The flood season in Afghanistan primarily runs between March and June due to snow melt and rain. Several factors have combined to increase the severity of potential flooding in 2019, with serious early floods already occurring in March. Following two years of severe drought, the influence of global weather patterns (El Niño) has seen above average precipitation across much of the country in 2019. Given the increased likelihood of above average temperatures, as well as above average rainfall and snow at higher elevations, the risk of flooding is elevated through until the end of the rainy season (April-June) in the western, northern, and central areas of Afghanistan.

According to iMMAP analysis, 190,789 HH (1,335,000 people) are living in areas that are vulnerable to flood impact. Based on forecasts and historical data, the Inter-Cluster Coordination Team (ICCT), along with technical partners FEWSNET, iMMAP and Afghan Meteorological Department (AMD) have estimated that 499 villages and 281,000 people (40,150 HH) are at risk of severe impacts from flooding in 2019 and will require immediate humanitarian assistance over the course of the three-month season. However, the above-mentioned early flooding in March and April has already affected over 200,000 people and destroyed over 10,000 homes, putting the season on track to potentially exceed initial planning figures. Beyond the direct damage caused by the flooding, there have been serious losses of agricultural land, livestock and livelihoods. With many flood-risk areas already affected by the severe drought in 2017/18 and ongoing conflict, there are serious concerns about increasing food insecurity, malnutrition and the spread of communicable diseases, including AWD/cholera, if the needs of flood-affected families are not addressed in a timely manner.

**Estimated planning figures for entire season (February-June)**

- People in need affected: 281,000
- Provinces/areas affected: 34
- Houses destroyed and damaged: 33,600
- Funding required: $34.77 M
## STANDARD RESPONSE ACTIVITIES

The Standard Response Package is a set of relief items and access to services that is to be provided at the household level, based on an assessment that a family has been affected by flood. It is a minimum package and does not fully take into account diverse needs and special requirements of different groups, and therefore delivery of the package should not be considered enough to address all needs without further technical assessment. The minimum range of responses to be provided by each Cluster is outlined below.

<table>
<thead>
<tr>
<th>Education</th>
<th>• Provide student, teacher, classroom &amp; recreation kits</th>
<th>• Hygiene kits for use in school settings</th>
<th>• Provide Temporary Learning Spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>ES-NFI</td>
<td>• Standard NFI package or cash as appropriate</td>
<td>• if required: Tents, shelter kit or cash for shelter as appropriate.</td>
<td></td>
</tr>
<tr>
<td>Food Security</td>
<td>• 2 months food assistance</td>
<td>• Livelihood support</td>
<td></td>
</tr>
<tr>
<td>Health &amp; Nutrition</td>
<td>• Emergency Health Services through mobile &amp; static clinics, including nutrition screening/referral</td>
<td>• Expanded disease surveillance</td>
<td></td>
</tr>
<tr>
<td>Protection</td>
<td>• Referral of protection cases</td>
<td>• GBV screening and referral</td>
<td>• Dignity kit distribution</td>
</tr>
<tr>
<td>WASH</td>
<td>• Family hygiene kit</td>
<td>• if required: Safe drinking water by tankering or water treatment kits</td>
<td>• Emergency latrines and bathing spaces</td>
</tr>
</tbody>
</table>

## RESPONSE BY SECTOR

### EDUCATION in EMERGENCIES

- **Estimated number of people likely to be in need of cluster support:**
  - 71,150 school-age, flood-affected children will be in need of education support

- **Priority preparedness activities:**
  - Implement some basic Disaster Risk Reduction (DRR) and risk mitigating measures and activities in schools which are affected by and/or at risk of flood
  - Train school Shuras and consult them on how to respond when there is flood in their area
  - Recruit and train teachers to run CBE/EIE classes

- **Priority response by activities:**
  - Provide Temporary Learning Spaces (TLS) or tents in schools and communities affected by flooding
  - Carry out emergency rehabilitation of classrooms
  - Provide teaching and learning materials such as student kits, teacher kits and classroom kits, as well as hygiene kits for use in school settings

- **Challenges and Constraints:**
  - Lack of access to damaged schools due to conflict or infrastructure damage

- **Protection mainstreaming activities/commitments:**
  - Flood-affected children will benefit from psychosocial support, recreational activities and support from teachers in the classroom to reduce the impact of the trauma
  - Training and capacity building for service providers to strengthen the referral system

### Funding required

- **$1.55 Mil.**
Afghanistan: Flood Response Plan (February to June 2019)

RESPONSE BY SECTOR

EMERGENCY SHELTER and Non-Food Items (NFI)

10 Mil. $

Funding required

Estimated number of people likely to be in need of cluster support:

- Of the people affected, 242,000 individuals are anticipated to be in need of emergency shelter, with 22,500 houses severely damaged and 12,000 houses destroyed. 84,500 individuals are expected to be in need of NFI assistance. The cluster prioritises shelter assistance only to households whose homes are severely damaged or completely destroyed and NFI assistance to households whose homes are completely destroyed.

Priority preparedness activities:

- Identify shelters in safe areas in collaboration with relevant ministries and ANDMA.
- Assess level of safety in at-risk areas and of key infrastructure in coordination with other agencies.
- Identify actors involved in emergency shelter and NFI distribution and assess their capacities.
- Pre-position shelter kits and NFIs at regional and provincial level.
- Advocacy on the establishment of ES/NFI pipeline for the cluster.
- Mapping of possible distribution points.

Priority response by activities:

**Phase I (first 30 days)**

- Provide standard emergency shelter kit – family sized tents including 2 pcs of plastic tarpaulin, shelter repair toolkits, cash for shelter upgrades/repair, or cash-for-rent assistance.
- Provide standard emergency NFI kit (cash or in kind).
- Cash as a modality will be used for rental assistance, NFI assistance and shelter upgrades/repair solutions only in locations where individuals have capacity and access to construction materials, NFI items, rental markets, skilled and unskilled labour.

**Phase II (Recovery 1-3 months)**

- Damage assessment, reconstruction and rehabilitation programming incorporating ‘build back better’ initiatives.

Challenges and Constraints:

- Given the potential scale of shelter needs, cluster members may have to recruit significant numbers of staff to implement shelter programs in a short period.
- Markets for shelter/NFI items may not be nearby, safe and accessible.
- Lack of resources for transitional shelter solutions for families whose homes are completely damaged.
- Delays in funding that disrupt pipelines and prepositioning of shelter and NFI stocks.
- Access to sufficient quantities of water for construction is critical. Availability will be impacted by the weather, damage to wells and irrigation channels.
- Localised increased demand for NFI and rental properties may limit available supply.

Protection mainstreaming activities/commitments:

- Needs assessments and response will incorporate sex disaggregated data and the various needs of girls, boys, women and men.
- Consultative meetings with all beneficiaries, including women and girls, to understand needs and preferences for location, design, and methodology of assistance.
- All partners to enhance existence of a feedback and complaint mechanisms during on-site monitoring, as feasible through a complaint desk or the use of visible staff presence. Awaaaz can also be promoted as another avenue.
- Shelter construction is designed to ensure that women, men, girls and boys with specific shelter needs or vulnerabilities are prioritized and supported.
- Shelter/NFI distribution locations are designed so that all individuals can access and use them with safety and dignity.

FOOD SECURITY and AGRICULTURE (FSAC)

13.59 Mil. $

Funding required

Estimated number of people likely to be in need of cluster support:

- 499 villages and 281,000 people (40,150 HH) are expected to be at risk of severe impacts from flooding in 2019 requiring immediate lifesaving food or cash-for-food assistance.
- Serious damage to agriculture and livestock expected to occur on 120,000 Jerib of land and approximately 16,000 households will require livelihoods assistance.

Funding Required:

- $US 13,590,000 (Food security - 11.24 million, Livelihoods - 2.35 million)

Priority preparedness activities:

- Disseminate information on floods hazards to partners and government to minimise losses.
- Procure and pre-position food supplies in provinces at risk of flooding.
- Reach agreement with cash transfer agents and conduct market surveys to understand the viability of cash transfer programmes in at-risk areas.
- Procure, pre-position and distribute additional food, agricultural and livestock inputs, as well as tools and materials for cash-for-work to strategic locations.
- Preposition livestock inputs (animal feed & drugs)
- Signing of agreements between cluster and implementing partners on pipelines.

Priority response by activities:

- Distribution of food rations to identified vulnerable populations for 2 months
- Cash assistance to affected families to cover their basic food needs where appropriate in urban and semi-urban areas.
- Distribution of livelihoods interventions (seeds and fertilisers) or cash grants for livelihoods.
- Cash assistance to affected families to cover their basic food needs where appropriate in urban and semi-urban areas.
- Distribution of livelihoods interventions (seeds and fertilisers) or cash grants for livelihoods.
- Coordination with government and development partners on livestock vaccination and treatment of animals in response to potential disease outbreak.
- Procurement and distribution of fast-growing vegetable seeds and basic fertilisers.
- Procurement and distribution of household-level poultry packages.
- Agricultural land rehabilitation through conditional cash grants/cash-for-work.

Challenges and Constraints:

- Delays in funding that disrupt pipelines or lead to FSAC missing key seasonal deadlines. Such delays have negatively affected humanitarian responses in previous years.

Protection mainstreaming activities/commitments:

- Protection concerns are integrated into beneficiary selection criteria for both food and livelihoods programming FSAC partners are provided with distribution guidelines on protection principles especially for women and children beneficiaries.
- FSAC partners will provide timely food assistance and livelihoods support to protect livelihoods and mitigate the risk of people resorting to irreversible negative coping strategies.
- FSAC is committed to work closely with protection partners to ensure protection concerns are reported at the right forum, and to ensuring that technical advice is mainstreamed into its programming.
### Response by Sector

#### Health

<table>
<thead>
<tr>
<th>Estimated number of people likely to be in need of cluster support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 112,600 flood-affected people are expected to be in need of health services</td>
</tr>
</tbody>
</table>

**Priority preparedness activities:**
- Identify district-level NGOs having potential and capacity to respond to flood-related needs.
- Surveillance and monitoring of potential triggers and vulnerability for disease outbreaks.
- Procure medicines and other medical supplies. Identify warehousing options for pre-positioned or relocated stocks.
- Train the community through Health Social Mobilization activities to define their role in a disaster.

**Priority response by activities:**
- Support the Ministry of Public Health (MoPH) to follow-up on needs in affected areas, particularly in terms of funds and logistical support for in-country relocation of supplies.
- Provide Emergency Essential Health Services including comprehensive primary health care through mobile and static clinics and strengthening of referral mechanisms.
- Provide essential medicines and supplies for treatment of communicable diseases especially cholera and other diarrheal diseases. Provide emergency maternal and new-born care, including: antenatal care, delivery if necessary, post-natal care, and new-born care in flood-affected areas, and provision of appropriate health kits.
- Vaccinate children in health centres in affected areas.
- Distribution of IEC materials addressing hygiene promotion and disease prevention.

**Challenges and Constraints:**
- Unavailability of trained and skilled health workers in remote and hard-to-reach areas.
- Disrupted communication channels due to rains and floods.
- Provision of health services to scattered populations of IDPs (both urban and rural) is challenging with limited resources.
- Lack of presence of NGO partners for health service delivery in remote locations.

**Protection mainstreaming activities/commitments:**
- Ensure that the location of health facilities and routes to them are away from actual or potential threats such as violence and that they are accessible to all.
- Ensure that beneficiaries know their right to health care, and where/how to obtain it.
- Set up well-understood mechanism for suggestions and complaints in all health facilities.

#### Nutrition

<table>
<thead>
<tr>
<th>Estimated number of people likely to be in need of cluster support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 249,000 flood-affected people are estimated to potentially need Nutrition Cluster support. This would include more than 42,000 children and 28,000 pregnant and lactating women (PLW). The figure is likely to include more than 1,200 severe acute malnutrition (SAM) cases</td>
</tr>
</tbody>
</table>

**Priority preparedness activities:**
- Pre-position nutrition supplies and equipment.
- Capacity-building of government & partner personnel on Nutrition in Emergencies (NiE) and Infant and Young Child Feeding (IYCF) responses.
- Ensure the presence of active coordination mechanisms with all related stockholders at zonal and provincial levels.
- Ensure all facilities have adequate supplies and trained personnel.

**Priority response by activities:**
- Screen for acute malnutrition, conduct outreach and community mobilization.
- Establish and/or strengthen existing stabilization centres to treat SAM cases with medical complications.
- Provide IYCF counselling services.
- Provide Vitamin A supplementation to children who missed the bi-annual programme.
- Establish and maintain outpatient therapeutic programme (OTP) sites for treatment of SAM.
- Provide treatment for moderately acute malnourished (MAM) children aged 6-59 months.
- Provide supplementary food for under-nourished PLW.
- Provide supplementary food to 6-23 month-old children through the blanket supplementary feeding program (BSFP).

**Challenges and Constraints:**
- Shortage or lack of nutrition commodities due to inadequate funding or pipeline breaks.
- Limited static health facilities that provide both preventive and curative nutrition services.
- Shortage of funding to cover operational costs for mobile health and nutrition teams to cover hard-to-reach areas affected by flood.

**Protection mainstreaming activities/commitments:**
- Nutrition cluster partners will take the following measures in order to ensure protection issues are adequately addressed:
  - Share information on malnutrition risks and consequences with communities.
  - Conduct service delivery location threat assessments; if possible, consult communities on location preferences, including distribution times and account for that in implementation.
  - Use objective selection criteria of beneficiaries based on national and internationally accepted cut-off points for admission to nutrition programs. This will ensure there is no discrimination in beneficiary selection.
  - Design and implement programs according to cultural and religious practices, allowing for safety and dignity in access.
  - Make sure women have safe and private spaces to breastfeed.
  - Make sure that people in need who are unable to move to services delivery points have access to services in their current location by delivering the services to them. Monitor implementation. Services will be provided through mobile teams and Sub-Health centers where the basic health centers are far from population in need of assistance.
  - Make sure sufficient female staff are hired, especially those experienced in working with women and children.
  - Ensure that all caretakers/mothers of children are able and know how to use the nutrition supplements provided to them.
  - Ensure that staff are able to take protection referrals and communicate them to protection actors in the area.
Afganistan: Flood Response Plan (February to June 2019)

RESPONSE BY SECTOR

**PROTECTION**

- Estimated number of people likely to be in need of cluster support: 281,000 flood-affected people in potential need of protection support

**WATER SANITATION AND HYGIENE (WASH)**

- Estimated number of people likely to be in need of cluster support: 253,133 flood-affected people targeted for WASH support

**Priority preparedness activities:**
- Inventory of available resources (supplies, workforce, financial and logistics).
- Preparation of response plan (including identifying the population at risk, geographical areas, operating partners, etc.)
- Capacity-building of cluster members through orientation on the priority needs and gaps
- Training of partners including assessment and response planning, information sharing and established coordination structures as appropriate.
- Encourage partners to replenish their stockpiles to maintain minimum stock levels in high-risk provinces.
- Shift supplies between regions based on continuous risk analysis.

**Priority response by activities:**
- Phase I (30 days)
  - Provide safe drinking water by tankering or by supply of clean water kits
  - Distribute family hygiene kits and conduct hygiene promotion in affected areas
  - Provide emergency latrines and bathing spaces (or provision of safe open place for defecation)
  - Provide WASH services in institutions (health, education and protection facilities) supporting affected people
  - Identify safe sources of drinking water for expansion or rehabilitation
  - Restore safe water supply through small rehabilitation works and repairs
  - Establish/liaise with existing community complaint and feedback systems for monitoring and follow-up of WASH responses

- Phase II (after 30 days)
  - Rehabilitate and restore water supply systems in affected communities
  - Conduct hygiene promotion in communities (including distribution of consumable kits where needed) for 15,000 people
  - Establish and train local water users’ groups to plan, install and manage water systems
  - Build new water systems as necessary to cater for the needs of families in areas without water access, in coordination with other clusters
  - Install emergency latrines with the involvement of affected families
  - Rehabilitate or install new WASH facilities in institutions (education, protection centres and health clinics) in consultation with health, education and protection clusters

**Challenges and Constraints:**
- Limited NGO partner presence in affected areas (remote/hard-to-reach areas and those under NSAG control)
- Lack of trained hygiene promoters (female in particular) from implementing partners
- Lack of funding for local NGOs to mobilise existing AHP supplies for speedy response
- Disrupted communication channels due to rains and floods
- Insufficient funding for large-scale rehabilitation and renovation works needed to restore water systems
- Inadequate DRR activities in many areas requiring the same responses year after year

**Protection mainstreaming activities/commitments:**
- Provision of male and female hygiene promoters will help identify gender-specific protection issues and address them (e.g. promotion of menstrual hygiene messages among adolescent girls)
- Selection of water points and placement of latrines and bathing facilities will be done in consultation with female members of the community
- Provision of latrines and bathing spaces for those families sharing with their neighbours or landlords will help ease tensions among host and displaced families including prevention of possible abuse.