore, about 1,059 returnee children aged 6-59 months were screened for acute malnutrition and referred for appropriate nutrition therapeutic care and support. Coverage from planned interventions for the returnee and refugee nutritional response is low owing to a number of factors. The overall returnee and refugee population turned out to be less than initially projected in the HRP and this had a direct effect on the number of children, pregnant and lactating women reached with nutrition services.


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PROTECTION

Cluster reporting provided by: Protection Cluster

Overview

Protection concerns remained at the centre of the humanitarian crisis in Afghanistan during the reporting period, with a diverse range of issues impacting on people’s safety, including violations of international human rights and international humanitarian law, forced displacement caused by both armed conflict and natural disasters, explosive contamination, gender-based violence (GBV), child abuse and exploitation, adoption of negative coping mechanisms exposing particularly vulnerable individuals to additional threats to their physical and psychological well-being, lack of civil documentation hindering access to basic services and livelihood opportunities, as well as a lack of security of tenure exposing vulnerable families to the risk of eviction and hindering the achievement of durable solutions.

Humanitarian needs continued to be both concentrated and more pronounced in areas experiencing active and repeated fighting, as well as urban centres where populations are increasingly seeking safety and access to services. High numbers of conflict-induced displacements and active territorial contestation continue to be mainly concentrated around the south (Kandahar, Helmand, Uruzgan, Zabul Provinces), northeast (Kunduz and Baghlan Provinces), northwest (Faryab, Sar-e Pul, Badghis Provinces), and the east (Nangarhar, Kunar, Laghman Provinces). Furthermore, the two provinces hosting the highest number of new Internally Displaced Persons (IDPs) thus far in 2018, Faryab and Kunduz, are among the areas with the greatest access constraints reported.

The ongoing conflict in Afghanistan continued to pose serious risks to the physical safety of civilians who have remained in conflict-affected areas, have returned to their place of origin or who are struggling to cope with the difficult living conditions arising from displacement. From 1 January to 30 June 2018, UNAMA documented 5,122 civilian casualties (1,692 deaths and 3,430 injured) - a slight three per cent decrease from last year - reflecting similar levels of harm to civilians as 2017 and 2016. While encouraging reductions in civilian casualties caused by ground engagement and targeted and deliberate killings were reported, UNAMA documented a disturbing increase in the number of civilian casualties from
suicide and complex attacks by Anti-Government Elements. Moreover, the number of civilian casualties caused by aerial operations slightly increased compared to the same period of 2017. Despite a reduction in the number of civilian casualties from explosive remnants of war (ERW), as compared to the first six months of 2017, children continue to make up 89 per cent of all ERW victims. In addition, despite a 43 per cent decrease in civilian casualties from pressure-plate improvised explosive devices (PPIED), one third of the casualties that did occur were children.

During the first six months of 2018, attacks, military occupation and closure of healthcare and education facilities increased country-wide, especially as a direct consequence of the use of schools, clinics and mosques as Independent Electoral Commission registration centres for the upcoming elections, as well as retaliation to operations by pro-government forces. According to data from the Humanitarian Access Group, 26 health facilities closed and 80 incidents against health facilities and health workers were reported between January and June 2018. UNICEF documented a total of 131 attacks on schools, an overall increase of more than 100 per cent compared to the same period in 2017. Since January 2018, a total of 1,021 schools have been closed due to general insecurity, cross-fire, threats and intimidation. As a result, more than 544,000 students (203,000 girls, 341,000 boys) have been missing out on education which creates further protection risks such as child marriage and child labour. In particular, a string of ten attacks targeting government-run schools and education sector employees was registered within a single month (June 2018) in Nangarhar Province. As of 2 July 2018, a total of 30 schools were closed in eastern Afghanistan, according to local authorities, due to a protracted status of high alert for attacks on government schools - both as a result of explicit threats from NSAGs and actual attacks. These closures left 15,000 children unable to attend school. The level of threat has also increased further in 2018 as schools are being used as Independent Electoral Commission (IEC) registration centres and polling stations for the October elections. During the voter registration process from April to June 2018, UNAMA documented 39 attacks targeting voter registration centres at schools resulting in child casualties, school closures and reduced attendance, impacting children’s safety and right to education.

In general, children are exposed to disturbing protection threats due to the presence of armed actors in and around schools. When armed actors are present in the immediate vicinity of education facilities, children are exposed to physical threats both on their way to and from school and while at school, including harassment, military recruitment, collateral damage caused by explosive devices and crossfire, and direct attacks perpetrated by AG factions who oppose the provision of education, especially for girls, due to particularly conservative socio-cultural beliefs.

From January to the end of June 2018, 131,931 individuals (57 per cent <18 years) have been displaced due to the conflict. Besides high-levels of new displacement, there are estimates to be around 1.8 million people living in protracted displacement, some of whom have been in displacement for 20 years or longer, and many of whom have been displaced multiple times. As well, there are refugees and migrants who have returned to Afghanistan after living for more than a decade or two abroad, who are neither able to return to their places of origin nor achieve other durable solutions. Life in displacement continued to cause and/or exacerbate outstanding protection issues, especially for particularly vulnerable individuals and families who often resort to the adoption of harmful coping strategies, such as incurring mounting levels of debts, child labour and forced child marriage and rely on smugglers to seek job opportunities, including through irregular migration.

Displaced families’ housing, land and property (HLP)-related needs continued to increase during the reporting period. In particular, conflict-displaced families in Faryab, Kunduz, Farah, Badghis and Nangarhar were forced to leave their homes and land and move to provincial capitals - especially Herat, Jalalabad and Kabul – to live in precarious situations in urban informal settlements where already large numbers of land and housing insecure protracted IDPs and returnees were living. Moreover, the drought had a particularly detrimental effect on the already chronically housing and land-insecure population in Herat and other affected areas in the west and north. An estimated 70,000 individuals moved from their homes in the drought-affected districts of Badghis,
Overview

While the needs of conflict-displaced people and returnees remain a priority of the WASH cluster, a greater focus has been placed on responding to the urgent water needs of drought affected people over the reporting period. In line with the WASH Inter-Agency Contingency Plan of June 2018, as many as three million people across 20 provinces are affected by drought and more than 750,000 in 13 provinces are at risk of displacement if an urgent response at the place of origin is not provided. People have already started to displace from Badghis and Ghor provinces where, as of 30 June, more than 115,000 drought-affected people were living in makeshift shelters in Herat city and Qala-e-Now city, with limited access to water and sanitation. WASH partners promptly scaled-up their response in Badghis, Balkh, Faryab, Jawzjan, Sari-Pul and Takhar in places of origin to stop people from further displacing. Badghis, Faryab, Jawzjan and Sari-Pul provinces have the highest number of drought-affected people at risk of displacement.

The cluster will continue to prioritise people displaced by conflict, firstly in 45 hard to reach districts and secondly people living in 80 additional districts that the ICCT has defined as contested and hence partially accessible. The cluster aims to respond to the needs of 250,000 conflict-displaced people and conflict-affected host communities. A high influx of returnees from Pakistan is not foreseen in the next six months: An estimated 25,000 people are expected to return from Pakistan (documented and undocumented) and be in need of WASH services. An additional 50,000 prolonged returnees from 2016 and 2017 and their host communities are also estimated to remain in need of humanitarian WASH services.

The cluster has maintained WASH facilities at the Torkham and Spin Boldak border points for the past 18 months and will continue this support for the next six months as returns unfold. Similarly, the cluster will continue to monitor WASH needs in health facilities and schools, including community-based learning centres (CBLCs), that tackle the needs of returnees and displaced children.
Progress towards needs

Overall, during the first half of 2018, WASH partners provided lifesaving assistance to 527,114 affected people, or 33 per cent of the HRP target of 1.62 million people, including conflict-affected displaced people, returnees, Pakistani refugees, host communities and natural disaster-affected people, including those impacted by the drought. Amongst the people who received WASH assistance, 277,221 were women and girls, or almost 53 per cent of the total people reached. Cluster partners were guided and motivated to provide services in the area of highest need. Out of 78 districts that received WASH assistance, 32 are in hard-to-reach districts.

Cluster partners reached 234,106 conflict-affected displaced people with WASH assistance, nearly 100 per cent of the planned target, despite a reduced level of displacement so far in 2018, compared to the same period in 2017. This significant achievement is explained by the greater than expected numbers of displaced people assisted in 2016 and 2017 and during the reporting period.

Similarly, partners reached 94,617 returnees (90 per cent of them undocumented) with WASH assistance, despite lower than expected numbers of returnees (17,307 undocumented and 7,726 documented from Pakistan) in the first-half of 2018 compared to the annual WASH HRP target of 318,995 people. Here too, the number of people reached is more than expected because partners also assisted returnees from 2016 and 2017 whose WASH needs were unmet. Also, as many as 10,312 Pakistani refugees living in Khost and Paktika provinces were also assisted during the period.

A significant number of host communities accommodating displaced people and returnees (109,361) also received WASH services, especially durable solutions support (rehabilitation or building of new water systems) which have contributed to people’s local integration.

A total of 57,599 natural disaster-affected people were assisted during the first half of 2018. The figure is low when compared to the annual target of 286,000 people, because of the low incidence of natural disasters during the period, with the exception of the drought for which the actual response only started from mid-May 2018. Almost 80 per cent of the natural disaster-affected people who received a WASH response, are drought-affected. The cluster estimates that 750,000 people have acute water shortages and need a WASH drought response. The need will be highest during the months of July to September 2018.

In terms of the WASH sector’s targets, partners have achieved the following during the reporting period:

1. 265,220 people were reached with water assistance as per cluster standard, 19 per cent of the revised target of 1.4 million people for access with water;
2. 493,617 people were reached with hygiene kits and hygiene promotion, 32 per cent of the revised target of 1.55 million people.

The achievement on access to water is 40 per cent of the original HRP target of 650,000 people, which is slightly lower because of reduced caseloads of returnees from Pakistan. Compared to the revised target of 1.4 million people which accounted drought 750,000 affected people it is very low (19 per cent) because the drought response only started from late May and was yet to be accelerated during the reporting period. The same reason also applies for the other hygiene indicator, for which only 32 per cent progress has been achieved, compared to the revised HRP target of 1.5 million people. However, when compared to the original target of 750,000 people, the progress was actually 66 per cent by the end of June 2018.

As indicated above, the WASH cluster partners responded to 234,106 IDPs, out of which 141,518 people were in hard to reach districts. The number of people reached in these difficult to access locations is higher than the planned 50,000 people because the majority of the people are from previous years and were included in the proposals funded under the second AHF allocation of 2017. In all projects, especially in hard-to-reach areas, protection was mainstreamed to ensure that the services are in keeping with the safety and dignity of women, girls and boys.

One of the WASH cluster indicators is also “prevalence of under-five acute diarrhea among IDP, returnee, refugee and population affected by natural disasters is maintained below...”

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Overview

Similar to the first quarter, and in line with HRP plans, the main beneficiaries of multi-purpose cash (MPC) assistance over the second quarter remained conflict-induced IDPs. This group represented 79 per cent of the people assisted through MPC during this period, compared to 88 per cent during the first quarter. (Note that these figures do not include recipients of the UNHCR repatriation cash grant, which are reported under the HRP’s Protection chapter, rather than the MPC chapter). This decrease in the percentage of conflict displaced people as a share of total MPC beneficiaries is partly due to a significant increase in the number of undocumented returnees receiving MPC assistance (mostly post-arrival cash grants from IOM at transit centres). 18,800 undocumented returnees received IOM cash assistance in the second quarter, compared to 8,917 in the first quarter. It also reflects a relative decrease in the absolute number of conflict IDPs receiving MPC in the second quarter (45,136 people, compared to 68,439 people in quarter one). This does not reflect a decrease in conflict-induced displacement or of needs amongst conflict displaced people, but rather a decrease in the number of people in need which partners were able to reach – due to funding constraints and other factors (more details below).

Progress towards needs

During the first half of 2018, partners reached 144,000 people, or 28 per cent of those targeted with MPC. Progress towards reaching HRP targets is higher for conflict IDPs (38 per cent of target reached) compared to people displaced by natural disaster (15 per cent), undocumented returnees receiving general post-arrival MPC grants (15 per cent) and undocumented returnees receiving MPC grants to cover specialised protection needs (0 per cent).

With the exception of the drought, the number of people affected by natural disaster reached during the reporting period has been low due to the limited incidence of floods or landslides in the first half of the year. Cash assistance to drought-affected people, which is affecting much of western and northern
Afghanistan, has been hampered during the reporting period. Most of the response to the drought only started in July 2018 (especially for drought-displaced people in Herat and Badghis provinces), and is therefore not captured under the reporting period. Most of the cash response for the drought is in the form of cash-for-food or cash-for-NFIs (rather than multi-purpose cash), and is therefore led by and reported under FSAC or ESNFI, rather than under the MPC chapter. The decision to assist drought IDPs with smaller, sector-specific cash grants (e.g. cash-for-food grants of 6,000 AFN/household per month) rather than large MPC grants (e.g. MPC grant of AFN15,000/household per month provided to conflict IDPs under ERM) was the result of much discussion between the CVWG and other clusters. This decision was made to avoid creating a pull-factor and inadvertently encouraging displacement, based on the assumption that in-kind assistance or smaller cash grants were less likely to encourage drought-affected rural households to migrate to Herat and Qala-e-Naw to get assistance.

Results for MPC responses for undocumented returnees are lower than projected, in part due to the relative decrease in returns from Pakistan compared to what was projected, and because IOM has not been providing specialised protection cash grants as planned. IOM has been transitioning from in-kind responses to cash-based responses for post-arrival assistance to undocumented returnees (cash has now replaced in-kind NFIs in all transit centres apart from Kandahar and Kabul). IOM post-arrival assistance provided in the community is also now fully cash-based. Lower than expected results for conflict-IDPs are due to a number of factors, including funding constraints and the transition from Emergency Response Mechanism (ERM) 7 to ERM 8 (which temporarily halted ERM response in April 2018 and introduced stricter targeting criteria, thus reducing the number of people eligible for and assisted under the ERM). 1

![bar chart: % of households who receive MPC assistance who have medium or low coping scores as measured by the reduced coping strategies index (rCSI)](chart1)

![bar chart: Number of recent conflict-induced IDPs in need of assistance receiving multi-purpose cash grants to cover their basic emergency needs](chart2)

Assessments

As MPC is a modality of assistance rather than a need, no specific MPC assessments were carried out. For conflict displaced people, ERM partners (along with other emergency response partners operating in that area) carry out the HEAT needs assessment and select beneficiaries for each caseload, as part of their standard operating procedures.

In April 2018, REACH conducted an analysis of the entire ERM market assessment and post-distribution monitoring (PDM) data for the period August 2017 to March 2018. The PDM analysis included data from 4,395 ERM beneficiary household interviews, which represents about ten per cent of the overall number of households assisted over that period (PDMs were usually carried out two months after the distribution). The analysis found that households primarily spent their MPC grants to meet food, rent, and health needs. It also found that multi-purpose cash grants based on the Survival Minimum Expenditure Basket (SMEB) (i.e. AFN 15,000/household/month) have a clear, demonstrated positive impact on household wellbeing and survival in the emergency phase of displacement - as measured by reduced Coping Strategy Index (rCSI) results. rCSI results show that the proportion of families exhibiting ‘high coping’ behaviours (and hence more vulnerability and higher likelihood to fall into chronic poverty and suffer from long-term adverse

1. Under ERM7, all conflict IDPs who were displaced within the past six months received assistance, regardless of the household vulnerability/need. Under the current ERM8 cycle on the other hand, only IDPs who were displaced within the past 3 months and who meet specific vulnerability criteria (based on a combination of the Food Consumption Score (FSC), the reduced Coping Strategies Index (rCSI) and household debt levels) are eligible for assistance.

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Overview

The Government of Afghanistan acceded to the 1951 Convention relating to the Status of Refugees and its 1967 Protocol in 2005. UNHCR continues to advocate for the enactment of a National Refugee Law as a member of a taskforce comprised of the Ministry of Refugees and Repatriation (MoRR), Ministry of Foreign Affairs (MoFA), Ministry of Interior (MoI), and other government agencies, and UNHCR also provides technical support to enable the Government to meet its international commitments. At present, however, there is no national legal framework to regulate refugee protection in Afghanistan, and concerted advocacy by the UN and the international community is required to support the Government in putting in place refugee-specific legislation.

Under its mandate UNHCR provides international protection to some 78,210 refugees from Pakistan’s North Waziristan Agency (NWA) residing in Khost and Paktika provinces, as well as 521 refugees and asylum-seekers of various nationalities in urban areas, including Kabul, Herat, Kandahar and other cities across the country. UNHCR registers asylum-seekers as a tool of protection and conducts refugee status determination where the formal recognition of an individual’s refugee status would lead to a durable solution, such as resettlement. Considering the growing needs of the refugee population in Afghanistan, more resources are required to support the Government and partners to identify and assist persons with specific needs; support access to humanitarian assistance and essential services, including education and healthcare; ensure freedom of movement and uphold basic rights; and provide minimum safeguards against refoulement.

UNHCR is currently engaging with the Government toward gradually handing over responsibility for the NWA refugee population in Khost and Paktika provinces to the MoRR and local authorities, while ensuring access to essential services through community-based protection measures and continuing to monitor the situation. Advocacy and support to the Government and relevant stakeholders for refugees’ continued access to basic services in Khost and Paktika provinces is crucial.

RESPONSE MAP

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Given that there are nearly 40,000 school-age children among the refugee population, the low rates of school attendance represent a critical need to mobilize resources, raise community awareness about the right to education, and empower parents with income-generating activities so as to reduce reliance on child labour and other negative coping mechanisms.

**Progress towards needs**

**Pakistani refugees in Khost and Paktika provinces:**

Afghanistan hosts a protracted population of Pakistani refugees who fled North Waziristan Agency (NWA) in 2014 as a result of military operations that displaced almost half a million civilians. While UNHCR estimates that as many as 100,000 NWA refugees remain in Afghanistan, as of June 2018 some 42,261 refugees (8,319 households) were registered with UNHCR in Khost province while 35,949 refugees (7,794 households) were registered in Paktika province. Some 13,212 refugees receive shelter and other essential services in the Gulan camp in Khost province, while the majority of refugees live alongside Afghan host communities in various urban and rural locations in the two provinces. NWA refugees benefit from the generous hospitality of provincial Afghan Government authorities and the general population, due in part to tribal affiliations as well as a shared understanding of the trauma of forced displacement. UNHCR coordinates with national and international humanitarian agencies to provide targeted assistance to persons with specific needs among the NWA refugees in Khost and Paktika, and implements community-based protection measures to build the resilience of refugees, as well as the host population, promoting peaceful co-existence through livelihoods initiatives, shelter, education, healthcare, nutrition, WASH projects, and NFI distributions.

The primary source of income among refugees is non-agricultural daily-wage labour, while some refugees benefit from remittances from relatives working abroad in other countries. Key achievements in the first half of 2018 include:

- In Khost province, UNHCR concluded biometric registration of refugees from NWA between February and April 2018. The exercise was carried out in collaboration with the Afghan Planning Agency in close coordination with the local authorities and refugees; 3,937 individuals from NWA were registered, including families who had been forced to move from Paktika due to insecurity.
- UNHCR and partners identified, referred, and assisted the most vulnerable individuals and families including persons with disabilities or suffering serious medical conditions, single parents, women and children at risk, elderly people, and survivors of gender-based violence.
- Regular community shura meetings with men and women promoted awareness about education, vaccination, hygiene and sanitation.
- With one clinic and one mobile medical team, ACTD provided primary healthcare services to refugees in the Gulan camp including pre- and post-natal care, vaccinations, and therapeutic food to infant children to meet their immediate nutritional needs. HNI is implementing a primary health care programme for refugees in Alishir (Terezayi), Tani, Spera, and Matun districts of Khost, including two mobile teams and one fixed clinic. The HNI project included family planning, vaccinations, and infant nutrition, psychosocial counselling, and medical treatment for trauma (including SGBV), mental illness, and tuberculosis. OHPM also provided medical treatment, natal care, and vaccinations to refugee and host community patients in Khost province. IMC provided healthcare services to refugees in Paktika through both health centres and mobile clinics in Barmal and Urgun districts, as well as WASH projects as a preventative measure.
- UNHCR organized a capacity building workshop on SGBV for partners, while four workshops were organised on the Prevention of Sexual Exploitation and Abuse (PSEA) to increase partners’ awareness of acts that constitute sexual exploitation and abuse and their impact, as well as their responsibilities to report allegations.
- To address protection risks for the refugee population arising from a lack of potable water and sanitation, UNHCR and partners implemented WASH projects in Khost including the construction of wells and latrines. NCA and CoAR continue to implement WASH projects in Tani and Alishir (Terezayi) districts including construction of a gravity pipe network, latrines, bathing facilities, bore wells, chlorination of water points, and hygiene awareness programmes. Solidarités International began a new phase of its WASH program in Gulan Camp designed to empower the refugee community to maintain WASH services independently, and to foster self-reliance. In Paktika, IMC established WASH committees in Barmal and Urgun districts to promote hygiene awareness and build community capacity.
- UNHCR and its partners distributed 1,365 tents to refugees in Paktika to replace makeshift shelters and old tents that had deteriorated. Some 401 NFI packages were distributed to provide soap and hygiene items, essential household utensils, buckets, jerry cans and blankets, along with 27 gas cylinders for cooking. NWA refugee families were assisted in Khost and Paktika provinces through cash-based interventions and in-kind assistance such as firewood, blankets and woollen clothing, including support for highly vulnerable families from among the host communities.
- Through its partner, APA, UNHCR recently identified 356 refugee families to receive shelter packages in the coming months. The selection process is ongoing to identify other vulnerable families to benefit from shelter assistance.
- UNICEF provided 10,000 mosquito nets to ACTD and HNI for distribution to refugees in Gulan Camp, and

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PROGRESS AGAINST STRATEGIC OBJECTIVES CONTINUED...

EDUCATION IN EMERGENCIES WORKING GROUP

Team/Parents Teacher Association), which consist of a wide group of community representatives set-up in schools and CBEs. The shuras are important vehicles to address gender disparity in enrollment and to advocate for gender equality in education with the community, as well as to combat negative coping mechanisms such as early marriage and child labour. There is a school management shura for every school, with specific ToRs that define the roles and responsibilities of the head of the shura and its other members. The shura is meant to support children’s education, monitor classes, liaise with District Education Directorates (DEDs) and protect education and children.

In regard to protection mainstreaming, teacher trainings integrate child protection issues such as psychosocial support and positive discipline. Additionally, children in the temporary learning spaces are provided with lifesaving messages that strengthen their critical survival skills and coping mechanisms. The EiEWG is enforcing standardization of activities and practices in the EiE response and is leading partners to ensure safety, dignity and the rights of children and other target groups are met.

EiEWG has been working closely with the UNICEF/UNAMA MRM team and Child Protection in Emergencies sub-cluster to ensure that protection issues are addressed in a conflict-sensitive manner in terms of response, implementation and monitoring of the programme.

The EiEWG implementing partners have their own feedback and complaint mechanisms in place. In addition, Awaaz-Afghanistan, an inter-cluster complaint mechanism, also provides a toll free number through which people can send complaints or feedback, which are then referred to clusters, including the EiEWG. In turn, the EiEWG provides Awaaz with responses to the complaints received on a regular basis.

Challenges

The Education sector has continued to witness attacks or threats in insecure areas of Afghanistan. Since January 2018, there has been a marked trend of attacks on education institutions: the majority are related to the election process and schools being used as voter registration centres. Some districts in Nangarhar and Faryab provinces are also totally inaccessible to both government and EiEWG partners due to the high insecurity and strong presence of NSAGs. Some districts are accessed through local implementing partners.

The absence of reliable data was a major constraint to planning and preparing for an effective and efficient education emergency response. EiE is investing in the humanitarian-development nexus by building the capacity of the government to support the transition of classes from NGO partners to government-run schools. For example, the government is planning to construct 7,000 schools under the Education Quality Reform in Afghanistan (EQRA) programme and other funding streams. In this regard, EiEWG coordinates with the Ministry of Education to ensure schools are constructed in the EiE priority provinces and districts to ensure most in need children are transitioned and continue their education as a priority. Similarly, the EiEWG has developed an EiE multi-year national programme proposal through a consultative process with different stakeholders including donors, such as the Education Cannot Wait (ECW) project. This is another step to ensure EiE sustainability and contribute to the EiE humanitarian and development nexus.

EMERGENCY SHELTER & NON-FOOD ITEMS

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Assessments

The cluster assessed 378,805 people including IDPs, returnees and vulnerable host communities throughout Afghanistan, between January and June 2018. The needs identified were similar to 2017 and were mainly related to emergency shelter including cash-for-rent, shelter repair to improve the wellbeing and dignity of vulnerable families, transitional shelter support mainly for returnees and those facing prolonged displacement, and basic household items.

The assessments found many families living in open spaces, some in poorly constructed makeshift shelters that did not provide protection from the elements and exposed them to health risks. Women, in particular, were found to be in need of household items. Some families, including those assessed in Muqur district of Badghis province, were living in their partially damaged houses without windows and doors, with holes in the roof and damaged walls, due to effects of flooding and conflict. Families also incurred debts to pay for rent, while others faced eviction due to lack of money to continue
rental expenses. While some of the basic emergency shelter and NFI needs are being addressed, upgrading of shelters that are in poor condition as part of the emergency response and support for transitional shelters remain a major gap. Moreover, while national partners have comparatively better access to hard-to-reach areas for assessments and the delivery of assistance, due to funding and security limitations, up-to-date assessments are still a challenge in some areas.

Cross cutting issues

The cluster took a number of additional steps in 2018 to ensure better shelter programming and mitigate protection and GBV risks. The cluster has developed specific assessments and beneficiary selection tools that are gender sensitive and identified the different needs of boys, girls, men, and women, as well as those with various vulnerabilities such as people with a disability, older persons, child-headed households and female-headed households, who are primarily prioritised by the cluster. One GBV/Shelter-related training was conducted for 20 cluster partners at the national level. The training focused on identifying programme risk factors that could lead to protection and GBV incidents. Some of the associated factors included overcrowded living conditions, poor shelter design and families living in precarious conditions, weak beneficiary selection and poorly organised distributions. The cluster also developed cash-for-rent guidelines to assist partners to further improve cash-based interventions including beneficiary selection and accountability to affected populations to mitigate further protection risks and foster peaceful coexistence with host communities through assistance with rental contracts and hosting arrangements. While individual agencies have complaints and feedback mechanisms in place as part of their engagement with communities, the cluster is also coordinating with the inter-agency call centre, Awaaz, to improve communication with communities. Referrals and feedback are addressed in a timely manner.

Although the cluster made efforts to expand engagement with development actors as compared to 2017, limited progress was made in linking the emergency response with a more sustainable, medium and longer-term programme. However, the cluster is working with the Ministry of Urban Development and Housing (MUDH) to ensure that the National Housing Policy includes incremental shelter assistance linking humanitarian response to development.

The cluster uses both in-kind and cash-based interventions depending on the availability and accessibility of markets. Of the 235,737 people who were assisted by the cluster during the reporting period, 124,527 people received assistance through cash to cover rental expenses, NFIs and upgrades to existing shelters in poor condition.

Cluster partners engaged with communities in various ways including through participation in assessments, contributions to the implementation of activities, mainly for the upgrading of shelters, through the complaints and feedback mechanisms as well as post-distribution monitoring. Men in the communities were mobilised to support vulnerable families including female-headed households to upgrade their shelters. Separate discussions were held with women and girls to identify their specific needs and solutions to address them. As a result, female-headed households were prioritised for shelter assistance to improve their safety and dignity. Cash-for-rent was provided to families to create additional space for women and girls.

Challenges

By the middle of the year, the cluster had received US$9.9 million out of a total requirement of $46.5 million or 21 per cent of total requirements for the cluster’s work in 2018 (not including requirements for refugees – see below). Underfunding is a major challenge impacting on the response to critical shelter needs. In particular, the limited funding is impeding plans to respond to critical, lifesaving needs and to support transitional shelter solutions for 44,590 people, in line with the cluster's strategy to create safer and more dignified living conditions. The cluster will continue to advocate and seek funding from bilateral donors as well as the AHF, to address critical lifesaving needs.

A number of vulnerable families continued to live in their partially damaged/makeshift shelters due to funding challenges. In Herat, the cluster assessed 21,000 individuals who were displaced by drought mainly from Badghis and Ghor provinces in June 2018. Of those assessed, approximately 18,200 people were found to need emergency shelters and NFIs. These internally displaced people were mostly living in open spaces and some had been forced to use cloths or rags to construct makeshift shelters that did not meet minimum standards or provide protection from the elements. About 95 per cent of IDPs did not have basic household items, while for the remaining five per cent, their items were in very poor condition. The cluster provided NFIs to all 18,200 internally displaced people in need and emergency shelter to about 12,000 individuals, leaving a gap of more than 5,000 individuals due to the lack of resources. While resources were being mobilised to address the shelter gaps, an additional 60,000 people were internally displaced. This group is scheduled to be assessed in July 2018 and is likely to add to the caseload moving forward, although funding and capacity remains limited.

At the same time, the cluster will continue coordinating with the Ministry of Urban Development and Housing and UN Habitat to address chronic needs for permanent shelter solutions for returnees and people facing protracted displacement, given that the presidential land decree has now been approved.
provinces had the most inaccessible districts.

Funding remained a big challenge during the reporting period. Cluster partners reported that only US$27 million had been received against a total appeal of US$231 million which represents just 15 per cent of requirements. In particular, the livelihoods assistance target remained under-achieved because of the limited funding. Specifically for the drought response, the cluster requested US$94.5 million to provide lifesaving assistance to 1.4 million people. Despite this, partner reports suggest that most of the drought response has so far been provided through existing stocks and through funding from regular programmes, rather than dedicated, new drought funding. Some additional financing is known to be in the pipeline from the CHF, CERF, USAID, Australia, UK and other donors in the third quarter.

While the capacity of the cluster has remained consistent between 2017 and 2018 at 40 partners, the number of people reached by the same partners has increased from almost 946,000 last year to more than 1,281,000 people assisted with food (up 35 per cent). Livestock assistance has also increased 158 per cent compared to last year, up from 133,000 people reached in 2017 to almost 344,000 people in 2018. The reason for this improvement in reach is increased funding which has allowed expanded support to conflict affected, non-displaced people. A significant portion of this assistance was aimed at minimising the impact of the drought which pushed up seasonal food insecurity during first half of 2018.

**Assessments**

FAO, in consultation with the Food Security and Agriculture cluster, conducted a rapid dry spell assessment in 80 communities from 40 districts spread throughout 20 provinces, to capture a snapshot of the drought situation in the last two weeks of February, 2018. The results of the rapid assessment showed that deficits in precipitation of up to 70 per cent had resulted in very poor crop production, especially in rain-fed areas, i.e. most of the land available for agriculture in Afghanistan. Reports also point to a severe impact on livestock prices because of the poor condition of many animals. Livestock feed prices are reported to be very high because of the increased demand and low availability of fodder from pastures.

The cluster and partners (FAO, WFP, MAIL, National and International NGOs) were scheduled to conduct an Emergency Food Security Assessment (EFSA) from July to August, 2018. The assessment was delayed because of the new involvement of National Statistics and Information Authority (NSIA), as per the presidential decree on national level assessments. The NSIA took almost two months to agree on the methodology, sampling, and monitoring approach. The EFSA is being planned to be conducted in 350 districts of 34 provinces in Afghanistan. This assessment will provide details of the drought and its effect on Afghans, while also helping humanitarian actors and donors to plan for assistance in the coming months. Results are expected by mid-September.

In addition, cluster partners conducted various assessments during the reporting period to gauge the impact of the drought. These include: a) World Vision International assessment in Badghis Province; b) NRC in Herat; c) ACTED in Badakhshan, Balkh, Baghlan, Faryab, Jawzjan, Kunduz, Samangan, Takhar provinces; d) Oxfam in Daykundi province; e) Relief International in Nimroz province; f) Afghanaid in Ghor province; and g) WFP in Badghis province. The reports highlight the dire need to respond to needs for food assistance. Livestock protection support in earnest to avoid hunger, malnutrition, asset depletion and migration.

**Cross cutting issues**

The cluster made considerable achievements in mainstreaming protection, gender and disability in partners’ programme design and implementation in the first half of 2018. Major achievements include: a) agreeing on a needs-based beneficiary selection criteria and putting protection principles at the forefront of beneficiary targeting; b) agreeing on guidelines for protection principles to be included in cash transfer programmes; c) a joint review of all AHF proposals with gender and protection clusters/sub-clusters; d) scaling-up cash assistance as it provides choice and dignity to men, women, and children; and e) conducting a joint field mission to identify needs as part of response planning during the drought response in Badghis, Herat and Ghor provinces. The cluster is also working with FAO and its partners on vulnerability criteria for agriculture-based livelihoods programming.

The Cluster and its partners are members of the Afghanistan inter-cluster accountability call centre Awaaz. The Cluster is receiving complaints and feedback on its response on a daily basis. The cluster works with partners to provide an appropriate response to complaints as soon as they are received. FSAC received 52 cases through until June 2018, all of which were responded to and successfully handled. In addition, the cluster has conducted field visits to Herat, Badghis and Kandahar provinces to engage with affected communities, in addition to the IPC and EFSA surveys to understand their needs.

The cluster is working with development partners on identifying short and medium-term needs through the EFSA. Partners, including UN agencies and the Ministry of Agriculture, Irrigation and Livelihoods (MAIL), will be part of this assessment. This assessment data will also help the IPC analysis and will be used to guide short and mid-term
response options. The EFSA and IPC results will also be used by the cluster to identify opportunities for engagement with development actors on joint or specific programming that would support the continuum between humanitarian and development activities.

Partners chose to conduct part of their response in the form of cash programming, particularly where markets were functional, and resources were available. Almost 254,446 people received $4 million as cash support from 21 partners in 33 provinces during the reporting period.

Challenges

The cluster is facing multiple challenges in the current drought response. These include the agreement on the assessment details with MAIL and National Statistics and Information Authority (NSIA), access challenges and funding for the response.

The EFSA assessment has started and data collection is ongoing, with data analysis and reporting expected to be made available by mid-September 2018. The cluster is facing a challenge in reporting on the drought response. The Government of Afghanistan (Chief Executive Office) is asking for weekly reports and partners are unable to provide a weekly update on the number of people assisted. The number of cluster partners reporting activities has decreased from 80 per cent in the same period of the last year) to 65 per cent in the same period of 2018. The cluster will continue to sensitise partners to the need to report activities in a timely and accurate manner.

On access, the cluster has recently completed a mapping exercise for areas where UN agencies, international partners and national partners already have access. Hard to reach areas or areas with only access in parts of Badakhshan, Farah, Ghazni, Paktika, Uruzgan and Hilmand provinces were shared with the Humanitarian Access Group for support with unblocking barriers.

The cluster is working with multiple donors to ensure an expansion of funding. The cluster, WFP and USAID are working closely with the Government to ensure that wheat is provided from the strategic grain reserve. Through this programme, cluster partners will be able to aid almost 1.3 million people for five months (half ration) starting from August 2018. Funding for agriculture-based livestock protection responses is very limited and the cluster is working with partners to find solutions.

HEALTH

Continued from page 29

of hazards and vulnerabilities, an assessment of capacities and a risk calculation. The assessment provided detailed district-level risk analysis including the likelihood, magnitude, and impact of hazards, information on community coping capacities in the event of an emergency, information on mitigation and preparedness planning and a prioritisation of the geographical locations facing the highest risk of different hazards. It also provides baseline data to assess damages, needs, and capacities during any response phase, providing a sound evidence-base for decision-making, especially when resources are limited. The data will be published in conjunction with the Ministry of Public Health. Preliminary results suggest that Badghis, Baghlan, Farah, Khost, Kunar, Logar, Nangarhar, Nuristan, Uruzgan, Wardak are at the highest risk for conflict-related health issues. Badghis, Faryab, Kabul, Khost, Nuristan, Paktika and Saripul provinces have the highest risk for infectious diseases. District-level data shows that different districts in the same province may have different hazard levels, vulnerability status and risk scores, sometimes placing them at odds with the provincial average. Such information enhances the effectiveness and efficiency of policy making, planning and resource allocation of disaster risk reduction programmes.

A total of 14 other cluster-specific assessments have been carried out by partners. Results show an overall increase in the need for trauma care and a significant gap in post-trauma rehabilitation care. There is also a gap in conflict-related psychosocial support. Emergency obstetric care is also identified as a gap, particularly in conflict-affected districts, which correlates with a higher maternal mortality rate in those areas.

Cross cutting issues

The Health cluster ensures that all partners’ health service delivery is needs-based, inclusive and non-discriminatory. Health assessments include participation from vulnerable groups within affected communities. The Health cluster encourages the hiring of female health workers in facilities, if feasible and practical, to allow for culturally-appropriate services to be delivered to women and girls. Cluster partners work closely with the Ministry of Public Health and Basic Package of Health Service implementers to ensure complementarity. This year, the Health cluster has scaled-up support to the Central Command Centre to respond to the health crisis facing the country.
The data collected by the cluster is disaggregated by age and sex to better inform programmes and policies wherever possible.

Reproductive health care has been identified and prioritised for women and girls, including survivors of gender-based violence (GBV). In collaboration with the GBV sub-cluster, the Health cluster ensures that health workers are ready to respond to survivors of GBV using the “Standard Operational Procedures on Gender-Based Violence” through extensive capacity-building exercises.

The Health cluster is beginning to address mental health and psychosocial support gaps and is conscious of the need for assessments, planning and implementation of projects to involve both men and women, ensuring accountability to the whole affected population. This is particularly relevant in conflict-affected areas.

The cluster’s education campaigns actively target community leaders, women’s groups and youth associations, encouraging them to further disseminate health information and educate peers about the prevention and treatment of diseases and other health risks.

Challenges

The primary constraints impacting on health programming result from insecurity, including road closures and active fighting in the vicinity of health facilities. During the reporting period, 54 per cent of partners reported access restrictions in their work. An increasing number of targeted threats are being made against health facilities, while 76 per cent of health agencies have reported incidents of harassment, abuse or threats to healthcare workers. These trends have had a significant impact on the cluster’s ability to respond to assessed needs, with attacks on civilian infrastructure and personnel continuing to impact negatively on the progress towards health targets. The frequency of direct, targeted attacks on healthcare facilities and healthcare workers has gone up significantly, from 59 in the first half of 2017 to 67 in the same period in 2018. The cluster will continue its evidence-based advocacy messaging and work together with other actors in an effort to reduce attacks on healthcare facilities.

Funding for the Health cluster has been an ongoing challenge in 2018. According to FTS, cluster partners have received $10.8 million out of an overall revised requirement of $48.7 million, or just 22 per cent of the target. Due to the emerging nature of the crisis, a significant portion of the available humanitarian funding has been allocated to the drought response, presenting a challenge for health partners to respond to non-drought-related needs.

Assessments

There were a total of five multi-sectoral SMART, 3 Nutrition Rapid SMART and two multi-sectoral rapid assessments conducted from January to June 2018 in Afghanistan which had health and nutrition components. The key findings of these assessments are:


   Key findings: The nutrition situation based on combined Global Acute Malnutrition (GAM by WHZ <-2SD and/or MUAC <125mm and/or Oedema) was 9.6 per cent (7.5 – 11.5, 95 per cent CI) and combined Severe Acute Malnutrition (SAM by WHZ <-3SD and/or MUAC <125mm and/or Oedema) was found to be at 1.2 per cent (0.4 – 2.0, 95 per cent CI). The nutrition situation based on acute malnutrition was classified as poor according to WHO thresholds. There was also an 8.4 per cent (5.5 – 11.2, 95 per cent CI) malnutrition rate among pregnant and lactating women (PLWs) based on the MUAC <230mm cut-offs.


   Key findings: The combined GAM rate in Zabul province was found to be at 16 per cent (13.7– 8.3, 95 per cent CI) and the combined SAM rate was at 4.9 per cent (3.6–6.2, 95 percent CI). Hence the nutrition situation is considered critical in Zabul province according to the WHO threshold for acute malnutrition. On the other hand, 22.5 per cent (19–26, 95 per cent CI) of PLW were found to be malnourished based on MUAC <230mm cut-offs.


   Key findings: The combined GAM rate in Uruzgan province was at 26.5 per cent (23.6–29.5, 95 per cent CI) and the combined SAM rate was at 7.6 per cent (5.7–9.3, 95 per cent CI). So the nutrition situation is considered very critical in Uruzgan province according to the WHO threshold for acute malnutrition. At the same time, 14 per cent (11–17.1, 95 per cent CI) of PLW were found to be malnourished based on MUAC <230mm cut-offs. Crude and under five year old child death rates were found to be at 0.48 (per 10,000 pop/day) and 1.15 (per 10,000 U5/day) respectively in the province.

   The rates of exclusive breastfeeding (EBF among <6 month infants) and complementary feeding practices (introduction of solid, semi-solid or soft foods among 6-8 month old infants) and complementary feeding practices (introduction of solid, semi-solid or soft foods among 6-8 month old infants)
children) were also found to be poor (61.8 per cent and 34.2 per cent respectively).

4. Action Against Hunger nutrition and mortality SMART survey in Kunduz province, April 2018.

Key findings: The combined GAM rate in Kunduz province was at 12.7 per cent (10.5–14.9, 95 per cent CI) and combined SAM rate was at 3.8 per cent (2.5–5, 95 per cent CI). The nutrition situation is considered serious in Kunduz province according to the WHO threshold for acute malnutrition. 22.3 per cent (18.9–25.8, 95 per cent CI) PLWs were identified as malnourished based on MUAC criteria. Rate of exclusive breastfeeding (EBF among <6 month old infants) and complementary feeding practices (introduction of solid, semi-solid or soft foods among 6-8 month old children) were at 64.5 per cent and 18.8 per cent respectively. Complementary feeding practices are very poor in the province, as well as overall in Afghanistan which has direct impact on the health and nutrition situation of the children.


Key findings: The combined GAM rate in Kunar province was found to be at 20.9 per cent (18.4–23.3, 95 per cent CI) and the combined SAM rate was at 4.9 per cent (3.6–6.2, 95 per cent CI). Hence the nutrition situation is considered critical in Kunar province according to the WHO threshold for acute malnutrition. On the other hand, 17.8 per cent (14.9–20.7, 95 per cent CI) of PLWs were found to be malnourished based on MUAC < 230 mm cut-offs. The crude and under five child death rates in the province were at 0.54 and 1.26 respectively (rate per 10,000/day). Although the under-five death rate is below the emergency threshold of two (Sphere, 2004), it is relatively high compared to other provinces.

6. Action Against Hunger Rapid Nutrition SMART survey in Badghis (Bala Murghab district), Kandahar (Panjwayi and Zhari district) and Jawzjan (Faizabad and Aqcha districts) drought-affected provinces, June-July 2018.

Key findings: The combined GAM rates in Badghis, Kandahar and Jawzjan provinces (selected districts) were found to be 19.7 per cent (15.5–24.8, 95 per cent CI), 22.3 per cent (17.7–27.7, 95 per cent CI) and 27.4 per cent (20.1–36.1, 95 per cent CI) respectively. On the other hand, the combined SAM rate in Badghis, Kandahar and Jawzjan were at 5.7 per cent (3.1–10.1, 95 per cent CI), 6.5 per cent (4.1–10.1, 95 per cent CI) and 6.6 per cent (4.0–10.8, 95 per cent CI) respectively. The nutritional situation is quite dire in all of these drought-affected districts of Badghis, Kandahar and Jawzjan provinces. All these areas have also experienced a recent influx of IDPs and Kochi/Nomad people due to the drought. Host communities are also equally affected.


Findings: The Badghis rapid assessment by WVI found a staggeringly high GAM rate (by MUAC only) of 32.8 per cent and a SAM rate (MUAC only) of 15.9 per cent. A high incidence of diarrhea (39 per cent compared to a national figure of 29 per cent) was reported during the assessment. The mission report by Relief International identified a 13 per cent increase in respiratory diseases, a five per cent jump in conjunctivitis cases and a four per cent increase in malnutrition cases in the assessed locations of Nimroz province. It should be noted that these two assessments were rapid in nature and as such do not have population-level representative data.

Cross cutting issues

Nutrition cluster partners use standard technical guidelines which are consistent with global practices. The technical standards such as the IMAM (Integrated Management of Acute Malnutrition) address cross-cutting issues. IMAM is one of the main service delivery strategies used by the Nutrition cluster in delivering nutritional support to crisis-affected populations. IMAM is an integrated model that involves active participation of caregivers in the treatment of acute malnutrition and community health workers/volunteers in identification of acute malnutrition, referral and follow-up of identified children and pregnant and lactating women, thus increasing the community's programme awareness and engagement.

At the district level, Nutrition cluster partners have put concerted efforts into strengthening referral systems between the various components of the IMAM programmes including promoting linkages with referral for child protection services and psychosocial services, where available. Nutrition cluster partners engage with local governance committees in their capacity as local stewards for nutrition service provision thus bringing the management of these services closer to communities and concurrently increasing ownership and demand for services. Feedback is provided by these committees to Nutrition cluster partners on the communities' nutritional needs and this informs refinement of the Nutrition cluster's prioritisation and delivery strategies, as well as identification of any protection-related considerations. The IMAM model is based on the following principles that guide programme activities: (a) maximum coverage and access; (b) timeliness; (c) appropriate care; (d) care as long as it is needed; and (e) capacity-building and integration.

Nutrition cluster partners also conduct semi-quantitative evaluation of access and coverage (SQUEAC) surveys to identify barriers and boosters for nutrition service utilization. The findings of SQUEAC are used to take corrective measures in delivery of emergency nutrition services.

Challenges

During this reporting period the following challenges were faced by nutrition cluster partners;

- The insecurity situation continued to limit the provision of life-saving emergency nutrition services, frequency
of programme monitoring and supportive supervision activities. Emergency nutrition services have, at times, been interrupted due to insecurity and lack of access to deliver essential supplies to treatment facilities in remote villages.

- The Nutrition cluster faced challenges in getting timely and complete data/reports from partners, despite constant follow-up and reminders. To mitigate the reporting problem, the Nutrition cluster, together with MoPH/Public Nutrition department (PND), upgraded the nutrition database to an online system. The online reporting has been piloted in five provinces and it will be expanded to 34 provinces by the end of 2018. In addition, regular partner updates and reporting follow-ups have been incorporated into the meetings of the cluster and the Assessment and Information Management Working Group (AIMWG) highlighting all the partners who are not reporting.

- A funding shortfall was a major challenge which resulted in the provision of incomplete packages of nutrition services. In particular, the treatment services for MAM has only reached 25.7 per cent of the planned target for 2018, mainly due to inadequate funding. To date, Nutrition cluster partners have only received about 33 per cent of the funding required for life-saving nutrition services in 2018.

### PROTECTION

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Ghor and Herat to collective sites located on private land, especially in the provincial capitals in Herat and Badghis provinces, which is creating increased tensions and threats of forced eviction from private land owners/host community members.

Overall, a lack of access to state land, threats of forced eviction, inadequate housing conditions, and damage to housing and property due to the conflict, represented the most pressing HLP-related needs of displaced communities in Afghanistan during the reporting period.

Besides conflict and displacement, two other factors are further worsening the humanitarian situation in the country: (i) the continuous influx of returnees from Pakistan and Iran and (ii) the drought. Despite a decrease in the number of documented and undocumented returnees from Pakistan compared to the same period in 2017, there has been an increase in the number of deportees and returnees from Iran during the reporting period. According to IOM, since January 2018 almost 450,000 undocumented Afghans returned from Pakistan and Iran. The validity of Proof of Registration and Afghan Citizen Cards for Afghans living in Pakistan was extended until 30 September 2018, which postpones any decision about possible returns until the new Pakistani government takes office following the elections in July. However, based on the current political and protection environment in Pakistan, it is unlikely that there will be any large-scale returns from Pakistan in the near future. More critical appears to be the level of protection risks facing Afghans living in Iran. The economic situation in Iran has been deteriorating over recent months and opportunities for formal work are decreasing, both of which seem to be causing a significant push factor for displaced Afghans to return to Afghanistan. A significant increase in humanitarian needs and an increase in the numbers of individuals with specific needs (single females, elderly, other vulnerable individuals) are reported amongst Afghan returnees from Iran (now at 30 per cent of returnees). Of particular concern is the increasing number of unaccompanied minors deported from Iran through the Nimroz and Islam Qala borders requiring emergency child protection services, especially psychosocial support, case management, family tracing and reunification reported by the Child Protection in Emergencies Sub-cluster.

Based on IOM’s projections, more than 600,000 returnees from Iran can be expected by the end of 2018. These returns are compounding a very stressed situation in Western Afghanistan where the drought has already added another layer of acute vulnerability to pre-existing humanitarian needs.

The second element that is further degrading the humanitarian situation in the country is the drought. In 2018, two-thirds of the country, especially the western and north-western regions, has been affected by a severe rainfall deficit, with consequences for both the agricultural sector (production is already reported to be 57 per cent below the previous five year average) and water availability (compounding low pre-existing water sources). As noted in the revised 2018-2021 HRP, as a consequence of the drought and the reduced access to safe water, there will be increased health, nutrition and protection concerns for the affected population. Harsh living conditions are having a significant impact on the physical and psychological well-being of particularly vulnerable individuals and the adoption of dangerous negative coping mechanisms is causing outstanding child protection and gender-based violence issues, especially child labour and child recruitment affecting boys, selling children to pay off debts and forced child marriage affecting girls. Men are leaving their families behind either in villages of origin or places of displacement, to seek job opportunities in urban areas. Many are also still undertaking irregular migration to Iran, which is exposing them to violence, detention and deportation, as well as causing additional vulnerability to the women and children left behind who struggle to access basic services and whose humanitarian
needs are often not addressed. Miserable living conditions, drug addiction, negatively affected psychological status are among the most reported causes of increasing levels of family violence.

As described above, during the reporting period humanitarian and protection needs have increased, due to a combination of factors, especially deterioration of the security landscape, restricted humanitarian access, deterioration of the protection environment in Iran, increased vulnerability of returnees, and the unfolding drought-related crisis. However, lack of funding for the protection sector, limited capacities on the ground and the sensitivity of response modalities has led to progress towards the Humanitarian Response Plan targets being under-achieved.

Progress towards needs

The Protection cluster has continued to support Protection partners on the ground in their effort to monitor the protection situation in drought and conflict-affected locations, facilitate access to basic services, contribute to preventing, mitigating and responding to life-threatening risks, as well as using evidence collected during assessments and monitoring to carry out local, regional and national advocacy. In particular, protection actors have achieved the following results during the first half of 2018:

- The first-ever Protection Strategy for the Afghanistan Humanitarian Country Team was developed and endorsed in August, which will provide guidance towards promoting the Centrality of Protection in humanitarian action, including International Humanitarian Law (IHL) and Protection of Civilians components, principled humanitarian action to serve the most needy communities, especially those living in hard to reach areas, and strengthening the humanitarian-development nexus through increased focus on durable solutions for protracted and prolonged displaced communities.
- Protection monitoring has been led by UNHCR and implemented through a network of six national partners. In total, 95,063 people have been reached by protection monitoring during the reporting period. The main protection issues identified include: lack of access to education and health services, lack of adequate housing, access to land and job opportunities; GBV and CP issues, especially domestic violence, early marriage, child labour.
- 2,271 unaccompanied minors deported from Iran were provided with emergency child protection services, which included psychological first aid, psychosocial support and family reunification assistance.
- 61,141 children affected by internal displacement and/or otherwise affected by the humanitarian crisis have benefitted from psychosocial support services through static and mobile child-friendly services.
- 8,770 children who experienced violations of child rights received case management services, including referrals to access relevant services. The Protection cluster proposes to change the related indicator to “# of at-risk children registered and assisted through case management and referral services.”
- Enhanced coordination at national, regional and provincial level to improve data collection and reporting on grave child rights violations and increased information-sharing, especially between the Education and Protection actors, to report on and advocate against attacks on schools. A total of 25,731 at-risk women, IDP girls and boys, returnee and non-displaced GBV survivors have been assisted through multi-sectoral responses (legal, safety, health and psychosocial), which also included distribution of 7,392 dignity kits to GBV survivors.
- A total of 61,079 women, girls, boys and men have been reached through community dialogues as part of community mobilization to prevent GBV.
- GBV responses have increasingly been considered as a major cross-cutting intervention to be integrated into Health, WASH, Nutrition and FSAC programming as part of a multi-sectoral response. Teams responding to communities with a need for mine and explosive ordnance disposal (EOD) conducted surveys, provided risk education and cleared 1,240 explosive remnants of war across 69 communities in the first six months of 2018. These mobile teams have been able to respond rapidly in the aftermath of conflict and ground engagements, as well as survey areas of suspected mine contamination to help confirm or alleviate community concerns.
- Mine and ERW risk education, highlighting safe practices, the dangers of risk-taking behaviors and appropriate reporting mechanisms, was given to 79,010 people at encashment centres, transit centres and zero point areas. Most returnees are not aware of the conflict history and have not been exposed to the risks of mines or ERW, therefore imparting this knowledge, as they prepare to relocate and rebuild their lives in Afghanistan, is essential. Mine Action partners reported a 68 per cent increase in the ability of respondents to correctly identify safe and unsafe behaviors after mine/ERW risk education at the mentioned locations.
- Awareness on the rights of persons with disabilities reached 2,116 people; 50 per cent of these people were from Farah province, and 63 per cent of the total beneficiaries were women and girls. Some 692 people have been given prosthetics and/or orthotic assistance by mobile and fixed physical rehabilitation services in Kunar, Khost and Farah.
- The HLP-TF has been able to meet the related needs of affected communities in the north, east, west and central regions to a large extent. A total of 37,736 IDPs and returnees were reached through direct HLP support, legal assistance and civil documentation.
- The HLP-TF was instrumental in advocating for and drafting a new legal framework on land allocation with
ArazI and the TWG-Land (DiREC). The final draft of the Executive Decree on the Identification and Allocation of Land for Returnees and IDPs (ED) was approved in principle by the Cabinet on 5 March 2018, subject to minor revisions. At the end of the reporting period, the ED was awaiting full approval by the President, after which it will be promulgated and gazetted.

- 39,762 Child Protection actors and community members have been trained and sensitised on CP-related topics.

Assessments

Two country-wide protection-focused assessments have been conducted during the reporting period by REACH, in close collaboration with the Protection cluster and OCHA, namely the Protection Assessment of Conflict Affected Populations (PACAP) and the Fragmented Family Assessment (FFA).

The PACAP is a nationwide assessment whose aim is to provide an understanding of the protection implications of conflict on affected populations, offering a strong evidence base in support of the Protection cluster’s strategy-building and informing planning of the 2019 HNO and HRP revision. The FFA is an exploratory study aimed at supporting targeted, evidence-based interventions led by the Protection cluster in addressing the specific needs and vulnerabilities of fragmented Afghan families, highlighting information gaps and informing planning of the 2019 HNO and HRP revision.

The PACAP used a mixed methodology of quantitative household-level surveys (more than 17,000 interviews in all 34 provinces, with all conflict-affected populations), qualitative key informant interviews (to capture findings on sensitive protection concerns, and improve geographical coverage by including hard to reach districts) and qualitative focus group discussions (with women’s-support and youth groups to capture findings on sensitive protection concerns, such as GBV issues). Meanwhile the FFA adopted a qualitative methodology of 70 key informant interviews with fragmented family leads/representatives in the five urban, regional capitals of Afghanistan (Kabul, Herat, Kandahar, Mazar, Jalalabad).

Both assessments were conducted in parallel throughout the first six months of 2018 and at the time of writing the assessment reports were being finalised and endorsed.

Based on preliminary findings produced by the PACAP, almost nine out of 10 IDPs in Afghanistan moved because of armed conflict or intimidation by armed actors, while on average 60 per cent of returnee households claim to have been forced to return to Afghanistan. While the PACAP addresses broader protection-related issues, including displacement push and pull factors, socio-economic influences and demographic vulnerabilities, it is worth summarizing here some of the most significant protection-specific preliminary findings of the assessment. Killings, harassment and bullying, particularly arbitrary arrests and forced recruitment, were mentioned as the main protection issues for men in places of origin. Women particularly identified harassment and bullying. According to the assessment, an especially high percentage of displaced families who encountered armed fighting along displacement routes were reported in Sar-e Pul (89 per cent), Helmand (84 per cent), Uruzgan (76 per cent), Farah (75 per cent) and Kunduz (45 per cent), with 52 per cent of recent IDP households reporting physical injury compared to 39 per cent of IDP households who have been in more prolonged displacement. Forced recruitment seems to be particularly alarming in the South, with 26 per cent of conflict-displaced households reporting at least one member having been subject to forcible recruitment, compared to a nationwide average of nine per cent; also explosive devices contamination seems to be particularly concerning in the South compared to other regions, with 31 per cent of conflict-displaced households HHs in the south coming across mines/ERWs/PPIEDs during their displacement, compared to a national average of 12 per cent. The highest percentage of households reporting mines in their current location were in Uruzgan (53 per cent), Farah (20 per cent), Kunduz (18 per cent) and Helmand (10 per cent). 97 per cent of the HHs that reported mines stated that mines, ERW and/or PPIED forced them to negatively adapt their daily routine/movements/access to services and 41 per cent stated that the hazards were not sufficiently marked for recognition. On average, 16 per cent of female-headed households rely on breadwinners under the age of 16, compared with 10 per cent of male-headed households, which might represent an indicator of gender-based socio-economic discrimination and power imbalance. On average, 37 per cent of displaced female-headed households depend on verbal permission to be in their current location, while 23 per cent of male-headed households do, which raises additional protection concerns in terms of exposure to eviction threats. The Southern region seems to be particularly affected also in terms of reported GBV incidents, with a very high percentage of community members aware of harassment/violent attacks against women, girls, or boys (81 per cent in Uruzgan and 47 per cent in Helmand) and 42 per cent of conflict-displaced HHs who stated that there are places and areas in their community that women, boys, and girls should avoid or feel unsafe (the national average is only 18 per cent of conflict-displaced households noting these concerns).

Among the main preliminary findings produced by the FAA are the following key findings. Whether a family member is separated by force or choice makes a significant difference in the financial and mental well-being of the fragmented family. Families separated by force usually face an increase in vulnerabilities and needs (particularly food, clothes and psychological trauma). Female-headed households are reported to be particularly affected by fear of harassment and exposure to security threats. Cross-border family separation poses particular difficulties for fragmented families in terms of upholding family relations, with family links often being hindered due to the impossibility of conducting regular visits and calls.

Moreover, following on from a 2012 study on displacement patterns and the challenges inherent in protecting IDPs in Afghanistan, NRC, in collaboration with Samuel Hall, launched a study aimed at producing an updated analysis on the causes of prolonged and multiple displacement, presenting...
activities and outcomes have included: From January to June 2018, key protection mainstreaming decision-making fora. tools, and the introduction of dedicated coordination and integrated programming, establishment of mechanisms and sensitization, training, advocacy, strategy development, and with other clusters. Engagement has included protection mainstreaming within its areas of responsibility closely by jobs and housing. Women IDPs are struggling to the most significant obstacle to return for all IDPs, followed conflict and lack of durable solutions - insecurity was ranked nearly 20 per cent of IDP families sent at least one child to work. Most IDPs live in limbo due to the worsening conflict and lack of durable solutions - insecurity was ranked the most significant obstacle to return for all IDPs, followed closely by jobs and housing. Women IDPs are struggling to cope - exposed to cramped living conditions and the stress of adapting to a new environment, many of the surveyed women IDPs reported psychosocial and mental health concerns coupled with a lack of support or access to services.

Cross cutting issues

In 2018, the Protection cluster has continued to prioritise protection mainstreaming within its areas of responsibility and with other clusters. Engagement has included sensitization, training, advocacy, strategy development, integrated programming, establishment of mechanisms and tools, and the introduction of dedicated coordination and decision-making fora.

From January to June 2018, key protection mainstreaming activities and outcomes have included:

- Support to the Humanitarian Coordinated Assessments Working Group (HCAWG), REACH and OCHA for the development of protection-related data collection tools and analysis related to country-wide assessments, including the Hard To Reach Areas Assessment, the Protection Assessment of Conflict-Affected Populations, the Fragmented Families Assessment, and the Whole of Afghanistan Assessment.
- Working with ECHO-funded Emergency Response Mechanism (ERM) partners to develop the protection components of ERM programming including orientation to services, service mapping, referral pathways, and preventing harm to affected populations.
- Providing technical support to Protection partners and OCHA throughout the 2018 AHF first Standard Allocation by defining strategic priorities, providing technical guidance in project development and evaluation, ensuring protection mainstreaming and integration throughout other sectoral interventions, as well as monitoring implementation on the ground.
- Assisting partners to develop capacity-building initiatives, such as the NRC Protection Mainstreaming and PFA training, the production of assessment tools and leading of multi-sectoral needs assessments.
- The regional Protection cluster coordination teams participating in joint assessment teams and specific protection assessments to monitor protection concerns. Regional colleagues joining IDP Screening Committees to ensure accountability in the petition process.
- The development of the HCT Protection Strategy by supporting a dedicated ProCap assignment, provision of technical support and strategic advice. The HCT Strategy has been developed and endorsed by the HCT and its main focus is to promote the Centrality of Protection in humanitarian action, including International Humanitarian Law (IHL) and Protection of Civilians components, principled humanitarian action to serve the most needy communities, especially those living in hard to reach areas and strengthening the humanitarian-development nexus through increased focus on solutions for protracted and prolonged displaced communities.
- Service mapping was undertaken in all regions to inform response and the referral system. 4Ws were regularly updated.
- Participation in Emergency Response Contingency Planning for all regions.
- Analysis of protection monitoring and assessments has fed into reporting including SitReps, reporting against HRP targets/priorities, monthly fact sheets and technical advice for initiatives led at the regional level. Through better protection analysis the cluster was able to have a clearer understanding of priority protection issues and gaps, as well as provide more relevant guidance for field responses and advocacy. More strategic resource mobilization was also driven by improved protection analysis.
- Thanks to strong advocacy from the Western RPC and the HLP-TF, threats of forced eviction of IDP families living in some Herat informal settlements (e.g. Naw Abad) were halted until the Government has an alternative relocation site for the IDP families.
- Community-based protection mechanisms have been supported and strengthened, especially by child protection actors, by building on existing structures and with particular focus on resilience-building and inclusiveness of very marginalised people and groups.
- ‘Children on the Move’ programming provided a clear example of how humanitarian and development responses can be closely interlinked: emergency child protection services are provided on arrival at the border points and transit points, children are re-unified with their parents (when possible), referred to social workers from the Directorate of Labour and Social Affairs (DoLSAMID) and subsequently linked to wider support systems.
Main challenges faced by the Protection cluster and its areas of responsibility during the reporting period are primarily related to shortages of funding, limited partner capacity and coverage on the ground, inadequate availability of Protection data to inform analysis and response, as well as restricted operational agility due to security and access issues.

- **Access:** A combination of constraints related to different aspects of access has prevented partners from reaching large parts of the affected population. In particular, physical access to affected areas has often been hindered by the presence of active conflict or the volatile security environment. Access to some parts of the affected population, especially women and people with disabilities, has often been restricted due to limited availability of female field staff, socio-cultural norms restricting social interaction and limitations on freedom of movement for women.

- **Sensitiveness of the response:** Due to conservative socio-cultural practices and the volatile security environment, some protection activities, especially related to GBV response, are particularly sensitive and are often extremely difficult to implement. In particular, the GBV sub-cluster struggles to ensure adequate service coverage in the south, south east and north east regions due to insecurity, particularly conservative socio-cultural beliefs, poor presence and capacity of GBV actors. In order to mitigate obstacles and risks associated with the implementation of sensitive stand-alone protection activities, the Protection cluster is strengthening collaboration with other humanitarian actors to integrate protection components into relevant sectors (especially Healthcare, WASH and Nutrition), which is expected to improve access, increase community acceptance and outreach.

- **Limited funding:** Protection partners have limited independent funding aside from the AHF. Projects are concentrated in urban areas, with limited outreach to peri-urban and rural areas, as well as areas with active fighting. In particular, some child protection services for returnee children at border crossing points had to temporarily stop due to a shortage of financial resources for partners. In response to this, the cluster is making additional efforts to mobilise urgently required resources, while the protection component of the AHF 2nd Standard Allocation was specifically dedicated to filling child protection and GBV resource gaps. While the overall protection response is hugely underfunded, specific areas to be prioritised for additional funding are related to addressing IHL violations (especially attacks on education and healthcare facilities), mitigating the effects of conflict on civilians through PoC-specific interventions and up-scaling child protection and GBV responses to address outstanding protection issues exacerbated by displacement, especially to prevent/mitigate the adoption of negative coping mechanisms by particularly vulnerable families.

- **Limited capacities and presence in the field:** Protection partners’ coverage and expertise in the field has also been problematic, especially for the implementation of specialised protection services, such as psychosocial counselling, GBV and child protection case management, as well as support to and reintegration of children associated to armed groups. As mentioned above, the Southern region continues to be particularly problematic in terms of GBV coverage, while the child protection needs of returnee children are not entirely met due to the limited presence of child protection partners at the border crossing points in Herat and Nimroz. The effectiveness of the HLP-TF is limited by the handful of partners with core and technical HLP response capacity (especially NRC, UNHCR and UN-Habitat), which means the response is restricted to geographic areas where the three mentioned partners operate which is mainly the central, eastern and western regions. The HLP-TF’s coverage in the south, south eastern and northern regions is low mainly due to lack of HLP-TF Co-leads/partners’ presence and insecurity/access issues. During the reporting period, the APC had an operational capacity of 33 active partners comprised of 17 National NGOs, 11 international NGOs and five UN agencies - the same
remain unfunded. Through its contingency plan and revised needs of the 980,000 additional people affected by the drought, remaining funds are locked-in for ongoing projects. The proportion of funds have already been utilised (75 per cent), while the majority of HLP-TF is 41 per cent funded, the majority of donors being the largest. $2.8 million was provided by AHF. Even contribution to the new funding with CHF, ECHO and OFDA, $6.4 million was carried forward from 2017. Six donors contributed to the funding target. Of this, $9.3 million was raised in 2018 and $18.2 million needed for drought response).

Life-saving focus of the HRP: Most of HLP-TF’s activities are considered as development-related and not life-saving, hence majority of HLP-TF’s durable solutions activities are not reflected and reported in the HRP. As such, the HLP-TF is forced to seek funding from development donors.

Need to recalibrate some protection interventions to address different drought-related needs: In particular, the HLP-TF, due to the nature of its work, had been focusing mainly on the conflict-affected population, which has required HLP actors to embark on new activities/responses (e.g. rental housing assessments/database with the Shelter cluster) to address HLP needs of drought-affected communities.

Lack of comprehensive reliable data on protection issues and trends: During the reporting period, the delayed rollout of a centralised system for protection data collection, analysis and reporting continued to affect the quality of the protection analysis, response and evidence-based advocacy. In order to address a long-standing structural gap in Afghanistan, the cluster has focused on the development of a Protection Incident Monitoring System (PIMS) during the reporting period. The PIMS will be rolled-out during the coming reporting period and will serve as a central repository for data collected vis-à-vis protection violations, allowing for more robust analysis regarding geographic locations and populations of concern. The PIMS will enable the design of programmes which better account for the specific vulnerabilities and concerns of different groups – notably, those subjected to secondary or multiple displacements, children, women and girls, the elderly, people with disabilities and refugees. Greater links will also be sought between the PIMS and other existing information management systems, especially UNAMA’s Human Rights Service and the Country Task Force Monitoring and Reporting Mechanism (CTFMRM) to promote a more in-depth analysis on violations of IHL and HRs and facilitate joint advocacy efforts.

Shortage of protection capacities: A shortage of dedicated technical capacity for humanitarian protection in country, for both coordination and implementation, represents another significant challenge for the cluster. The majority of agencies simply have insufficient staff and lack adequate organizational interest in protection, which continues to erode the protection response amid a worsening crisis. Enhanced strategic prioritisation of protection issues, mobilization of resources and organic responses will be sought through the development of a Protection Strategy for the Protection cluster, which will build on and complement the HCT Protection Strategy developed in May.

Poor reporting by partners: Around 27 per cent of Protection cluster partners have not reported progress against HRP indicators and targets during the reporting period, which is believed to be mainly due to poor awareness of and capacities in using Report Hub. The sector is also reviewing its indicators for 2019 to ensure they are still relevant and suitable for monitoring, enabling better reporting.

**WATER, SANITATION & HYGIENE**

Continued from page 35

national average of 14.5 per cent”. The cluster intends to report the progress here by triangulating the data from Disease Early Warning System (DEWS) and Health Management Information System (HMIS). The WASH cluster has yet to obtain updated data from MoPH and analyze it for the particular area of concern. This will be done before the end of the year and will be included in the year-end reporting.

At the end of quarter two, the cluster had received US$15.7 million out of $39 million, or 41 per cent of the revised HRP funding target. Of this, $9.3 million was raised in 2018 and $6.4 million was carried forward from 2017. Six donors contributed to the new funding with CHF, ECHO and OFDA being the largest. $2.8 million was provided by AHF. Even though the WASH cluster is 41 per cent funded, the majority of funds have already been utilised (75 per cent), while the remaining funds are locked-in for ongoing projects. The needs of the 980,000 additional people affected by the drought remain unfunded. Through its contingency plan and revised HRP target, the WASH sector has clearly indicated a major shortfall in funding for the response to the remaining HRP target of almost one million people ($22.9 million gap with $18.2 million needed for drought response).

Some 22 agencies reported responding to WASH needs during the first half of 2018, reaching 78 districts in 29 provinces. While partner activity reporting has gradually improved over the period, the accuracy of financial reporting is still a major concern.

Assessments

In 2018, WASH partners conducted a total of 44 needs assessments across 22 provinces. Less than 60 per cent of all the assessments have associated reports available online (25 out of 44).

There were two large-scale rapid WASH assessments (the
first conducted in March 2018 by the Ministry of Rural Rehabilitation and Development (MRRD) and the second by REACH (conducted during the period). The survey conducted by MRRD and its PRRD offices in Daykundi, Hirat, Kunduz, Badakhshan, Balkh, Kandahar, Helmand, Badghis and Baghlan provinces indicated that on average, 15 to 35 per cent of water sources had been severely affected by the drought and hence had either completely dried-up or the water level had decreased to the extent that it was very difficult to collect enough water (both less in quantity and quality).

The REACH drought assessment was conducted in 900 CDCs of 10 affected provinces (Badghis, Balkh, Daykundi, Farah, Faryab, Hilmand, Jawzjan, Nimroz, Saripul and Uruzgan provinces). It found that families and communities in 28 districts (42 per cent of the 67 surveyed) were forced to change their existing water sources and over 43 per cent reported that they needed to walk more than one kilometre to fetch water from alternative sources. As many as 37 per cent of the people relied on unprotected water sources. As a result, 73 per cent of the key informants reported that families in their communities suffered from different water-related illnesses. Hence the findings suggest that the drought is not only putting the affected population at an elevated health risk, including from diarrhea, but also forcing people to endure a significantly higher level of difficulty in accessing safe water.

Cross cutting issues

WASH partners have mostly aligned themselves to the 2018 WASH cluster strategy and paid attention to the gender specific WASH needs of affected populations during planning, implementation and reporting. Male and female hygiene promoters (pairs) have been deployed for disseminating hygiene messages in many cases. Sanitation facilities are clearly marked ‘Male’ and ‘Female’ in most cases. WASH partners have also worked with the Education in Emergency Working Group (EiEWG) to ensure appropriate facilities in learning centres such as Community Based Schools: altogether 39 schools received WASH facilities and 265 are identified for support and work is in progress, especially in the eastern region supporting children of returnees and IDPs.

This year, MRRD, the national lead agency in the WASH sector has approved the long awaited WASH in Emergency Guidelines for Afghanistan. The document has a dedicated chapter on minimum standards, guidance notes and tips on how to mainstream protection, gender and disability. Partners have already started using the guidelines in developing project proposals. However, there is a need to translate the guidelines into local languages so that both government and non-governmental agencies (NGOs) can use the tool to train their staff.

Accountability to the affected population through end-user monitoring and feedback collection has been an area that the WASH cluster wanted to see progress on in 2018. Cluster partners are establishing water committees and water system caretakers in all projects where durable solutions are implemented (e.g. rehabilitation, installation of boreholes or expansion of existing water systems). Beneficiaries are represented by local bodies from the very beginning. However, the opinions of individual families or heads of family are not gathered to see if they have received what they needed and how they feel about the adequacy of the service provided.

In this regard, the cluster has started using the One-UN feedback hub (Afghanistan Awaaz) to receive complaints from individual families and the community as a whole. This is a new complaints mechanism in which partners are asked to incorporate a complaint mechanism in their proposals (especially those for the Afghanistan Humanitarian Fund as recommended by strategic review committee - STRC). The cluster is also developing a minimum monitoring package which includes a checklist and templates for end-user monitoring and feedback. The cluster aims to launch the tool in quarter four this year.

The cluster is involving affected communities, Community Development Councils (CDC) and provincial RRD from the onset of each project. Water management groups are established and trained by CDCs and provincial RRD. CDCs act as bridges between the community and RRD for future technical support. Thus every project implemented is linked to a longer term development structure, the CDC.

The needs of children and the elderly are carefully considered by designing latrines to be close to settlements and away from any obstacles (ditches or canals). Likewise, women and girls’ privacy is also carefully addressed by involving women and girls in latrine site selection, water point selection and establishing the height of tap water point.

Challenges

- Despite good progress integrating cross-cutting issues in programming, such as gender mainstreaming and disability, there are several shortcomings that need further attention: not all partners are deploying paired hygiene promoters (i.e. men and women) to address the specific needs of women and girls, due to a lack of female staff and cultural limitations for females to travel to the field. NGO staff also lack skills and specific guidance on how to increase women’s participation. In this regard, the WASH cluster is promoting the use of the new WASH in Emergency Guidelines to orient partner staff. The cluster has also established a code of conduct where partners are expected to fulfill the minimum SPHERE requirements and the new guidelines.

- WASH humanitarian funding for the drought remains a challenge. Even considering the funding from CERF ($2.2 million) and AHF ($5 million) that will go towards the drought response, there will still be a significant gap, estimated at $15.7 million. Without additional funding support, the WASH sector will not meet its planned target of 1.5 million people in 2018. In this regard, the cluster lead agency has been notified about the critical gaps and the cluster plans to advocate with donors through bilateral discussions and in the ICCT and HCT forums.
The Government is participating in cluster events and is co-chairing the cluster meetings. Yet it has not allocated funds for emergency preparedness and response. The general feeling among the government bodies is that emergency is the responsibility of the cluster and its humanitarian partners and that the Government should focus on development. The WASH cluster has advocated on this issue with the Director General of MRRD and the MRRD Minister’s senior advisor and will continue to do so in future.

Afghanistan is a drought-prone area and several of the districts frequently suffer from low snowfall and low precipitation. There is a clear lack of focus from development partners on addressing the longer-term needs of these populations living in marginal land. The WASH cluster has been consistently raising the lack of development action through the Water Sector Working group (WSG), a forum that discusses policy, strategy and technological issues of the sector for sustainable development.

There is a clear need for humanitarian partners to be more strategic in planning their response so that investments made through emergency relief can benefit the host population for longer periods (e.g. durable water solutions instead of water tankering where possible). The cluster has consistently been promoting such approaches with humanitarian partners. The cluster is advocating with development partners in the WSG to raise awareness with partners.

The WASH cluster will focus on the following activities for the next six months:

3. An estimated 980,000 drought-affected people will need at least four months’ support (from July to October) both at the place of displacement and the place of origin, through water tankering to stop further displacement, before durable solutions are implemented.

4. An estimated 417,000 people (among the 980,000 people targeted in point 1) will need durable solutions, such as drilling of deep boreholes equipped with solar pumps, or rehabilitation of water systems where possible. The WASH cluster will advocate and encourage partners to utilise humanitarian funding to make a humanitarian-development linkage by investing in longer-term solutions, as described above.

5. There is a need to replenish stockpiles of relief items in strategic locations. The response to drought-displaced people in Hirat required the mobilization of stocks from other locations. This replenishment is urgent in order to address the likelihood of increased conflict and violence and related displacement during and after elections. Some 25,000 additional hygiene kits, 2,500 latrines kits, 5,000 water kits worth $600,000 are required to remain fully prepared.

6. There is a critical funding gap of $10 million (excluding AHF funds) needed to meet the needs of some 350,000 people over the next six months. This is especially needed to continuously provide services to over 195,000 drought-displaced people in Hirat city and Qala-e-Now. In addition, there will be an urgent need for durable solutions in Badghis, Faryab, Jawzjan and Nimroz provinces to cover 230,000 people.

MULTI PURPOSE CASH

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impacts of displacement) reduced from 35 per cent to 15 per cent. Conversely, the proportion of families exhibiting ‘low coping’ behaviours (and hence more resilience) increased from 26 per cent to 44 per cent.

The market assessment analysis included 498 market surveys conducted over the same period, before each ERM distribution, to ensure that markets were well-functioning enough to support an MPC response, and accessible to target beneficiaries. The analysis found that 87 per cent of the assessed caseloads could access well-functioning markets, and 13 per cent could access moderately functioning ones. 86 per cent of suppliers reported that they currently faced no problems in terms of sourcing or transporting supplies, or generally running their business. Of the 14 per cent who did report facing problems, over half indicated that these were related to high transportation costs, while the rest cited insecurity on roads. Nonetheless, overall, the findings confirm that local markets in Afghanistan are generally accessible and stable, with traders able to operate and bounce back remarkably quickly in difficult and volatile security environments – and that cash-based responses are generally appropriate and feasible in urban and peri-urban areas in regards to market functionality.1

Cross cutting issues

The MPC chapter in the HRP falls under the technical oversight of the Cash and Vouchers Working Group (CVWG), which has been looking into issues of protection related to

1. However, many other factors aside from market functionality come into play when deciding of the appropriateness and feasibility of cash response, such as protection/ do no harm concerns, security, availability of cash transfer deliver mechanisms, whether project objectives can be met through cash transfers (especially in the case of nutrition, health or education programmes), etc.
Challenges

The main challenges faced by MPC partners in regard to conflict displaced people are growth in needs, given the deteriorating political and military situation in the country and decreasing funding. Another challenge is access. Many displaced households migrate to provincial or district centers – which are accessible to humanitarian partners – in the hope of getting humanitarian assistance. However, given current conflict trends and territorial gains by AOGs, it is likely that conflict displaced people are increasingly located in hard-to-reach areas. Field reports suggest that many households chose to move to harder-to-reach peri-urban or rural areas closer to the conflict, where the cost of living (including rent) is lower and where they are less likely to get evicted if they are living in makeshift shelters.

On a more technical level, one of the challenges faced by partners providing MPC – or cash assistance more generally – is transitioning away from cash-in-envelope (i.e. cash is brought to the distribution site and distributed directly by partner staff themselves) – which carries high risks for fund diversion and fraud – towards relatively less risky delivery mechanisms such as hawala (for emergencies) and mobile money (for longer term programmes with multiple installments per beneficiary). It is very important to note that fraud and diversion of assistance is neither specific to cash (it occurs in the case of both cash and in-kind assistance) nor to a specific cash delivery mechanism (cash-in-envelope, hawala, mobile money or bank). Indeed, most of the cases of beneficiary extortion or fraud occur not at the point of cash distribution, but in the beneficiary selection process or after the distribution. Having said that, some cash delivery mechanisms do hold higher risks of fraud – with cash-in-envelope being the riskiest due to several reasons. These include the lack of involvement of an external agent who transports and distributes the cash and has a business interest in showing that the money went to the beneficiaries in order to keep his contract with the partner (as is the case with hawala and mobile money), and the lack of financial tractability of the funds (as is the case with mobile money). While the CVWG has been strongly advocating for partners to phase-out cash-in-envelope and use hawala instead (for emergencies) and mobile money (for non-emergency, multiple-transfer ‘safety net’-type programmes), many partners are still using cash-in-envelope. This is partially due to institutional inertia and the reluctance of staff within partner organizations to go through the motions of contracting hawala dealers or mobile money companies, as well as adding a layer of complexity to the distribution process.

REFUGEE CHAPTER

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to refugees in other locations, along with 48,000 packs of Oral Rehydration Salts (ORS) and zinc to reduce the incidence of childhood diarrhea, which is one of the leading causes of infant mortality and malnutrition. 

UNHCR has worked to facilitate the inclusion of Pakistani refugees in the Afghan education system. As a result of advocacy on behalf of refugee children with the Ministry of Education (MoE), the Department of Education in Khost province agreed on the integration of refugees in government schools. UNHCR, together with CoAR, have developed a transition plan to prepare refugee students for enrolment in the national curriculum.

NRC provided primary education to boys and girls in Gulan camp and other locations in Khost province, ensuring minimal disruption to their learning and promoting the development of refugee children during
displacement. UNHCR and CoAR provide secondary education to refugees in Khost. Student enrolment and attendance in both NRC and CoAR schools fell in 2017 and continued to do so in the first six months of 2018. Outside of Gulan camp, in all districts, school-age children among NWA refugees are significantly less likely to be attending school than Afghan children in the host communities. Girls are more likely to be out of school than boys. The leading causes for children to be out of school include language barriers, lack of physical access, lack of female teachers, and parents not allowing their daughters to attend school.

- Some 6,905 refugee families in Khost and Paktika continued to rely on food assistance from WFP to meet their immediate needs for food security in light of limited livelihood opportunities. Food security remains the key concern of refugees raised in community consultations. The beneficiaries of food assistance include malnourished children, as well as pregnant and lactating women.
- UNHCR, MADERA and DACAAR worked to implement targeted livelihoods projects through engaging communities in “cash-for-work” initiatives, rehabilitation of basic community and productive infrastructure, market-driven technical and vocational trainings, and self-help group approaches, among other activities. Community mobilisation has been undertaken and 120 beneficiaries (60 males and 60 females) from among the refugee and host communities have been selected to participate in vocational trainings. In Matun district, two community resource centres were set up and equipped with required tools and materials for trainings on tailoring and embroidery, motorbike repair, and plumbing, while in Gulan camp 150 trainees are being selected for courses in two community centres that are being equipped.
- The right of refugees to return to their place of origin in NWA depends on opening of the border. Refugee families are reluctant to report their intentions for return to UNHCR. Moreover, the office has no capacity to monitor cross-border movements but relies on return updates from the Afghan local authorities and refugee elders. Since the re-opening of the Ghulam Khan Border in February 2018, UNHCR received reports from the Afghan border police that 704 refugee families (8,343 individuals) had crossed the border to NWA by end of April 2018.

Urban refugees and asylum-seekers – Afghanistan currently hosts 521 registered asylum-seekers and refugees of various nationalities in Kabul, Herat, Kandahar, and other cities. Meaningful and effective local integration is unattainable for the majority, particularly for those without valid national passports and other documents necessary to regularize their legal status in Afghanistan. As foreign nationals, they remain marginalized, with limited access to jobs in the informal economy. Voluntary return to their country of origin in safety and dignity is generally not possible, while resettlement opportunities are scarce. An increasingly volatile security environment and limited livelihood opportunities further contribute to a challenging protection environment in Afghanistan, particularly as the country struggles to meet the reintegration needs of Afghan refugees returning from neighbouring countries and IDPs affected by natural disasters and armed conflict. Key achievements in the first half of 2018 include:

- UNHCR provided cash-based and in-kind assistance to 144 of the most vulnerable asylum-seekers and refugees to help them pay for housing, food, utilities, and basic necessities.
- UNHCR ensured the inclusion of vulnerable refugees in livelihoods projects that promote self-reliance.
- Through agreements with public education and healthcare providers, UNHCR promoted access to these services for asylum-seekers and refugees.
- Despite limited opportunities, nine refugees were resettled from Afghanistan under emergency procedures.
- As noted above, UNHCR is engaged with government partners as part of the National Refugee Law Taskforce, and several meetings have taken place in preparation for a planned workshop to consider revisions to the current draft of the law to facilitate ratification by the Government.

Assessments

- During participatory shura meetings and field visits, most refugees have stated they are currently unwilling to repatriate to Pakistan, including refugees who have undertaken independent visits to NWA to assess for themselves the conditions of return.
- UNHCR and partners conduct shura meetings with tribal elders from the NWA refugee community, women, and youth, to design an inclusive and solutions-oriented protection strategy.

Cross-cutting issues

UNHCR promotes safety, dignity and respect for the rights of refugees across its programmes. Staff compliance with UNHCR’s Code of Conduct is mandatory, and together with its partners, UNHCR has put in place a comprehensive program for the Prevention of Sexual Exploitation and Abuse including a complaint mechanism for refugees. The registration of refugees and asylum-seekers is a key tool of protection mainstreaming, as it allows UNHCR to profile the population and identify the most vulnerable persons in order to target them for additional assistance. UNHCR and its partners include host communities into their programming to recognise their generosity in helping refugees and to promote peaceful coexistence, as well as building hosting capacity. UNHCR applies a participatory approach to its programmes, which includes community consultations, providing safe space to express opinions to people of different ages, genders, and personal circumstances. Regular participatory assessments inform UNHCR programmes and guide all interventions, ensuring inclusion, participation, women's empowerment,
and identification of the needs of the most vulnerable among the population. Through its community-based protection measures and similar projects, UNHCR works within the humanitarian-development nexus to capacitate refugees through education, training, and access to public services with the aim of facilitating sustainable solutions for them.

**Challenges**

- Access to refugees in Paktika remains a challenge on account of insecurity as anti-government elements (AGEs) control or contest a substantial amount of territory.
- Cultural barriers impact on efforts to comprehensively register the refugee population, especially women, while verification of the registered population who remain in Afghanistan is affected by secondary displacement and access constraints in both Khost and Paktika provinces.
- UNHCR does not have the permission of Pakistani military authorities to access and monitor refugee returns in NWAs, or to support sustainable reintegration in Pakistan.
- The lack of birth registration for refugee children is a significant protection concern due to the risk of statelessness and long-term disadvantages, including upon return to the country of origin.
- Supply channels for WFP food distribution have been adversely affected by the conflict. Negotiations are ongoing with local authorities to provide security in areas that are inaccessible so that food supplies can reach targeted beneficiaries. Furthermore, possible reductions in food rations will likely cause a deterioration of nutritional status of the refugee population; vulnerable families would be most affected owing to their limited coping mechanisms and reliance on food assistance through general food distributions.
- Most refugees including heads of household in Khost and Paktika have no formal education which undermines their prospects for durable solutions through local integration.
- According to ACTD, malaria, leishmaniosis, measles, diarrhea and other gastric conditions, scabies and psychological illness are the major diseases found among the refugee population. Most of these conditions are caused by poor sanitation and poor hygiene, including the drinking of contaminated water. There is, therefore, further need for targeted interventions in the WASH sector.
- Additional resources are required to increase the number of refugees benefitting from livelihood projects.
- UNHCR planned to provide only 400 shelters to refugees, while there is an additional need for some 300 shelters for the most vulnerable among the refugee population.
- Refugee families received a full kit of core relief items four years ago. As the life span of these items is only two years, UNHCR needs additional funds to replace the kits for refugee families in Khost and Paktika.
- For winterization assistance, the per-family cash allocation for Pakistani refugees in Khost is $100, which is not sufficient; in other regions, UNHCR distributes $200 per family.
- Generally, the lack of a National Refugee Law poses challenges to the coordination of refugee issues in the country, especially at a time when UNHCR is working toward handling over primary responsibility for refugee populations to the Government.
STRATEGIC OBJECTIVES, INDICATORS & TARGETS

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

1.1 HEALTH

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>Progress will be shared by cluster at the end of the year</th>
</tr>
</thead>
<tbody>
<tr>
<td>People suffering trauma-related injuries because of the conflict receive life-saving treatment within the province where the injury was sustained in either existing medical facilities or new First Aid Trauma Posts.</td>
<td>-</td>
<td>&lt;45%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Victims are better able to receive life-saving support</td>
<td>-</td>
<td>&gt;20%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>The proportion of victims travelling outside of the province where the injury was sustained is reduced</td>
<td>-</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Output</th>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>Progress will be shared by cluster at the end of the year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of trauma cases treated in the province in which the injury was sustained</td>
<td>55,000</td>
<td>80,000</td>
<td>46,789</td>
<td>58%</td>
</tr>
<tr>
<td>Number of trauma cases treated through FATPs</td>
<td>69,000</td>
<td>69,000</td>
<td>23,578</td>
<td>34%</td>
</tr>
<tr>
<td>Trauma cases received medical treatment within 24 hours.</td>
<td>150</td>
<td>300</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of surgical nurses available to treat trauma cases</td>
<td>20</td>
<td>60</td>
<td>21</td>
<td>35%</td>
</tr>
<tr>
<td>Number of new First Aid Trauma Posts established in high risk provinces</td>
<td>20</td>
<td>60</td>
<td>21</td>
<td>35%</td>
</tr>
</tbody>
</table>

1.2 NUTRITION

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>Progress will be shared by cluster at the end of the year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decline in GAM among IDP, returnee, refugee and non-displaced conflict-affected children under 5 (g/b) and pregnant and lactating women (PLW) suffering from acute malnutrition.</td>
<td>171,250</td>
<td>188,100</td>
<td>110,077</td>
<td>59%</td>
</tr>
<tr>
<td>Number and % of IDP, returnee, refugee and non-displaced children under five with SAM who are cured</td>
<td>119,411</td>
<td>179,756</td>
<td>34,295</td>
<td>19%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Output</th>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>Progress will be shared by cluster at the end of the year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of boys and girls 6-59 months with SAM and MAM enrolled in therapeutic feeding programmes</td>
<td>400,488</td>
<td>448,675</td>
<td>189,231</td>
<td>42%</td>
</tr>
<tr>
<td>Number of PLW with acute malnutrition enrolled in Targeted Supplementary Feeding Programme (TSFP)</td>
<td>216,272</td>
<td>137,040</td>
<td>50,341</td>
<td>37%</td>
</tr>
<tr>
<td>Increase of boys and girls aged 6-59 months with SAM and MAM enrolled in therapeutic feeding programmes.</td>
<td>972</td>
<td>972</td>
<td>2,272</td>
<td>234%</td>
</tr>
</tbody>
</table>
### Outcomes

**1.3 FSAC**

<table>
<thead>
<tr>
<th>In need: IDP, returnee, refugee and non-displaced conflict-affected women, men and children of all ages with a minimum household food consumption score above 42.5.</th>
<th>Target:</th>
<th>Q2 Progress: N/A</th>
</tr>
</thead>
</table>
| Progress will be shared by cluster at the end of the year.

**Output**

The FSAC cluster and coordinated response, provides necessary food assistance to affected households in a timely manner.

#### In need: 1,011,481

- Target: 1,422,417
- Q2 Progress: 1,126,844
- 79%

#### In need: -

- Target: -
- Q2 Progress: 52
- N/A

#### In need: -

- Target: 1,842,613
- Q2 Progress: 1,286,718
- 70%

#### In need: -

- Target: 1,842,613
- Q2 Progress: 61,990
- 3%

#### In need: 0.15

- Target: 0.14
- Q2 Progress: N/A

**Output**

The WASH cluster coordinated response provides necessary assistance to affected communities and people in a timely manner.

#### In need: 400,000

- Target: 650,000
- Q2 Progress: 265,220
- 41%

#### In need: 550,000

- Target: 750,000
- Q2 Progress: 229,087
- 31%

#### In need: 527,770

- Target: 369,439
- Q2 Progress: 85%

**Output**

The ES-NFI cluster and coordinated response, provides necessary assistance to affected communities and people in a timely manner.

#### In need: 38,700

- Target: 163,380
- Q2 Progress: 17,465
- 11%

#### In need: 280,000

- Target: 289,004
- Q2 Progress: 15,254
- 5%

#### In need: 531,700

- Target: 453,289
- Q2 Progress: 224,347
- 42%

#### In need: 19,500

- Target: 136,290
- Q2 Progress: 7,272
- 5%

#### In need: 320,000

- Target: 590,000
- Q2 Progress: 37,456
- 6%

#### In need: 600,000

- Target: 650,000
- Q2 Progress: 328,571
- 51%

#### In need: 544,000

- Target: 650,000
- Q2 Progress: 328,571
- 51%

#### In need: 344,000

- Target: 400,000
- Q2 Progress: 328,571
- 51%

#### In need: 935,000

- Target: 1,000,000
- Q2 Progress: 328,571
- 51%

#### In need: 1,000,000

- Target: 1,000,000
- Q2 Progress: 328,571
- 51%

#### In need: 300,000

- Target: 500,000
- Q2 Progress: 328,571
- 51%

#### In need: 500,000

- Target: 500,000
- Q2 Progress: 328,571
- 51%

#### In need: 1,000,000

- Target: 1,000,000
- Q2 Progress: 328,571
- 51%

#### In need: 1,000,000

- Target: 1,000,000
- Q2 Progress: 328,571
- 51%

#### In need: 300,000

- Target: 500,000
- Q2 Progress: 328,571
- 51%
### PROTECTION

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>% of IDP, returnee and non-displaced conflict-affected people in districts of high ERW risk who have exhibited learning and knowledge from mine risk education</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of IDPs, returnees and non-displaced conflict-affected people receiving MRE</td>
</tr>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of conflict, mine and ERW-affected communities visited by cross-trained teams, responding to survey, EOD and MRE needs</td>
</tr>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
</tbody>
</table>

### MULTI-PURPOSE CASH

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>% of households who receive MPC assistance who have medium or low coping scores as measured by the reduced coping strategies index (rCSI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of recent conflict-induced IDPs in need of assistance receiving multi-purpose cash grants to cover their basic emergency needs</td>
</tr>
<tr>
<td>In need:</td>
<td>360,000</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of natural disaster-affected people receiving multi-purpose cash grants to cover their basic emergency needs</td>
</tr>
<tr>
<td>In need:</td>
<td>12,000</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of vulnerable undocumented returnees who receive multi-purpose cash grants from IOM upon arrival, to cover NFI and transport needs</td>
</tr>
<tr>
<td>In need:</td>
<td>N/A</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of particularly vulnerable undocumented returnees (persons with specific needs) who receive specialized protection cash grants from IOM upon arrival</td>
</tr>
<tr>
<td>In need:</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### MULTI-SECTOR

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Number of IDPs in HTR areas receiving WASH, food, emergency shelter, SMEB and cash for rent assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>40,000</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of IDPs in HTR areas receiving SMEB assistance</td>
</tr>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of IDPs in HTR areas receiving emergency health services from mobile health teams</td>
</tr>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Output:</td>
<td>Number of mobile health teams deployed to areas where health facilities have been closed</td>
</tr>
<tr>
<td>In need:</td>
<td>30</td>
</tr>
</tbody>
</table>
Strategic Objective 2 (SO2): Reduce protection violations and increase respect for International Humanitarian Law

### 2.1 PROTECTION

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>% of civilian casualties are reduced compared to same period last year</th>
<th>Progress will be shared by cluster after PIMS is operational</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Target:</td>
<td>-4%</td>
<td></td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

Government, AGES, and humanitarian actors showing increased awareness of IHL

<table>
<thead>
<tr>
<th>Output</th>
<th>Advocacy is carried-out based on evidence collected through protection monitoring and protection assessments.</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>N/A</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### 2.2 PROTECTION

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>% reduction in number of attacks against education and healthcare facilities, compared to same period last year</th>
<th>Progress will be shared by cluster after PIMS is operational</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>Target:</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

Advocacy is carried-out based on evidence collected through protection monitoring and protection assessments.

<table>
<thead>
<tr>
<th>Output</th>
<th>Number of actors, communities and authorities trained and sensitised on IHL and protection outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>N/A</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### 2.3 PROTECTION

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>% of assessed, separated and unaccompanied IDP and returnee children, are supported and diverted from inappropriate care placements</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>N/A</td>
</tr>
<tr>
<td>Target:</td>
<td>8,422</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>1,429</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Outcome</th>
<th>Number of at-risk IDP, returnee and non-displaced conflict-affected women and children receiving assistance through multi-sectoral response (legal, safety, health and psychosocial support)</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>25,731</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>244%</td>
</tr>
</tbody>
</table>

Number of community members involved in community dialogues to prevent and respond to GBV.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Number of dignity kits distributed</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>14,880</td>
</tr>
<tr>
<td>Target:</td>
<td>4,810</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>32%</td>
</tr>
</tbody>
</table>

Appropriate coordinated response that provides necessary protection assistance to affected communities and people in a timely manner.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Number of actors, communities and authorities trained and sensitised on IHL and protection outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>0</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### 2.4 PROTECTION

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Number of care-givers and children sensitised and prevented from resorting to the use of negative coping strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>28,233</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>54%</td>
</tr>
</tbody>
</table>

Provision of protection services for children affected by conflict, natural disaster, or cross-border movements.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Number of at-risk IDP, returnee and non-displaced conflict-affected GBV survivors receiving assistance through multi-sectoral response (legal, safety, health and psychosocial support)</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>8,770</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>41%</td>
</tr>
</tbody>
</table>

Number of addressed children, registered and assisted through case management and referral services.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Number of IDP and returnee children receiving psychosocial support</th>
</tr>
</thead>
<tbody>
<tr>
<td>In need:</td>
<td>-</td>
</tr>
<tr>
<td>Target:</td>
<td>36,065</td>
</tr>
<tr>
<td>Q2 Progress:</td>
<td>39%</td>
</tr>
</tbody>
</table>
### 2.5 🗿️ PROTECTION

**Outcomes**
- Displaced and returnee families seeking temporary shelter and tenure security are not evicted or are resettled in dignified conditions.

<table>
<thead>
<tr>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>% Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>45,000</td>
<td>39,512</td>
<td>88%</td>
</tr>
</tbody>
</table>

**Output**
- Appropriate legal and community service mechanisms are in place to provide support to displaced and returnee families.

<table>
<thead>
<tr>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>% Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>19,200</td>
<td>8,506</td>
<td>44%</td>
</tr>
<tr>
<td>-</td>
<td>14,800</td>
<td>11,636</td>
<td>79%</td>
</tr>
</tbody>
</table>

### 2.6 📖 EDUCATION

**Outcomes**
- Children and youth (boys and girls) have access to quality primary and secondary education.

<table>
<thead>
<tr>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>% Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>110,000</td>
<td>351,000</td>
<td>140,000</td>
<td>40%</td>
</tr>
</tbody>
</table>

**Output**
- Resourcing (fiscal) is provided and training programmes are established to ensure quality primary and secondary education can be provided.

<table>
<thead>
<tr>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>% Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>110,000</td>
<td>351,000</td>
<td>140,000</td>
<td>40%</td>
</tr>
<tr>
<td>2,500</td>
<td>6,000</td>
<td>2,600</td>
<td>43%</td>
</tr>
<tr>
<td>60,000</td>
<td>351,000</td>
<td>140,000</td>
<td>40%</td>
</tr>
<tr>
<td>10,000</td>
<td>15,000</td>
<td>6,500</td>
<td>43%</td>
</tr>
<tr>
<td>4,200</td>
<td>15,000</td>
<td>6,500</td>
<td>43%</td>
</tr>
</tbody>
</table>

---

**Strategic Objective 3 (SO3): People struck by sudden onset crises get the help they need, on time**

#### 3.1 📲 MULTI-SECTOR

**Outcomes**
- People affected by natural disasters including severe weather conditions are assessed and responded to in a timely manner, preventing loss of life and risk of disease.

<table>
<thead>
<tr>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>% Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>286,000</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>-</td>
<td>286,000</td>
<td>-</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Output**
- Appropriate coordinated response that provides necessary assistance to affected communities and people in a timely manner.

<table>
<thead>
<tr>
<th>In need</th>
<th>Target</th>
<th>Q2 Progress</th>
<th>% Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>20%</td>
<td>286,000</td>
<td>141,518</td>
<td>49%</td>
</tr>
<tr>
<td>100</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>-</td>
<td>34</td>
<td>15</td>
<td>44%</td>
</tr>
</tbody>
</table>

---

Progress would be shared by cluster at later stage as per severe weather response.

Progress would be shared by cluster by the end of the third quarter.

Outcomes

- People affected by natural disasters including severe weather conditions are assessed and responded to in a timely manner, preventing loss of life and risk of disease.
- % of high-risk provinces (as identified by the ERP) where humanitarian stocks are pre-positioned
- Number of natural disaster affected people receiving WASH, Food, and SMEB assistance
- MT of food assistance pre-positioned in high-risk provinces
- % of estimated people in need are covered by ES-NFI stocks prepositioned in strategic locations
### 3.2 COORDINATION

**Outcomes**

- Financial reserves and emergency funding mechanisms are in place to support effective preparedness and response.
  - In need: 
  - Target: 4
  - Q2 Progress: 4
  - 100%

- % of people affected by sudden-onset crises supported by ad-hoc and additional emergency donor funds
  - In need: 
  - Target: 100,000
  - Q2 Progress: 
  - N/A

**Output**

- Fiscal resources and appropriate disbursement (fiscal and supply) mechanism is in place to respond in a timely manner.
- An appropriate mechanism is resourced to provide data collection, collation and analysis.

### 3.3 COORDINATION

**Outcomes**

- A contingency plan that includes an in-depth analysis of risks, vulnerabilities and capacities is developed and regularly updated.
  - In need: 2
  - Target: 2
  - Q2 Progress: 1
  - 50%

- Number of provinces in which inter-regional ERPs are held
  - In need: 5
  - Target: 5
  - Q2 Progress: 5
  - 100%

**Output**

- Inter-regional ERPs are updated every six months within the first and third quarters

- An appropriate mechanism is resourced to provide data collection, collation and analysis.

- Number of recommendations coming out of the ERP that are actioned by the HCT and at the national level
  - In need: 
  - Target: 3
  - Q2 Progress: 11
  - 367%
## REPORTING ORGANISATIONS BY SECTOR

<table>
<thead>
<tr>
<th>SECTOR</th>
<th>ORGANISATIONS</th>
<th>NUMBER OF PARTNERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education in Emergencies</td>
<td>AWEC, BEST, COAR, INTERSOS, NRC, PED, SCI, TLO, UNICEF, WCC, WCUK, WVI</td>
<td><strong>12</strong></td>
</tr>
<tr>
<td>Emergency Shelter and Non-Food Items</td>
<td>ACBAR, ACTED, ADRA, APA, CARE, CORDAID, DORR, DRC, HRDA, IMC, IOM, IRC, ME, OHW, ORD, RRAA, SC-USA, UNHCR, WHH, ZOA</td>
<td><strong>20</strong></td>
</tr>
<tr>
<td>Food Security and Agriculture</td>
<td>ACF, ACTED, CARE, CARITAS-G, CHA, COAR, CORDAID, IRC, MADERA, NCRO, NRC, OHW, OXFAM, PACO, RI, SCI, SI, TDH, UNHCR, WFP, WHH</td>
<td><strong>21</strong></td>
</tr>
<tr>
<td>Health</td>
<td>AADA, ACTED, ADA, AHDS, ARCS, BARAN, CORDAID, DRC, EMERGENCY, HADAFAF, HEWAD, HI, HNTPO, IMC, INTERSOS, IOM, IRC, JOHANNITER, MRCA, NCRO, NRC, OHPM, OHW, ORCD, OXFAM, PIN, PU-AMI, RI, RRA, SDO, SI, TDH, UNFPA, YHDO</td>
<td><strong>34</strong></td>
</tr>
<tr>
<td>Nutrition</td>
<td>AADA, ACF, ACTD, AHDS, AKHS, AMI, BARAN, BDN, BRAC, CAF, CHA, HEWAD, HNTPO, IMC, MEDAIR, MMRC, MOVE, MRCA, MSF, OHPM, ORCD, RHDO, SAF, SCA, SHRO, SM, TIKA, WVI</td>
<td><strong>29</strong></td>
</tr>
<tr>
<td>Protection</td>
<td>AADA, AAR, ACF, ADA, AECC, AHDS, APA, AREA, ASCHIANA, BARAN, CRDSA, DDG, DRC, FSD, HNTPO, HT, IMC, INTERSOS, IOM, IRC, MADERA, MCPA, MDC, NCA, NCRO, NPO/RRAA, NRC, OHW, OMAR, ORCD, OXFAM, PIN, PU-AMI, RI, SC-USA, SDO, SHPOUL, SI, TDH, UNFPA, UNHCR, UNMAS, WCC, WHH, YHDO, ZOA</td>
<td><strong>46</strong></td>
</tr>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td>ACBAR, ACF, ACTED, APA, AYSO, CARITAS-G, COAR, CRDSA, DACAAR, DOPH, DORR, HRDA, IMC, INTERSOS, IRC, MADERA, MEDAIR, NCA, NCR, NCRO, NPO/RRAA, NRC, PIN, PRRD, RI, SHPOUL, SI, UNICEF, WCC, WVI, ZOA</td>
<td><strong>31</strong></td>
</tr>
<tr>
<td>Multi-Purpose Cash</td>
<td>ACF, ACTED, ADA, CARE, CORDAID, DRC, IOM, IRC, NCRO, NPO/RRAA, NRC, OHW, OXFAM, PIN, PUI, SI, TDH, ZOA</td>
<td><strong>19</strong></td>
</tr>
<tr>
<td>ACRONYMS</td>
<td>EXPLANATION</td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>-------------</td>
<td></td>
</tr>
<tr>
<td>BPHS</td>
<td>Basic Package of Health Services</td>
<td></td>
</tr>
<tr>
<td>CHF</td>
<td>Common Humanitarian Fund</td>
<td></td>
</tr>
<tr>
<td>ESNFI</td>
<td>Emergency Shelter and Non-Food Items</td>
<td></td>
</tr>
<tr>
<td>ERW</td>
<td>Explosive Remnant of War</td>
<td></td>
</tr>
<tr>
<td>FAO</td>
<td>Food and Agriculture Organization of the United Nations</td>
<td></td>
</tr>
<tr>
<td>FSAC</td>
<td>Food Security and Agriculture Cluster</td>
<td></td>
</tr>
<tr>
<td>GAM</td>
<td>Global Acute Malnutrition</td>
<td></td>
</tr>
<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
<td></td>
</tr>
<tr>
<td>HCT</td>
<td>Humanitarian Country Team</td>
<td></td>
</tr>
<tr>
<td>HLP</td>
<td>Housing, Land and Property</td>
<td></td>
</tr>
<tr>
<td>HNO</td>
<td>Humanitarian Needs Overview</td>
<td></td>
</tr>
<tr>
<td>HRP</td>
<td>Humanitarian Response Plan</td>
<td></td>
</tr>
<tr>
<td>IDP</td>
<td>Internally Displaced Person</td>
<td></td>
</tr>
<tr>
<td>IED</td>
<td>Improvised Explosive Device</td>
<td></td>
</tr>
<tr>
<td>IHL</td>
<td>International Humanitarian Law</td>
<td></td>
</tr>
<tr>
<td>IOM</td>
<td>International Organization for Migration</td>
<td></td>
</tr>
<tr>
<td>IPC</td>
<td>Integrated Food Security Phase Classification</td>
<td></td>
</tr>
<tr>
<td>IMAM</td>
<td>Integrated Management of Acute Malnutrition</td>
<td></td>
</tr>
<tr>
<td>IYCF</td>
<td>Infant and Young Child Feeding</td>
<td></td>
</tr>
<tr>
<td>MAM</td>
<td>Moderate Acute Malnutrition</td>
<td></td>
</tr>
<tr>
<td>NFI</td>
<td>Non Food Item</td>
<td></td>
</tr>
<tr>
<td>NNS</td>
<td>National Nutrition Survey</td>
<td></td>
</tr>
<tr>
<td>NSAG</td>
<td>Non-State Armed Group</td>
<td></td>
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<tr>
<td>OCHA</td>
<td>United Nations Office for the Coordination of Humanitarian Affairs</td>
<td></td>
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<tr>
<td>OPD</td>
<td>Outpatient department</td>
<td></td>
</tr>
<tr>
<td>PDMC</td>
<td>Provincial Disaster Management Committee</td>
<td></td>
</tr>
<tr>
<td>PIN</td>
<td>People in Need</td>
<td></td>
</tr>
<tr>
<td>PLW</td>
<td>Pregnant and Lactating Women</td>
<td></td>
</tr>
<tr>
<td>PMT</td>
<td>Population Movement Tracking (for conflict displaced)</td>
<td></td>
</tr>
<tr>
<td>PMR</td>
<td>Periodic Monitoring Review</td>
<td></td>
</tr>
<tr>
<td>RAF</td>
<td>Rapid Assessment Form (for natural disasters)</td>
<td></td>
</tr>
<tr>
<td>RMF</td>
<td>Results Monitoring Framework</td>
<td></td>
</tr>
<tr>
<td>RUTF</td>
<td>Ready to Use Therapeutic Food</td>
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</tr>
<tr>
<td>SAM</td>
<td>Severe Acute Malnutrition</td>
<td></td>
</tr>
<tr>
<td>SFSA</td>
<td>Seasonal Food Security Assessment</td>
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<tr>
<td>UNHCR</td>
<td>United Nations Refugee Agency</td>
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</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>WASH</td>
<td>Water, Sanitation and Hygiene</td>
<td></td>
</tr>
<tr>
<td>WFP</td>
<td>United Nations World Food Programme</td>
<td></td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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</table>
FAMILIES WILL BE EXPOSED TO GREATER PROTECTION RISKS AND FATAL HEALTH HAZARDS

Shelter and provision of basic household items are pivotal for rebuilding resilience towards future shocks and the lives of affected families. Without adequate shelter, people may be left exposed to the elements, and their protection, health, nutrition, WASH and livelihoods needs exacerbated. Women and children are particularly susceptible to external hazards from the surrounding environment.

FOOD INSECURITY IS ON THE RISE

A significant increase in food insecure people could result in increased malnutrition, migration and mortality. Negative coping mechanisms, including asset depletion, will further affect people’s resilience. Timely funding for seasonal agriculture activities and life-saving food needs will help to cover the needs of targeted groups during winter and the peak hunger season.

LACK OF ADEQUATE HEALTH SERVICES WILL LEAD TO DISEASE & DEATH

Nearly 6 million Afghans have insufficient or no access to health care, while ongoing conflict has further exacerbated the health condition of the population due to increased rates of disease, a lack of safe drinking water, limited access to health care and a critical shortage of personnel and supplies. Combined, the effects of these will likely lead to higher maternal and child morbidity and mortality rates among conflict-affected civilians.

LACK OF NUTRITION SERVICES WILL COST THE LIVES OF CHILDREN AND STUNT THEIR FUTURE

457,000 children under 5 years old with severe and acute malnutrition and 121,500 PLW with acute malnutrition will not be able to enroll in IMAM programmes in 2017. Children who become malnourished face three times a higher risk of dying from communicable diseases than their healthy counterparts, while those lacking in the right nutrients face increased exposure to illness and sub-optimal development.

THE SAFETY, DIGNITY, AND WELL-BEING OF AFGHANS IS THREATENED BY CONTINUED EXPOSURE TO HARMFUL PROTECTION RISKS

Failure to address critical protection risks faced by affected individuals will have detrimental effects on their safety, dignity, physical and mental well-being. Protection violations including arbitrary arrest, detention, torture, GBV, child labour, child marriage, and child recruitment have long-lasting effects, and will – if ignored – hinder restoration of civilian life and put more lives at risk.

THREATEN THE HEALTH & DIGNITY OF THOSE MOST VULNERABLE

Lack of timely WASH response after the onset of an emergency results in disease outbreaks and rapid deterioration in health and nutritional status. Consumption of unsafe drinking water, lack of basic hygiene services and safe management of excreta removal directly impact on the health and dignity of those most vulnerable, particularly children, women and the elderly.

LACK OF RESPONSE LEADS TO GRAVE HUMANITARIAN CONSEQUENCES

If the humanitarian community fails to respond to the needs of refugees and returnees, the burden of humanitarian assistance will fall to hosting communities, many who have extremely limited resources. A lack of adequate support to this population could lead to secondary displacement and failure to deliver basic services will endanger the lives of already vulnerable individuals.
WHAT IF...

CONTRIBUTING TO THE HUMANITARIAN RESPONSE PLAN

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

www.humanitarianresponse.info/operations/afghanistan

DONATING THROUGH THE CENTRAL EMERGENCY RESPONSE FUND (CERF)

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

www.unocha.org/cerf/our-donors/how-donate

DONATING THROUGH THE COUNTRY HUMANITARIAN FUND

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

www.unocha.org/what-we-do/humanitarian-financing/country-based-pooled-funds

For information on how to make a contribution, please contact:

chfafg@un.org

IN-KIND RELIEF AID

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

logik@un.org

REGISTERING AND RECOGNIZING YOUR CONTRIBUTIONS

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

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

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

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