

**AFGHANISTAN  
UNDERFUNDED EMERGENCIES  
ROUND I  
POST-CONFLICT NEEDS  
2021**

**21-UF-AFG-48806**

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## PART I – ALLOCATION OVERVIEW

### Reporting Process and Consultation Summary:

Please indicate when the After-Action Review (AAR) was conducted and who participated.

16 November 2022

Soon after the completion of projects by recipient agencies (WFP, FAO, IOM, UNHCR, WHO and UNOPS/UNMAS), OCHA/HFU organized the After-Action Review (AAR) at the UNOCHA office where recipient agencies participated. The cluster coordination teams also participated in the session with the aim to jointly review the overall CERF grant implementation and capture the lesson learned from the past success and failure with intention to do better next time. The AAR session started with a recap on the CERF background and purpose of the joint AAR by the HFU CERF focal point. Subsequently, each recipient agency provided short debrief on their achievements. Since, the UNOPS/UNMAS project still implementing, they shared key achievements and challenges during the project implementation.

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT).

Yes ☒ No ☐

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

Yes ☒ No ☐

## 1. STRATEGIC PRIORITIZATION

### Statement by the Resident/Humanitarian Coordinator:

The allocation from the Central Emergency Response Fund (CERF) under the underfunded emergency window enabled the United Nations humanitarian agencies to provide key life-saving assistance as well as urgent services to person with disabilities in Afghanistan. The multi-sectoral emergency contribution with a total value of US\$ 12.5 million has improved access and humanitarian response to locations where additional response was required in food security, protection and shelter/NFI through projects by WFP, FAO, UNCHR and IOM. This timely contribution was also very impressive for two other projects for person with disabilities by WHO and UNOPS/UNMAS. The allocation has reinforced a collaborative approach with both local and national authorities and serve as a basis for a two-way confidence building mechanism between humanitarian actions and de facto authorities by showcasing the humanitarian community's priority commitment to deliver rapid response, address needs and alleviate suffering.

### CERF's Added Value:

The emergency contribution from the CERF allowed UN agencies (FAO, IOM, UNHCR, UNOPS, WFP and WHO) provide lifesaving assistance to vulnerable people in Afghanistan under the Emergency Shelter, Food Security and Agriculture, protection, and health sectors from September 2021 to April 2023. For instance, WHO provided support to the war trauma victims of the in three provinces (Kunar, Laghman and Paktia) and a portion of Zabul province as well) which were of the highest needs of disability and physical rehabilitation and WASH services. And UNHCR reached another 427,000 covering 70,000 individuals with Emergency Shelter Kits, Cash for Rent, Non-Food Item packages, and procurement of 130 tents to provide learning spaces for 357,000 school children.

### Did CERF funds lead to a fast delivery of assistance to people in need?

Yes ☒

Partially ☐

No ☐

This CERF contribution enabled the UN agencies to bridge the gap in funding for fast delivery of lifesaving interventions in Health, Protection, Food Security and ESNFI sectors to people in need, including IDPs, returnees, host communities' children and their families.

### Did CERF funds help respond to time-critical needs?

Yes ☒

Partially ☐

No ☐

In response to the urgent humanitarian needs, the CERF allocation identified most urgent needs based on available funding at that time. The allocation allowed ESNFI, Protection and Food Security and Livelihood sectors to fast-track response activities with timely critical needs. The allocation also allowed humanitarian partners getting ahead of lengthy procurement lead times and not miss the critical planting window. Furthermore, CERF's flexibility on the use of funds to balance WFP's internal pipeline allowed lifesaving assistance to reach critically food insecure people in IPC Phase 4 (Emergency) areas in a timely manner.

### Did CERF improve coordination amongst the humanitarian community?

Yes ☒

Partially ☐

No ☐

The recipient agencies had regular meetings at various levels with relevant stakeholders to ensure the response was well coordinated among the humanitarian community. The allocation also created an opportunity for WHO and UNOPS to bring a wide range of

Organization of Persons with Disabilities (OPD) actors together to address the urgent needs of the affected population. WFP also increased cooperation with UNICEF in support to Mobile Health and Nutrition Teams (MHNTs) which ensured that critical assistance reached vulnerable women and children in particularly remote areas.

**Did CERF funds help improve resource mobilization from other sources?**

Yes ☒

Partially ☐

No ☐

Based on the fast release of funding from CERF to support initial efforts, agencies were able to mobilize additional funding from other donors, including the Afghanistan Humanitarian Fund (AHF) in bridging the gap to a comprehensive and timely response to the effects areas.

**Considerations of the ERC's Underfunded Priority Areas<sup>1</sup>:**

The CERF recipient agencies emphasized the inclusion of community members, including women and persons with disabilities throughout the project cycle. They have applied their own mechanism – ensuring community consultations with different groups and using a community feedback mechanism. Projects designed were informed by the needs that persons the agencies serve flag during assessments used to identify vulnerable persons in need of assistance.

In addition, agencies actively collaborate with the Awaaz inter-agency humanitarian call centre, which refers issues to the recipient agencies where callers to Awaaz have directed such towards them. To ensure that persons are aware of these communication channels, partners disseminate the contact information during program activities. Further to this, partners actively collect information regarding the communication preferences of persons and the priority topics on which they require information through the assessments conducted, data analysed, and used to inform programming. Complaints and feedback received through these communication channels are directly actioned by staff dedicated to the activity, so that systematic follow-up is ensured.

As indicated by the recipient agencies, there is a zero tolerance towards Sexual Exploitation and Abuse and policy is in place on Prevention of SEA (PSEA). In this regard, staff implementing the project and all programme activities ensured that affected persons were made aware of their right to provide feedback, lodge complaints, and pose queries.

Disability as a consequence of trauma was addressed directly under this project. Physical rehabilitation including prosthetic care, physiotherapy for victims of conflict related injuries were provided with planned services. In addition, mental health and psychosocial support were provided through the trained staff and volunteers. UNOPS under this project, targeted disabled people as the primary beneficiaries of the project in the provinces that usually lack victim assistance services. Physical rehabilitation and the provision of artificial and specialised mechanical devices improved the physical accessibility which eliminates barriers to schools, medical facilities, workplaces, and other amenities. GBV awareness and disability rights-related messages were disseminated to thousands of people, specifically targeting women.

Training and Health education and hygiene promotion have been one of the key components of the projects, through which the health care personnel educate patients about their health seeking behaviours. This was targeted both under the WASH and physical rehabilitation projects as the health awareness and health promotion was an integral part of the project. WFP also conducted nutrition

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<sup>1</sup> In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas [here](#).

awareness campaigns to ensure that recipients of specialised nutritious commodities included as part of emergency food assistance package, understood the purpose and correct use of nutrition assistance.

**Table 1: Allocation Overview (US\$)**

<b>Total amount required for the humanitarian response</b>	<b>503,227,695</b>
CERF	12,499,902
Country-Based Pooled Fund (if applicable) (AHF GMS Data as of 25 Jul 2023, AHF approved 53 projects with value of \$154.6 million only for the recipient UN agencies during the CERF grants period – Sep 2021 – Apr 2023)	154,628,194
Other (bilateral/multilateral) (not reported)	-
<b>Total funding received for the humanitarian response (by source above)</b>	<b>167,128,096</b>

**Table 2: CERF Emergency Funding by Project and Sector/Cluster (US\$)**

Agency	Project Code	Sector/Cluster	Amount
FAO	21-UF-FAO-013	Food Security - Agriculture	2,000,008
IOM	21-UF-IOM-018	Protection	1,500,001
UNHCR	21-UF-HCR-018	Shelter and Non-Food Items	2,320,000
UNHCR	21-UF-HCR-018	Protection	1,680,000
UNOPS	21-UF-OPS-003	Protection - Mine Action	759,903
WFP	21-UF-WFP-025	Food Security - Food Assistance	3,499,990
WHO	21-UF-WHO-028	Health	606,800
WHO	21-UF-WHO-028	Water, Sanitation and Hygiene	133,200
<b>Total</b>			<b>12,499,902</b>

**Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US\$)**

<b>Total funds implemented directly by UN agencies including procurement of relief goods</b>	<b>10,574,182</b>
Funds sub-granted to government partners*	0
Funds sub-granted to international NGO partners*	27,147
Funds sub-granted to national NGO partners*	1,898,573
Funds sub-granted to Red Cross/Red Crescent partners*	0
<b>Total funds transferred to implementing partners (IP)*</b>	<b>1,925,720</b>
<b>Total</b>	<b>12,499,902</b>

\* Figures reported in table 3 are based on the project reports (part II, sections 1) and should be consistent with the sub-grants overview in the annex.

## 2. OPERATIONAL PRIORITIZATION:

### Overview of the Humanitarian Situation:

The humanitarian situation in Afghanistan continued to deteriorate due to the recent escalation in conflict, the emergence of recurrent drought (the second in the last 2 years) and new waves of COVID-19 infections in June 2021. Afghanistan is in the top tier priority countries for famine prevention – with a third of the country (12.2 million) currently facing crisis or emergency levels of food insecurity. Limited access to services and underlying chronic poverty have also eroded people's coping capacities. Nearly half the population – 18.4 million people – are in humanitarian need. Timely and flexible funding is critical to mitigate against avoidable deaths, prevent displacement and reduce suffering. \$1.3 billion is required to reach almost 16 million people with humanitarian assistance in Afghanistan; only 37 per cent of required funds have been received, leaving an almost \$800 million shortfall.

### Operational Use of the CERF Allocation and Results:

As a result, CERF allocated \$11 million to Afghanistan to sustain the implementation of key life-saving operations. CERF also allocated \$1.5 million to address the needs of person with disabilities bringing the total UFE allocation to \$12.5 million. The CERF UFE allocation allowed the HC/HCT to maintain current life-saving programmes which would otherwise likely be forced to shut down – and to go beyond this, by scaling up field presence in locations where additional response is required for over 678,000 people including 74,000 women, 73,000 men, 330,000 children and 33,500 people with disabilities. The CERF allocation supported life-saving interventions in food security, protection and shelter/NFI through projects by WFP, FAO, UNHCR and IOM. The UFE allocation also complements two ongoing CERF allocations: the recent \$15 million CERF rapid response allocation used to kick start the implementation of the Spring Contingency Plan and the \$15 million cash-allocation provided late in 2020 in response to alarming levels of food insecurity.

### People Directly Reached:

As shown in the tables 4 - 6 below, the CERF recipient agencies reached a total of 883,065 people through various clusters, as reported by the UN recipient agencies.

FAO has directly assisted 210,163 people (22,377 households) in 26 districts of eight provinces (Bamyan, Daikundi, Ghor, Herat, Kunduz, Paktika, Samangan and Takhar) of Afghanistan, through the provision of wheat cultivation inputs, technical training on good agricultural practices, and awareness raising on COVID-19 prevention measures.

IOM Protection Screeners in Nimroz and Herat border points screened 32,976 undocumented returnees for protection risks. These individuals received information to support their registration process and mitigate risks of COVID-19, as well as referrals to medical and MHPSS services as required. WHO reached to a total of 23636 individuals (7,500 under WASH and 16,136 under disability and physical rehabilitation project) received services in the mentioned four provinces.

Overall, 40,472 persons were reached through UNHCR protection activities. 46% of them were women and girls, 54% men and boys, while 2% were persons with disabilities. Under the respective protection activities, 21,000 persons were provided unconditional cash assistance, with 5,600 persons provided with cash assistance to address specific protection needs as Persons with Specific Needs (PSNs).

WFP provided emergency food assistance to a total 157,350 people living in IPC 3 and 4 areas for a period of four months, as part of WFP's 2022 scale-up in response to unprecedented food needs across Afghanistan.

UNOPS/UNMAS with its implementing partners reached to 24,444 people (13,315 men, 6,663 women, 2,022 boys and 2,444 girls) with victim assistance services and successfully contributed to ensuring that the rights of mine action survivors, victim families and broader persons with disabilities (PWD) are respected.

### **People Indirectly Reached:**

The recipient agencies (FAO, IOM, UNHCR, UNOPS, WFP and WHO) estimated that over two million people were reached indirectly under this allocation. Though some recipient agencies did not specify the exact number of indirect beneficiaries, however, only FAO estimates that 1,050,815 people (i.e., the total number of agriculture-dependent people in the communities where the direct beneficiaries reside) indirectly benefited due to sharing of technical information received by the direct beneficiaries to other farmers (indirect beneficiaries). UNHCR indicated that assistance to persons with Specific Needs and psychosocial counselling indirectly improved the well-being of the household members. Through PSN cash support to children, women, female-headed households, people with disabilities and elderly persons at risk, the assistance provided was also able to reduce the additional burden on households during this time of crisis

**Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster\***

Sector/Cluster	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Food Security - Agriculture	43,440	42,253	53,652	56,232	<b>195,577</b>	79,816	78,694	101,626	107,376	<b>367,512</b>
Health	1,500	5,250	375	375	<b>7,500</b>	5,163	4,680	3,228	3,065	<b>16,136</b>
Protection	12,453	12,183	12,934	14,636	<b>52,206</b>	10,224	10,547	9,522	10,179	<b>40,472</b>
Protection - Mine Action	9,304	18,128	1,866	3,702	<b>33,000</b>	6,663	13,315	2,444	2,022	<b>24,444</b>
Shelter and Non-Food Items	18,025	18,761	196,524	197,260	<b>430,570</b>	17,876	18,605	194,895	195,624	<b>427,000</b>
Water, Sanitation and Hygiene	2,250	3,750	750	750	<b>7,500</b>	3,000	3,751	375	374	<b>7,500</b>

\* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.



**Table 5: Total Number of People Directly Assisted with CERF Funding by Category\***

Category	Planned	Reached
Refugees	967	1,876
Returnees	31,086	15,834
Internally displaced people	446,854	446,630
Host communities	115,446	184,118
Other affected people	84,000	234,606
<b>Total</b>	<b>678,353</b>	<b>883,064</b>

**Table 6: Total Number of People Directly Assisted with CERF Funding\***

			Number of people with disabilities (PwD) out of the total	
Sex & Age	Planned	Reached	Planned	Reached
Women	73,918	122,742	7,910	18,624
Men	73,197	129,592	7,815	25,497
Girls	263,110	312,090	8,526	32,074
Boys	268,128	318,640	9,291	32,621
<b>Total</b>	<b>678,353</b>	<b>883,064</b>	<b>33,542</b>	<b>108,816</b>

## PART II – PROJECT OVERVIEW

### 3. PROJECT REPORTS

#### 3.1 Project Report 21-UF-FAO-013

1. Project Information			
Agency:	FAO	Country:	Afghanistan
Sector/cluster:	Food Security - Agriculture	CERF project code:	21-UF-FAO-013
Project title:	MIDAS: Mitigating Impacts of Drought on Agriculture livelihoods and food Security		
Start date:	10/09/2021	End date:	09/09/2022
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 50,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 32,224,872
	Amount received from CERF:		US\$ 2,000,008
	Total CERF funds sub-granted to implementing partners:		US\$ [US\$0]
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 0
	Red Cross/Crescent Organisation		US\$ 0

### 2. Project Results Summary/Overall Performance

FAO has directly assisted 210,163 people (22,377 households) in 26 districts of eight provinces (Bamyan, Daikundi, Ghor, Herat, Kunduz, Pktika, Samangan and Takhar) of Afghanistan, through the provision of wheat cultivation inputs, technical training on good agricultural practices, and awareness raising on COVID-19 prevention measures. The project originally planned to assist 84,000 people and therefore the project overachieved its target by 150%. The discrepancy between planned and actual number of people reached is due to two main factors:

- FAO implemented this project (OSRO/AFG/118/CHA) together with an AHF funded project (OSRO/AFG/119/CHG). The cost of contracting the implementing partners was covered by the AHF project, which allowed the CERF project to procure

additional wheat cultivation inputs. Additionally, FAO utilized the unused budget originally dedicated to DAP fertilizer and FAO other resources to assist an additional 96,994 people (10,377 households).

- The actual number of individuals per household (as per the beneficiary profile survey conducted by the project) is higher than the national average which was used as a reference in the project design.

Under Output 1, the project assisted 210,163 marginal and food insecure people (22,377 households), well above the original target of 84,000 people (12,000 households), through the distribution of wheat cultivation packages, consisting of 50 kg of certified wheat seed and 50 kg of urea fertilizer. Due to exceptional circumstances, FAO was obliged to cancel the distribution of di-ammonium phosphate (DAP) fertilizer (*explained further in section “3. Changes and Amendments”*). In addition to the distribution of inputs, 22,377 farmers (representing their households) received technical trainings on good agricultural practices, such as preparation of land, methods of cultivation, wheat varieties, crop rotations, irrigation methods, usage of fertilizers, controlling plant diseases and pests, as well as storage, sorting and packaging of seeds, among other topics. Furthermore, under Output 2, 210,163 people (22,377 households) benefited from awareness raising sessions on COVID-19 prevention measures.

In addition, as mentioned above, the project was able to assist an additional 96,994 people (10,377 households) with wheat cultivation packages in four provinces, thanks to the additional resources from the AHF project (OSRO/AFG/119/CHG), utilization of the budget originally dedicated to DAP fertilizer and FAO other resources. Among them:

- 2,635 households received certified wheat seed, urea fertilizer, and technical trainings through the CERF funds.
- The remaining 7,742 households received urea fertilizer and technical trainings through the CERF funds (without certified wheat seed).
- To ensure comprehensive support for these 7,742 households with the complete package consisting of 50 kg of certified wheat seed, 50 kg of urea fertilizer, and related technical trainings, FAO utilized its other resources to provide the households with certified wheat seed.

According to the main findings of the post-distribution monitoring (PDM) survey, 99.8 percent of the targeted households confirmed receiving certified wheat seed, while 99.5 percent confirmed receiving urea. Moreover, 71.7 percent of the households reported that the physical quality of the distributed wheat seeds was either very good or good (38.9 percent and 32.8 percent, respectively) whereas 70.2 percent of the households reported that the physical quality of urea was either very good or good (28.9 percent and 41.3 percent, respectively). Additionally, 76.1 percent reported that the wheat seed provided by FAO will increase their agricultural production while 80.2 percent of the households reported that they expect to store enough seeds from the harvested yield.

### 3. Changes and Amendments

#### **Additional beneficiaries:**

In light of the greater needs of assistance in the targeted provinces; and thanks to the additional resources from the AHF project (OSRO/AFG/119/CHG), utilization of the budget originally dedicated to DAP fertilizer and FAO other resources, the project was able to assist an additional 96,994 people (10,377 households) with wheat cultivation packages in four provinces, Herat (Farsi, Karokh, Kushk Robat Sangi and Kushk-e-Kuhna districts), Paktika (Dila, Janikhil, Omna, and Wazakhwa districts), Samangan (Rohee Doab district) and Takhar (Darqad, Dashti-i-Qala, Khowaja Bahawdin and Yangi Qala districts). Each household received 50 kg of certified wheat seed, 50 kg of urea fertilizer and related technical trainings on good agricultural practices and COVID-19 awareness and prevention measures.

Out of the total (10,377 additional) supported households:

- 2,635 households received certified wheat seed, urea fertilizer, and technical trainings through the CERF funds.
- The remaining 7,742 households received urea fertilizer and technical trainings through the CERF funds (without certified wheat seed).

- To ensure comprehensive support for these 7,742 households with the complete package consisting of 50 kg of certified wheat seed, 50 kg of urea fertilizer, and related technical trainings, FAO utilized its other resources to provide the households with certified wheat seed.

This strategic allocation of resources aimed to optimize the impact and effectiveness of the intervention, ensuring that a larger number of households received the necessary inputs for successful wheat cultivation.

#### **Cancellation of DAP:**

A combination of exceptional circumstances and factors meant that it was not possible to support the beneficiary households with DAP fertilizer.

- The economic crisis in the second half of the year caused enormous challenges for FAO suppliers, in particular for payments and for the cross-border transfer of goods. Despite their best efforts and FAO's continuous support, they were not in a position to guarantee the delivery of the required DAP that was foreseen for the winter wheat cultivation packages. Given the risk that DAP may not be delivered on time, FAO decided to cancel the order. The decision was based on the assumption that, if the DAP packages were delivered to the beneficiaries too late in the season, the beneficiaries may decide to sell it to fulfil immediate household food requirements and will not be in a position to store it until the 2022/23 winter season, due to the severity of the food security crisis in rural areas.
- Additionally, the price of DAP offered to FAO increased by more than 80 percent during 2021, the result of oil price fluctuations on the one hand and the prevailing market conditions in Afghanistan on the other. This meant that the price offered to FAO rose from USD 900/tonne to USD 1,700/tonne. Even if suppliers had been able to provide DAP on time for the wheat planting season, these price increases would have meant that FAO would have been forced to reduce the number of households supported by the wheat cultivation programme.
- Urea prices also rose significantly but considering that urea is used later in the planting season and the fact that suppliers were able to guarantee timely delivery, FAO decided to continue with the purchase and distribution of urea.

#### 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Food Security - Agriculture									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	16,842	16,758	25,410	24,990	84,000	42,839	42,504	61,502	63,318	210,163
<b>Total</b>	<b>16,842</b>	<b>16,758</b>	<b>25,410</b>	<b>24,990</b>	<b>84,000</b>	<b>42,839</b>	<b>42,504</b>	<b>61,502</b>	<b>63,318</b>	<b>210,163</b>
<b>People with disabilities (PwD) out of the total</b>										
	460	449	686	675	2,270	1,054	985	1,418	1,517	4,974

\* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

FAO estimates that 1,050,815 people (i.e. the total number of agriculture-dependent people in the communities where the direct beneficiaries reside) indirectly benefited due to sharing of technical information received by the direct beneficiaries to other farmers (indirect beneficiaries). The information includes climate-smart agriculture, improved techniques of certified wheat seed cultivation, and integrated pest management as well as awareness raising on COVID-19 safety measures. Furthermore, the increased availability of wheat straw (by-product after wheat harvest) in the project areas also helped the local livestock keepers/herders to access the same and thereby enhance animal health conditions.

## 6. CERF Results Framework

<b>Project objective</b>	Protect the agriculture livelihoods of vulnerable marginal farming households from the adverse impacts of ongoing drought, COVID-19 and other recent shocks and worsening of existing food crisis in Afghanistan by providing time-critical and season-sensitive emergency assistance in the form of quality agriculture inputs, related technical training and awareness building on COVID-19 safety measures to adopt during farm level practices and market participation.			
<b>Output 1</b>	Agriculture livelihoods of 145 964 vulnerable and food insecure marginal farmers and their family members protected through provision of winter wheat production package.			
<b>Was the planned output changed through a reprogramming after the application stage?</b>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Sector/cluster</b>	Food Security - Agriculture			
<b>Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Achieved</b>	<b>Source of verification</b>
Indicator 1.1	Number of vulnerable marginal farmers and their family members provided with winter wheat production package	84000	210,163 people (22,377 households)	Profile Survey Report. Profile Survey Database. Implementing partners' final narrative reports. Distribution lists.
Indicator 1.2	Number of vulnerable marginal farmers provided with technical training as part of winter wheat production package	12000	22,377 people	Profile Survey Report. Profile Survey Database. Implementing partners' final narrative reports. Distribution lists.
Indicator 1.3	Number of post-distribution monitoring (PDM)	1	1 post-distribution monitoring (PDM) survey	PDM report
Indicator 1.4	Number of post-harvest monitoring (PHM) assessments done	1	1 (FAO is currently undertaking the Post Distribution Monitoring Survey)	PHM report
<b>Explanation of output and indicators variance:</b>		Indicator 1.1 This total figure of 210,163 people is 150.19 percent more than the planned target of 84,000 people, which was calculated based on the average household size in Afghanistan. The actual number of people reached was greater than anticipated because the actual household size, which was determined through beneficiary profile surveys that were carried out by the implementing partners, was larger. In addition, the number of households reached (22,377) is higher than the initial target (12,000 households), as 10,377 additional households received wheat cultivation packages. Out of the total (10,377 additional) supported households, 2,635 households received certified wheat seed, urea fertilizer, and technical trainings through CERF		

		<p>funds. The remaining 7,742 households received urea fertilizer and technical trainings through CERF funds (without certified wheat seed). In order to support the 7,742 households with complete package (50 kg certified wheat seed, 50 kg of urea fertilizer and related technical trainings), the certified wheat seed were provided through utilising FAO other resources.</p> <p>Indicator 1.2. Has been overachieved compared to the original target (12,000 people), as 10,377 additional people received technical trainings under wheat cultivation packages.</p>
Activities	Description	Implemented by
Activity 1.1	Procurement of (i) 722.49 Metric Tonne of certified wheat seed, (ii) 722.49 Metric Tonne of DAP fertilizer and (iii) 722.49 Metric Tonne of Urea fertilizer and quality testing of the same as per FAO's global seed and fertilizer quality standards and technical clearance for transport and distribution of these inputs	<p>FAO procured 1,118.85 tonnes of certified wheat seeds (731.75 under this project and 387.1 from other FAO resource) and 1,118.85 tonnes of urea fertilizer, in collaboration with accredited national/international laboratories (for quality testing).</p> <p>In addition, a combination of exceptional circumstances and factors made it unfeasible to provide beneficiary households with DAP fertilizer support. Despite the suppliers' best efforts and continuous support from FAO, they were unable to guarantee the timely delivery of the required DAP for the winter wheat cultivation packages (<i>for further details, please see section 3. Changes and Amendments</i>).</p>
Activity 1.2	Provision of winter wheat production package comprising 50 Kg. of certified wheat seeds along with 50 Kg. each of Urea and DAP to vulnerable marginal farmers	FAO and implementing partners (ActionAid Afghanistan [AAA], Afghanaid [AA], Afghan Peace Builders Humanitarian Organization [APBHO], Afghan Women's Rights Organization [AWRO], Hand in Hand Afghanistan Organization [HIHAO], and Organization for Relief Development [ORD]).
Activity 1.3	Provision of technical training on appropriate cultivation techniques for certified seed / improved varieties, climate smart agriculture and integrated / natural pest management	FAO and implementing partners (AAA, AA, APBHO, AWRO, HIHAO, and ORD).
Activity 1.4	Post-distribution monitoring and post-harvest assessment and overall regular monitoring of all project activities	FAO through third-party monitoring contractors conducted PDM and PHM surveys in all targeted provinces and districts and will develop consolidated reports for the project. In addition to the above, FAO also conducted a beneficiary verification/baseline survey in all targeted districts and developed the relevant report. Moreover, FAO regional and national personnel conducted regular field monitoring to project sites and shared the findings with relevant implementing partners.

Output 2	84 000 vulnerable farmers and their family members sensitized and made aware on COVID-19 safety measures to adopt at farm level practices, during market participation and in general appropriate preventive practices for minimizing transmission.			
Was the planned output changed through a reprogramming after the application stage?			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Sector/cluster	Food Security - Agriculture			
Indicators	Description	Target	Achieved	Source of verification

Indicator 2.1	CC.2 Number of people reached through awareness-raising and/or messaging on prevention and access to services (information and awareness materials on COVID-19 safety measures to adopt at farm level practices, during market participation and in general appropriate preventive practices for minimizing transmission)	84000	210,163 people	Profile Survey Report. Profile Survey Database. Implementing partners' final narrative reports. Distribution lists.
<b>Explanation of output and indicators variance:</b>		Indicator 2.1. Has been overachieved compared to the original target (84,000 people), as 126,163 additional people received technical trainings under wheat cultivation packages.		
<b>Activities</b>	<b>Description</b>	<b>Implemented by</b>		
Activity 2.1	Training, information dissemination and awareness building at village level using appropriate IEC (Information, Education and Communication) materials and awareness messages on COVID-19 safety measures to adopt at farm level practices, during market participation and in general appropriate preventive practices for minimizing transmission	FAO and implementing partners (AAA, AA, APBHO, AWRO, HIHAO, and ORD).		

## 7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas<sup>2</sup> often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

### a. Accountability to Affected People (AAP)<sup>3</sup>:

FAO together with a third-party monitoring contractor and implementing partners, regularly conducted monitoring of the intervention. FAO along with the third-party monitoring contractor and implementing partners worked towards reinforcing the quality of the project as well as the organizational accountability. Furthermore, different stakeholders – Community *Shuras* (Community Development Council and District Development Council) and Community members – were involved in mobilization, beneficiaries' selection, and distribution of wheat cultivation packages and fertilizer assistance. Specific questions on AAP were included in the third-party monitoring data collection tools and the findings were shared with FAO in the form of survey reports. In addition, FAO distributed communication materials to beneficiaries containing information on the AWAAZ Afghanistan hotline service and FAO's Complaints and Feedback Mechanisms to raise awareness on channels they could use to register feedback and complaints.

### b. AAP Feedback and Complaint Mechanisms:

<sup>2</sup> These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

<sup>3</sup> AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).



FAO and its implementing partner established the Complaint and Feedback Mechanisms for this project in the project areas, and regularly responded to the complaints received either through these mechanisms or through field visits. AWAAZ Afghanistan – a toll-free Complaint and Feedback System managed by UNOPS in the country – was also widely communicated to all beneficiaries and partner staff throughout the implementation of the project, during the market baseline assessment, before and after the intervention, community mobilization, and beneficiary selection as well as during the distribution of inputs and the provision of trainings. Information to engage with the system were communicated to beneficiaries both orally and through pamphlets in national languages, ensuring that all community members are reached regardless of their literacy skills.

#### **c. Prevention of Sexual Exploitation and Abuse (PSEA):**

FAO had already established PSEA committees at Kabul and Regional Office levels. These committees acted as PSEA committees for this project and shared the information with project personnel. Relevant project team members provided contact information cards including mobile phone numbers to all direct beneficiaries in order to record and handle any Sexual Exploitation and Abuse related complaints in a confidential manner. Information, education, and communication (IEC) materials were also distributed. These materials also explained how to contact AWAAZ Afghanistan to report PSEA related complaints in a confidential manner.

#### **d. Focus on women, girls and sexual and gender minorities, including gender-based violence:**

FAO prioritized households headed by women in the selection criteria to receive assistance. The project assisted 100 female-headed households with wheat cultivation packages, and promoted protection messages related to PSEA, GBV and complaints-grievance mechanisms. All the targeted female-headed households benefited from COVID-19 sensitization information and relevant technical trainings. Furthermore, all (wheat cultivation packages) distributions as well as technical training sessions and COVID-19 sensitization sessions were organized at locations and timings convenient for women beneficiaries.

#### **e. People with disabilities (PwD):**

The project considered disability as part of a larger vulnerability-based beneficiary selection criteria. Accordingly, 543 households headed by people with disability received wheat cultivation packages. They were also provided with relevant technical trainings and COVID-19 sensitization information.

#### **f. Protection:**

The project prioritized households headed by women and people with disability through the vulnerability-based beneficiary selection process. Furthermore, FAO organized all distributions of wheat cultivation packages and related technical trainings as well as COVID-19 sensitization sessions at locations and timings convenient for both women and people with disabilities. In addition, FAO informed all direct beneficiaries about the FAO PSEA committees, AWAAZ, and complaints-grievances mechanisms through distribution of pamphlets, IEC materials and cards with pertinent contacts' details. All COVID-19 safety measures – to ensure maximum protection to all stakeholders involved in the project – were strictly followed at all the inputs distribution sites. Lastly, FAO trained all project staff including those of the implementing partners on humanitarian principles, AAP, PSEA, rights of beneficiaries, and COVID-19 safety measures.

#### **g. Education:**

While the project was not designed to address education concerns, the intervention provided much-needed wheat cultivation packages to vulnerable food-insecure households, which allowed the targeted households to avoid resorting to negative coping mechanisms such as removing children from school.

### **8. Cash and Voucher Assistance (CVA)**

#### **Use of Cash and Voucher Assistance (CVA)?**

<b>Planned</b>	<b>Achieved</b>	<b>Total number of people receiving cash assistance:</b>
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No	Choose an item.	[Fill in]
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If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

No cash transfers were envisaged as the project focused on directly supporting 210 163 marginal and food insecure people with wheat cultivation inputs and related technical training, as well as raising awareness on COVID 19.

Parameters of the used CVA modality:				
Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
N/A	0	US\$ 0		Choose an item.

## 9. Visibility of CERF-funded Activities

Title	Weblink
Project fact sheet	MITIGATING IMPACTS OF DROUGHT ON AGRICULTURE LIVELIHOODS AND FOOD SECURITY
Tweet	Thanks to @ UNCERF funded wheat assistance by @FAO
Tweet	Its harvest time in Nangarhar. A total of 42,000 people in the province have benefitted from @FAO's crucial assistance to wheat cultivation.

## PART II – PROJECT OVERVIEW

### 3.2 Project Report 21-UF-IOM-018

1. Project Information			
Agency:	IOM	Country:	Afghanistan
Sector/cluster:	Protection	CERF project code:	21-UF-IOM-018
Project title:	Emergency Protection Assistance for Vulnerable Returning Undocumented Afghans and IDPs in Afghanistan		
Start date:	09/09/2021	End date:	08/09/2022
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 45,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 10,000,000
	Amount received from CERF:		US\$ 1,500,001
	Total CERF funds sub-granted to implementing partners:		US\$ 0
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 0
	Red Cross/Crescent Organisation		US\$ 0

### 2. Project Results Summary/Overall Performance

Through this CERF UFE contribution, IOM Protection Screeners in Nimroz and Herat border points screened 32,976 undocumented returnees for protection risks. These individuals received information to support their registration process and mitigate risks of COVID-19, as well as referrals to medical and MHPSS services as required. Out of 32,976 undocumented returnees who were provided with information on the services available at the reception centres, 9,489 undocumented returnees with specific needs (1,215 women, 5,354 men, 1,060 girls, 1,860 boys) received post arrival assistance, including transportation from borders to transit centres, overnight accommodation, hot meals, basic medical screening and health services, basic household items, WFP food packages and referrals to partners for follow up assistance. Amongst the cases assisted there were special cases that required particular attention and tailored support (i.e. deceased migrants, individuals who were incarcerated in Iran, families/individuals facing extreme poverty and wounded cases). 23,487 undocumented returnees are indirect beneficiaries of this assistance, which is explained below in the relevant sections.

In line with IOM Afghanistan protection post-arrival and case management SOPs, IOM provided case management support to 4,966 households in 11 provinces of high return and displacement. CERF contributed to reaching 1,243 of these households, 8,862 individuals: (1,797 women, 1,595 men, 2,697 girls, 2,773 boys) with dissemination of information, referrals to specialised services and provision of cash assistance to 10,472 individuals (7,585 undocumented returnees: 1,572 women, 1,440 men, 2,250 girls, 2,323 boys, and 2,887 IDPs: 553 women, 407 men, 971 girls, 956 boys).

Through protection monitoring which aimed to support evidence-based programming, through this grant IOM increased the understanding of community-based protection mechanisms, and humanitarian and development actors of protection trends and advocated for the respect and uphold protection and its guiding international laws. IOM interviewed 10,846 undocumented returnees and IDPs and conducted 1,755 direct observations using the Afghanistan Protection Cluster tools for Protection Monitoring. CERF contributed to reach 2,713 undocumented returnees and IDPs and 440 through direct observations.

CERF supported IOM produced four quarterly Protection Monitoring reports and four Protection Advocacy Briefs (one child protection Oct 2021, one legal documentation Sep 2021, two on women and girls Jan 2022 and June 2022) that were circulated to protection actors, key stakeholders, and trusted partners. Please see the Annexes.

Through the CERF funding IOM conducted four trainings covering general protection and protection monitoring to 77 IOM staff and partners. Out of the total, 41 were women and 36 were men. 94% of participants said they have increased their knowledge on protection following the trainings.

### **3. Changes and Amendments**

In line with approved project proposal, IOM implemented the protection activities, through which affected people and at-risk individuals among the vulnerable undocumented returnees and Internally Displaced Persons (IDPs) received post-arrival and case management support, aiming to reduce protection risks and avoid negative coping mechanism at the household level. The assistance provided under this project has been key to support the most vulnerable Afghan people who were in dire need of humanitarian protection assistance while the humanitarian needs in Afghanistan are becoming greater and access to free services is limited to Afghanistan due to current financial crisis and political instability.

IOM has been able to fully expend this grant and did not extend or modify the project. As described below, there was a lower beneficiary figure reached than expected, due to the contextual challenges that impacted programming, namely a high level of staff turnover and delays in programming associated with the de facto Taliban authority.

#### 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	5,775	5,250	7,087	8,138	26,250	1,572	1,440	2,250	2,323	7,585
Internally displaced people	1,454	1,322	1,785	2,049	6,610	553	407	971	956	2,887
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>7,229</b>	<b>6,572</b>	<b>8,872</b>	<b>10,187</b>	<b>32,860</b>	<b>2,125</b>	<b>1,847</b>	<b>3,221</b>	<b>3,279</b>	<b>10,472</b>
<b>People with disabilities (PwD) out of the total</b>										
	723	657	887	1,019	3,286	213	185	322	328	1,048

\* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

Out of 32,976 undocumented returnees who were screened at the reception centres in Nimroz and Herat - 23,487 undocumented returnees are counted as indirect beneficiaries who received information to support the registration process and mitigate risks for COVID-19 but were not eligible to receive the post-arrival assistance and/or case management support.

## 6. CERF Results Framework

Project objective	Undocumented returnees and IDPs with specific needs or heightened vulnerability are reached with protection-oriented direct or referral assistance and contribute to enhanced analysis of the protection environment.			
Output 1	Protection violations are reduced and respect for International Humanitarian Law is increased			
Was the planned output changed through a reprogramming after the application stage?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Sector/cluster	Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	# of undocumented returnees who were provided with direct and referral assistance upon spontaneous or forced return from Iran	8,092	9,489	Beneficiary Screening and Assistance Form (BSAF), Case Management System, Beneficiary Distribution Lists.
Indicator 1.2	# of undocumented returnees and IDPs who were provided with case management assistance (dissemination of information, referrals and/or cash for protection).	22,032	10,472	Case Management System, Beneficiary Distribution Lists, Implementation Tracker,
Indicator 1.3	# of people reached through protection monitoring.	2,736	2,713	Kobo System Dataset, Protection Monitoring Reports.
Explanation of output and indicators variance:		Out of the 22,032 anticipated target beneficiaries under this programme IOM managed to support 10,472 with direct case management assistance- the programme experienced a significant level of turnover with staff member leaving Afghanistan. Due to DFA takeover, case management was paused from August 15 to October 2021- the activity resumed by the end of October, in addition, the restrictions in female staff movement and ability for the response to reach female beneficiaries had an impact in achieving the anticipated target of 22,032.		
Activities	Description	Implemented by		
Activity 1.1	Provision of direct protection post-arrival assistance and referral services (dissemination of information, referrals and/or cash for transportation)	9,489 undocumented returnees with specific needs (1,215 women, 5,354 men, 1,060 girls, 1,860 boys) received overnight accommodation, hot meals, transportation from borders to transit centres, basic medical screening, and referrals to partners.  9,216 undocumented returnees with specific needs (1,175 women, 5,654 men, 1,013 girls, 1,374 boys) received cash for transportation to return to 34 provinces in Afghanistan.		

		<p>1,336 undocumented returnees with specific needs that were facing protection risks (302 women, 324 men, 348 girls, 362 boys) received dedicated protection assistance – dissemination of information, referral and/or in-kind assistance, including flights to province of returns 209 (52 women, 55 men, 56 girls, 46 boys) provided.</p> <p>Out of the total who were supported with post-arrival assistance, 41% were special cases (i.e., deceased migrants, individuals who were incarcerated in Iran, families/individuals facing extreme poverty and wounded cases), 26% were deportees, 9% were single parents, 7% were unaccompanied children, 4% were critical medical cases, 1% were unaccompanied elderly, 1% were single females and 1% was persons with disabilities, the remaining 11% had other conditions.</p>
Activity 1.2	Provision of case management assistance (dissemination of information, referrals and/or cash for protection).	Through multi-donor funding, IOM provided case management assistance to 4,966 households in 11 provinces of high returns and displacement. CERF contributed to reaching 1,243 of these households, 8,862 individuals: (1,797 women, 1,595 men, 2,697 girls, 2,773 boys) with dissemination of information and referrals, including cash assistance to 10,472 individuals (7,585 undocumented returnees: 1,572 women, 1,440 men, 2,250 girls, 2,323 boys, and 2,887 IDPs: 553 women, 407 men, 971 girls, 956 boys). It should be noted that only cases that were closed by 30 September are considered in this calculation.
Activity 1.3	Undertaking regular protection monitoring (including incident monitoring) and carrying out protection analysis (including risk analysis) and production of quarterly protection monitoring reports.	During the reporting period, through multi-donor funding, IOM interviewed 10,846 undocumented returnees and IDPs and conducted 1,755 direct observations using the Afghanistan Protection Cluster tools for Protection Monitoring. CERF contributed to reach 2,713 undocumented returnees and IDPs and 440 direct observations. IOM produced four confidential quarterly Protection Monitoring reports and four Protection Advocacy Briefs (one child protection Oct 2021, one legal documentation Sep 2021, two on women and girls Jan 2022 and June 2022) that were circulated to Protection actors, key stakeholders, and trusted partners.

## 7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas<sup>4</sup> often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

<sup>4</sup> These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

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**a. Accountability to Affected People (AAP)<sup>5</sup>:**

Crisis-affected persons, including vulnerable and marginalized groups, have been at the centre of the design and decision-making processes of this project. IOM disseminated information about the available services and ensured a client-centred approach during referrals of beneficiaries to enable informed decision-making. To ensure their participation, empowerment, and self-protection the beneficiaries are involved and consulted throughout the case management processes. IOM Protection Caseworkers have been in regular contact and follow up with beneficiaries with a period of at least three months of case management to communicate their entitlements and assess how the assistance provided has contributed to reducing the protection issues they were facing.

Under this project, IOM conducted three rounds of quarterly M&E exercises which collected feedback from beneficiaries through a consultative approach. The outcomes of these M&E findings assisted IOM to adapt the project implementation and improve the quality of programming.

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**b. AAP Feedback and Complaint Mechanisms:**

IOM continued its partnership with Awaaz Afghanistan (UN-call centre) for the purpose of referrals and to collect feedback on implementation of programming, inclusive of the Protection programme. IOM Protection Caseworkers provided information about Awaaz Afghanistan under the information dissemination activities during the first stage of interaction with beneficiaries to ensure they have access to and understand the function of complaint and feedback mechanisms. Also, IOM through complementary grants distributed mobile phones and top-up cards to beneficiaries in transit locations to increase their ability to reach service providers safely, contact their family/communities and communicate with Awaaz for information, feedback, and complaints.

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**c. Prevention of Sexual Exploitation and Abuse (PSEA):**

IOM Protection Caseworkers provided information about PSEA under the information dissemination activity to raise awareness about PSEA reporting mechanisms—either through Awaaz Afghanistan or IOM's global reporting mechanism "We Are All In". IOM, as a key member of the Afghanistan PSEA Task Force attended monthly meetings and is continuously contributing to the contextualization and production of Information Education and Communication (IEC) materials on PSEA.

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**d. Focus on women, girls and sexual and gender minorities, including gender-based violence:**

IOM provided individualized protection post-arrival and case management assistance to address the specific needs of women, men, girls, and boys, persons with disability and the elderly. IOM assessed needs through a client centered approach and ensured the mitigation of protection risks for individual are developed together, on a case-by-case basis. In addition, throughout the case management process, IOM Protection Caseworkers provided a range of available options and services for beneficiaries to empower them in order to take informed decision on what type of services they would like to receive. GBV survivors who needed additional support were referred to specialized GBV actors where available, ensuring a do-no-harm approach was taken in handling their cases. Following the DFA takeover and the imposed restrictions on women and girls that followed, IOM developed remote case management guidelines to maintain access to women and girl beneficiaries when household visits were not permissible, and a *mahram* policy to enable female staff movement to conduct the programme activities.

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**e. People with disabilities (PwD):**

IOM supported the People with Disabilities (PwD) as one of the vulnerable categories among the Persons with Specific Needs (PSN) cases. Assessed PwD in need of additional assistance received both post arrival assistance and case management support for a period of three months. IOM Protection Caseworkers also referred the PwD cases to the International Committee of the Red Cross (ICRC) and Handicap International (HI) to receive specialized services, including psychosocial support, wheelchairs, walking sticks and other

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<sup>5</sup> AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).



specialized means of assistance. In addition, through protection monitoring, IOM highlighted the gap of assistance to persons with disabilities and their restrictive access to services, advocating for service providers to ensure consideration for PwD in their assistance design, implementation, monitoring, and evaluation phases.

#### **f. Protection:**

IOM designed the beneficiary's eligibility criteria in a way to prioritize and select the most affected and at-risk individuals for post arrival and case management interventions. All beneficiaries under this project were assisted based on the specific vulnerabilities, needs and level of protection threats and risks they experienced. To implement the 'do no harm' principle, IOM carried out monthly protection risk assessments to determine any inadvertent harm IOM activities can cause beneficiaries. In connection to this, IOM and the humanitarian community developed prevention, mitigation, and action plans to take against those risks. Practising meaningful access, ensuring accountability, participation and empowerment were amongst the key factors of the monthly mitigation plans developed and implemented across all 11 provinces of IOM protection. In addition, IOM conducted protection mainstreaming trainings for 76 staff and partners to ensure the protection mainstreaming principles were incorporated throughout the intervention and related assistance.

#### **g. Education:**

IOM worked with the Child Protection Area of Responsibility under the umbrella of the Afghanistan Protection Cluster to address the specific child protection gaps that arose within the parameters of this project. This included access to education for returnee children, particularly girls. IOM provided households with cash for education where basic education materials were identified as a gap and its unavailability a barrier of families sending their children to school. IOM caseworkers referred the education needs of children of households supported to education partners and education public sector in communities of return where possible.

### **8. Cash and Voucher Assistance (CVA)**

#### **Use of Cash and Voucher Assistance (CVA)?**

<b>Planned</b>	<b>Achieved</b>	<b>Total number of people receiving cash assistance:</b>
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	10,472

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

In line with IOM SOP for Case Management and SOP for Cash Based Intervention, 10,472 undocumented returnees received unconditional and unrestricted cash assistance to mitigate the protection risks and address the immediate and basic needs of assisted individuals.

#### **Parameters of the used CVA modality:**

<b>Specified CVA activity</b> (incl. activity # from results framework above)	<b>Number of people receiving CVA</b>	<b>Value of cash (US\$)</b>	<b>Sector/cluster</b>	<b>Restriction</b>
Cash for Protection	10,472	US\$ 195	Protection	Unrestricted

### **9. Visibility of CERF-funded Activities**

<b>Title</b>	<b>Weblink</b>
N/A	

### 3.3 Project Report 21-UF-HCR-018

1. Project Information			
Agency:	UNHCR	Country:	Afghanistan
Sector/cluster:	Shelter and Non-Food Items Protection	CERF project code:	21-UF-HCR-018
Project title:	Protection and provision of emergency shelter, NFIs, and cash to displaced vulnerable Afghan households		
Start date:	08/09/2021	End date:	07/09/2022
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds	Project revisions: No-cost extension <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 70,227,695
	Total funding received for agency's sector response to current emergency:		US\$ 12,819,596
	Amount received from CERF:		US\$ 4,000,000
	Total CERF funds sub-granted to implementing partners:		US\$ 691,172
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 691,172
	Red Cross/Crescent Organisation		US\$ 0

### 2. Project Results Summary/Overall Performance

Overall, 30,000 persons were reached through protection activities. 46% of them were women and girls, 54% men and boys, while 2% were persons with disabilities. Under the respective protection activities, 21,000 persons were provided unconditional cash assistance, with 5,600 persons provided with cash assistance to address specific protection needs as Persons with Specific Needs (PSNs). In addition, 1,400 persons were referred to secondary and tertiary medical care while 2,000 persons were provided psychosocial support in the western, northern, and southern regions.

In addition, UNHCR reached another 427,000 individuals covering 70,000 individuals with Emergency Shelter Kits, Cash for Rent, Non-Food Item packages, and procurement of 130 tents to provide learning spaces for 357,000 school children. This brought to 457,000 the total number of beneficiaries impacted by the CERF contribution.

### 3. Changes and Amendments

There were no changes or amendments to the project as all the planned outputs were met with no indicator variance

#### 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	405	434	315	346	1,500	405	434	315	346	1,500
Returnees	2,025	2,176	1,574	1,724	7,499	2,025	2,176	1,574	1,724	7,499
Internally displaced people	4,050	4,350	3,151	3,450	15,001	4,050	4,350	3,151	3,450	15,001
Host communities	1,619	1,740	1,261	1,380	6,000	1,619	1,740	1,261	1,380	6,000
Other affected people	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>8,099</b>	<b>8,700</b>	<b>6,301</b>	<b>6,900</b>	<b>30,000</b>	<b>8,099</b>	<b>8,700</b>	<b>6,301</b>	<b>6,900</b>	<b>30,000</b>
<b>People with disabilities (PWD) out of the total</b>										
	54	58	42	46	200	54	58	42	46	200

Sector/cluster	Shelter and Non-Food Items									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0					
Returnees	0	0	0	0	0					
Internally displaced people	17,876	18,605	194,895	195,624	427,000	17,876	18,605	194,895	195,624	427,000
Host communities	0	0	0	0	0					
Other affected people	0	0	0	0	0					
<b>Total</b>	<b>17,876</b>	<b>18,605</b>	<b>194,895</b>	<b>195,624</b>	<b>427,000</b>	<b>17,876</b>	<b>18,605</b>	<b>194,895</b>	<b>195,624</b>	<b>427,000</b>
<b>People with disabilities (PWD) out of the total</b>										
	1,788	1,861	19,489	19,562	42,700	1,788	1,861	19,489	19,562	42,700

\* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

Assistance to persons with Specific Needs and psychosocial counselling indirectly improved the well-being of the household members. Through PSN cash support to children, women, female-headed households, people with disabilities and elderly persons at risk, the assistance provided was also able to reduce the additional burden on households during this time of crisis.

## 6. CERF Results Framework

Project objective	Population has sufficient basic and domestic items. Shelter and infrastructure established, improved, and maintained. Population has sufficient basic and domestic items. Services for persons with specific needs strengthened.			
Output 1	Cash grants or vouchers provided			
Was the planned output changed through a reprogramming after the application stage?    Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Cash.2a Number of people benefitting from sector-specific unconditional cash transfers (Cash for protection – flat rate)	21,000	21,000	Financial Service provider confirmation reports
Indicator 1.2	Cash.2b Total value of sector-specific unconditional cash transfers distributed in USD	585,000	585,000	Financial Service provider confirmation reports
Indicator 1.3	Cash.2a Number of people benefitting from sector-specific unconditional cash transfers (Protection Cash for PSN – rate varies based on needs	2,000	2,000	PSN online database and Partner financial reports
Indicator 1.4	Cash.2b Total value of sector-specific unconditional cash transfers distributed in USD	400,000	400,000	Distribution reports and Partner Financial Reports
Explanation of output and indicators variance:		The planned output was met with no indicator variance.		
Activities	Description		Implemented by	

Activity 1.1	Individual protection assistance through unconditional cash and self-reliance grants for persons with specific needs among refugees, returnees, and conflict IDPs.	WASSA and WAW
Activity 1.2	Identification and direct cash assistance to child and female headed HH, elderly persons, PwD, people living with chronic medical conditions, large sized families.	WASSA and WAW

<b>Output 2</b>	Referral mechanisms established
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<b>Was the planned output changed through a reprogramming after the application stage?</b>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<b>Sector/cluster</b>	Protection			
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Indicators	Description	Target	Achieved	Source of verification
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Indicator 2.1	Number of people referred to secondary and tertiary medical care	1,400	1,400	MHPSS KOBO Form and dashboard
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Indicator 2.2	Number of PoC with psychosocial needs receiving psychosocial support	5,600	5,600	MHPSS KOBO Form and dashboard
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<b>Explanation of output and indicators variance:</b>	The planned output was met with no indicator variance.			
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Activities	Description	Implemented by
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Activity 2.1	Referral to psychosocial Support (in group and individual sessions) for vulnerable refugees, returnees, IDPs and host communities.	WASSA and WAW
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Activity 2.2	Psychosocial support providers	WASSA and WAW
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<b>Output 3</b>	Core relief items provided
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<b>Was the planned output changed through a reprogramming after the application stage?</b>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<b>Sector/cluster</b>	Shelter and Non-Food Items			
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Indicators	Description	Target	Achieved	Source of verification
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Indicator 3.1	Number of people receiving core relief items	56,000	56,000	Community-Based Protection Monitoring
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<b>Explanation of output and indicators variance:</b>	The planned output was met with no indicator variance during and after the application stages.
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Activities	Description	Implemented by
Activity 3.1	Procurement, prepositioning and distribution of NFIs	UNHCR and partners WASSA and WAW

**Output 4** Cash grants or vouchers provided for Shelter

**Was the planned output changed through a reprogramming after the application stage?** Yes ☐ No ☒

Sector/cluster	Shelter and Non-Food Items
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Indicators	Description	Target	Achieved	Source of verification
Indicator 4.1	Cash.3a Number of people benefitting from conditional cash transfers (Shelter)	3,500	3,500	Financial Service provider confirmation reports
Indicator 4.2	Cash.3b Total value of conditional cash transfers distributed in USD	112,500	112,500	Financial Service provider confirmation reports

**Explanation of output and indicators variance:** The planned output was met with no indicator variance.

Activities	Description	Implemented by
Activity 4.1	Identification of beneficiaries, distribution of cash for shelter	UNHCR partners WASSA and WAW

**Output 5** Emergency shelter provided

**Was the planned output changed through a reprogramming after the application stage?** Yes ☐ No ☒

Sector/cluster	Shelter and Non-Food Items
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Indicators	Description	Target	Achieved	Source of verification
Indicator 5.1	SN.1a Number of people benefitting from in-kind shelter assistance	10,500	10,500	Community-Based Protection Monitoring
Indicator 5.2	# of children benefitting from EIE tents	357,000	357,000	UNHCR Procurement and Supply Chain

<b>Explanation of output and indicators variance:</b>		UNHCR procured the tents for further distribution by UNICEF.
Activities	Description	Implemented
Activity 5.1	Identification of beneficiaries, distribution of emergency tents	UNHCR partners WASSA and WAW
Activity 5.2	Procurement and transport of Education in Emergency (EiE) tents	UNHCR

## 7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas<sup>6</sup> often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

### a. Accountability to Affected People (AAP)<sup>7</sup>:

UNHCR's commitment to AAP has been reinforced through project activities. Projects designed are informed by the needs that persons UNHCR serves flag during protection monitoring and assessments used to identify vulnerable persons in need of assistance. The data generated through the activities enable UNHCR to engage and analyse protection and humanitarian needs in Afghanistan. The data also provided the basis for evidence supporting the activities implemented under this project. The implementation of projects also leads to post assistance monitoring commissioned by UNHCR and undertaken by a third party. This sheds further light on the impact of the projects and contributes additionally to UNHCR's commitment to AAP. The findings enable UNHCR to gauge the effectiveness of the programmes and to make changes where necessary to bring about improvements in service provision.

### b. AAP Feedback and Complaint Mechanisms:

Separate to the project activities but as part of UNHCR's commitment to AAP, and to reinforce service delivery, the agency maintains several feedback and complaint channels, including complaint boxes, hotline phones and a protection email. Persons can also convey complaints and feedback directly to UNHCR staff and staff of UNHCR partners during activity implementation, at distribution points and through visits to UNHCR or partner offices. In addition, UNHCR actively collaborates with the Awaaz inter-agency humanitarian call centre, which refers issues to UNHCR where callers to Awaaz have directed such towards UNHCR. To ensure that persons are aware of these communication channels, UNHCR and its partners disseminate the contact information during programme activities, and the information is also available at static points for easy access. Further to this, UNHCR actively collects information regarding the communication preferences of persons and the priority topics on which they require information through the assessments conducted, data analysed, and used to inform programming. Complaints and feedback received through these communication channels are directly actioned by staff dedicated to the activity, so that systematic follow-up is ensured.

<sup>6</sup> These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

<sup>7</sup> AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

### c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNHCR has zero tolerance towards Sexual Exploitation and Abuse and has a policy in place on Prevention of SEA (PSEA). In this regard, staff implementing the project and all programme activities of UNHCR ensured that affected persons were made aware of their right to provide feedback, lodge complaints, and pose queries. UNHCR has in place dedicated standard operating procedures (SOPs) on addressing PSEA and identified PSEA focal points in each office. UNHCR also conducts regular training and refresher sessions for staff to ensure that they are clear on their respective roles and responsibilities regarding PSEA. These staff are trained on how to address complaints and are aware of the process for confidentially referring PSEA complaints to relevant staff.

### d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The project activities focussed on vulnerable persons, including women and girls susceptible to increased protection risks owing to their gender. To ensure that persons were not put at risk in line with the principle of 'do no harm' it was not possible identify persons who belong to sexual minorities. For the same reasons, identifying and addressing GBV issues had to be approached with the utmost discretion and sensitivity, in order also to ensure that survivors did not face further challenges. During the reporting period, out of 5,720 PSN cases, 3,140 girls and women, including elderly women, were assisted with cash.

### e. People with disabilities (PwD):

The project activities have also contributed to the assistance of persons with disabilities. Out of 5,720 PSN cases, 1,156 people with disabilities were also assisted and referred to other specialized services.

### f. Protection:

Activities under this project have fallen within the scope of UNHCR's community-based protection approach, which is underpinned by evidence-based programming. The persons assisted are those with vulnerabilities susceptible to protection risks and identified through UNHCR protection assessments. The data generated through these assessments enables UNHCR to identify protection risk categories and to prioritise and target individuals in those groups for assistance. The data generated does not only allow UNHCR to inform its own programming but also the broader humanitarian response and to raise up issues for protection advocacy.

### g. Education:

N/A

## 8. Cash and Voucher Assistance (CVA)

### Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	26, 500

**no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.




**yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

CVA was used both as a conditional grant (Cash for Rent) and an unconditional multipurpose cash grant (Cash for Protection). The former was limited to conclusion of a lease agreement while, for the latter, recipients were free to use the cash grant to meet any of their priority basic needs. While UNHCR ensures cash programming is aligned (or linked to) national social safety nets, prior to and following the change in administration in Afghanistan in August 2021, there was no established social protection system in the country for linkages to be made.

#### Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	<u>Restriction</u>
Cash for Shelter (Rent)	3,500	US\$ 12,500	Shelter and Non-Food Items	Unrestricted
Cash for Protection	21,000	US\$ 585,000	Multi-Purpose Cash	Unrestricted
Cash for PSN	2,000	US\$ 402,221.73	Multi-Purpose Cash	Unrestricted

#### 9. Visibility of CERF-funded Activities

Title	Weblink
UNHCR September Operational Update	<a href="https://data.unhcr.org/en/documents/download/96620">https://data.unhcr.org/en/documents/download/96620</a>
UNHCR Afghanistan Donor Visibility Rollup Banner – distributed at all project sites and UNHCR offices around the country including at Country Office Kabul	
CERF tweet on support provided through UNHCR In Afghanistan	<a href="https://twitter.com/UNHCRAfg/status/1604825442640445441">https://twitter.com/UNHCRAfg/status/1604825442640445441</a>

8 Retweets 43 Likes



<sup>9</sup>UNHCR Afghanistan has zero tolerance for fraud, corruption, sexual exploitation, abuse or harassment by staff and those of partners<sup>9</sup>

### 3.1 Project Report 21-UF-OPS-003

1. Project Information					
Agency:		UNOPS		Country: Afghanistan	
Sector/cluster:		Protection - Mine Action		CERF project code: 21-UF-OPS-003	
Project title:		Provision of Victim Assistance Services in Baghlan, Zabul and Uruzgan Provinces			
Start date:		07/10/2021		End date: 06/06/2023	
Project revisions:		No-cost extension X		Redeployment of funds X Reprogramming <input type="checkbox"/>	
Funding	Total requirement for agency’s sector response to current emergency:				US\$ 2,200,000
	Total funding received for agency’s sector response to current emergency:				US\$ 0
	Amount received from CERF:				US\$ 759,903
	Total CERF funds sub-granted to implementing partners:				US\$ 568,562.54
	Government Partners				US\$ 0
	International NGOs				US\$ 0
	National NGOs				US\$ 568,562.54
	Red Cross/Crescent Organisation				US\$ 0

### 2. Project Results Summary/Overall Performance

UNMAS, through its implementing partners (Health, Disability and Development Organization (HDDO) & Kabul Orthopaedic Organization (KOO), Afghan Amputee Bicyclists for Rehabilitation & Recreation (AABRAR) and the Accessibility Organization for Afghan Disabled (AOAD)) provided: physical rehabilitation services to 10,860 people; assistive devices and walking aids to 2,457 people; mental health and psychosocial support to 5,790 people; health clinic and medical service referrals to 693 people; and disability awareness sessions with integrated gender-based-violence (GBV) messaging for 4,644 victims of war and broader persons with disability in Baghlan, Zabul, and Uruzgan provinces. UNMAS implementing partners also conducted mobile visits to remote villages to reach more people with physical rehabilitation services as well as paid for the transportation cost of 122 victims who lived in remote areas to travel to the static facilities for services only available there, thereby increasing the reach of this project further.

The project provided support to 24,444 people (13,315 men, 6,663 women, 2,022 boys and 2,444 girls) with victim assistance services and successfully contributed to ensuring that the rights of mine action survivors, victim families and broader persons with disabilities (PwD) are respected.

In addition, this project employed 48 men and 12 women, including 6 people with disabilities, in the three very remote provinces of Afghanistan, contributing to the local economy.

#### **Case study:**

Juma Khan, son of Abdul Ghani, is a 19-year-old resident of Kalacha village in Chora district of Uruzgan Province. Two years ago, he lost his left leg above the knee when he stepped on a pressure plate mine on his way to school. Juma Khan was active before the incident as he would go to school and work on his family's land. After the incident, he was not able to do either.

Juma Khan was visited by one of the CERF-funded mobile teams operated by HDDO. After the complete assessment and examination by the HDDO technical specialist at his location, he was referred to the fixed centre for further assistance. The HDDO technical staff started the medication process, and, in a few days, they prepared a new prosthesis for him. Juma Khan participated in a training on the use of his new prostheses to ensure that he uses it safely. As a result, he has started walking again without the walking stick and ease. Juma Khan expressed his happiness and positivity about his future, and promised to go back to school, live a productive life and support his family. Juma Khan thanked CERF, UNMAS and HDDO for the services he received and for all efforts to provide physical rehabilitation services to person with disabilities in Uruzgan.

### **3. Changes and Amendments**

Initially, the CERF project was scheduled to start on 7 October 2021 and end on 28 February 2023. As part of the original proposal, Farah, Kunar and Uruzgan provinces have been identified as areas with the highest needs based on the assessments done by relevant stakeholders. However, in Q4 2021, during the first round of Call for Proposals, UNMAS was advised that Farah and Kunar provinces no longer required Victim Assistance services because another donor was able to allocate funding for existing implementing partners. UNMAS therefore conducted a competitive solicitation process only for Uruzgan and awarded a joint grant for the delivery of VA services to HDDO & KOO on 29 December 2021. In an effort to avoid the duplication of efforts, UNMAS consulted the World Health Organization (WHO), the Health Cluster and the Ministry of Public Health (through WHO and the Health Cluster) who identified Baghlan and Zabul as the two provinces where the VA projects should be implemented based on the existing needs and the lack of service providers. UNMAS requested CERF for the revision of project locations from Farah & Kunar to Baghlan & Zabul (and keeping the originally selected Uruzgan) and a no-cost extension to provide adequate time for the implementation of the activities in the new provinces. The request was approved by CERF in April 2022. UNMAS conducted a second competitive solicitation process and awarded the Baghlan project to AABRAR and Zabul to AOAD who both started implementation in August 2022 and continued until 31 May 2023.

In November 2022, UNMAS requested a redeployment of funds to reallocate USD 21,958 from the original budget which had been budgeted for the sign-language translation service upon the request of the Disability Inclusion Working Group (DIWG) to make their meetings and other coordination meetings more inclusive. However, this service was not utilised despite the repeated efforts by UNMAS to inform the DIWG and the Inter Cluster Coordination Team of the availability of sign-language translation services. UNMAS requested CERF to remove the sign language translator outputs from the project and log frame and re-allocate the funds to the Staff and Other Personnel, Equipment and General Operating and Other Direct Costs. The request was approved by CERF on 13 January 2023.

#### 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Protection - Mine Action									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	4,567	7,174	2,607	5,124	19,472	6,663	13,315	2,444	2,022	24,444
<b>Total</b>	<b>4,567</b>	<b>7,174</b>	<b>2,607</b>	<b>5,124</b>	<b>19,472</b>	<b>6,663</b>	<b>13,315</b>	<b>2,444</b>	<b>2,022</b>	<b>24,444</b>
<b>People with disabilities (PwD) out of the total</b>										
	4,567	7,174	2,607	5,124	19,472	6,663	13,315	2,444	2,022	24,444

## 5. People Indirectly Targeted by the Project

The project reached 4,644 people (2,510 men, 1,720 women, 146 boys and 268 girls) through disability awareness sessions which included sessions specifically for women with integrated GBV messaging. The awareness campaign increased the community and PwD's awareness on their rights and available support. IPs also distributed posters, fliers, and brochures to PwD, their families and communities. It is hoped that the campaign contributed to reducing the marginalisation of PwD. The women and girls in the project areas also benefited from learning about GBV and the available support if needed.

## 6. CERF Results Framework

Project objective	Rights of survivors, victim families and broader persons with disabilities are respected.			
Output 1	People with disabilities receive physical rehabilitation services			
Was the planned output changed through a reprogramming after the application stage?			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Sector/cluster	Protection - Mine Action			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Number of people receiving physiotherapy services	6,300	8,367	Milestone Reports
Indicator 1.2	Number of people receiving orthotics services and/or repairs	1,750	1,231	Milestone Reports
Indicator 1.3	Number of people receiving prosthetics services and/or repairs	1,050	1,262	Milestone Reports
Explanation of output and indicators variance:		A total of 10,860 people received physical rehabilitation services exceeding the target of 10,400. The targeted number of people receiving physiotherapy was exceeded because of the high demand for the services in the target locations which had limited or no operational rehabilitation facilities. The IPs also provided mobile units to marginalised areas which enabled more PwD to access the services.		
Activities	Description		Implemented by	
Activity 1.1	Delivery of physiotherapy services		HDDO, AOAD & AABRAR	
Activity 1.2	Delivery of orthotics services		HDDO, AOAD & AABRAR	
Activity 1.3	Delivery of prosthetics services		HDDO, AOAD & AABRAR	

Activity 1.4	Delivery of orthotics repair and maintenance services	HDDO, AOAD & AABRAR
Activity 1.5	Delivery of prosthetics repair and maintenance services	HDDO, AOAD & AABRAR

**Output 2** People with disabilities receive mental health and psychosocial support

**Was the planned output changed through a reprogramming after the application stage?** Yes ☒ No ☐

<b>Sector/cluster</b>	Protection - Mine Action			
<b>Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Achieved</b>	<b>Source of verification</b>
Indicator 2.1	Number of people participating in mental health and psychosocial counselling	4,500	5,790	Milestone Reports
<b>Explanation of output and indicators variance:</b>		The target was achieved. The slight overachievement was as a result of the efforts that the implementing partners made to reach remote places. This made the services available to people who may have otherwise not been able to access the services		
<b>Activities</b>	<b>Description</b>	<b>Implemented by</b>		
Activity 2.1	Delivery of mental health and psychosocial counselling services	HDDO, AOAD & AABRAR		

**Output 3** People are reached with a disability awareness campaign

**Was the planned output changed through a reprogramming after the application stage?** Yes ☒ No ☐

<b>Sector/cluster</b>	Protection - Mine Action			
<b>Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Achieved</b>	<b>Source of verification</b>
Indicator 3.1	Number of people participating in disability awareness sessions	6,000	4,644	Milestone Reports
<b>Explanation of output and indicators variance:</b>		The slight under-achievement on the number of people attending disability sessions can be attributed to the limited participation of women during the time that the project was implemented because of the restrictions around the movement of women.		

Activities	Description	Implemented by
Activity 3.1	Delivery of a disability awareness campaign	HDDO, AOAD & AABRAR

**Output 4** Disability Inclusion Work Groups and other coordination meetings into sign language

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Mine Action
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Indicators	Description	Target	Achieved	Source of verification
Indicator 4.1	Number of coordination meetings translated into sign language	12	0	Milestone Reports

<b>Explanation of output and indicators variance:</b>	The funds for the sign-language translation service were reallocated to the Staff and Other Personnel, Equipment and General Operating and Other Direct costs after the translation services were not utilised.
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Activities	Description	Implemented by
Activity 4.1	Delivery of sign language translation services	N/A

NB\* The data that has been provided in this report has not been verified through IMSMA i.e., the mine action national database and is thus considered preliminary data. The data is therefore subject to change once the data in IMSMA becomes available.

## 7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas<sup>8</sup> often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

### a. Accountability to Affected People (AAP)<sup>9</sup>:

<sup>8</sup> These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

<sup>9</sup> AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).



The project implementing partners have long-standing relationships and expertise working with PwDs in Zabul, Baghlan and Uruzgan. As such they worked closely with and engaged the people living with disabilities and the local authorities throughout the project implementation cycle. The affected people provided feedback during consultations, needs assessments, and third-party monitoring visits throughout the design, implementation and monitoring of the project. During implementation, the partners worked closely with the local and provincial structures of persons with disabilities like the national disability working group. The feedback shared by PwD and the stakeholders that work with them in the three provinces will be considered in informing future interventions. The implementing partners also informed affected people of the existence of the Awaaz hotline as a mechanism to provide feedback and/or complaints.

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**b. AAP Feedback and Complaint Mechanisms:**

OCHA convened an After-Action Review (AAR) meeting for the project which was attended by UNMAS and the implementing partners in November 2022, while UNMAS hosted an additional AAR in June 2023, after the end of the issued grants. Stakeholders including the OCHA, UNMAS, and the implementing partners reflected and documented feedback on the overall response, the implementation of projects by partners, the results achieved, the lessons learned and the feedback from communities. The IPs shared feedback from PwD living in the reached communities, organisations that represent people with disabilities and local authorities and shared the details of identified lessons. IPs made two key recommendations going forward:

- Provision of long-term funding by donors to ensure the sustainability of the physical rehabilitation projects. This is particularly important for victim assistance projects, which are not a one-off intervention and requires continuous support for years.
- Inclusion of disability and physical rehabilitation in the Humanitarian Response Plan and Humanitarian Need Overview. While disability is covered across the documents, the inclusion of additional information and further dedicated activities would increase the chances of funding.

UNMAS will relay the recommendations through various forums, including the Afghanistan Protection Cluster.

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**c. Prevention of Sexual Exploitation and Abuse (PSEA):**

The Awaaz, Mine Action and UNOPS Speak-Up hotlines were active during the project implementation period and these were provided so that where needed, people can report cases of sexual exploitation and abuse (SEA). The three implementing partners were required to inform beneficiaries about these hotlines and to assure them of the confidentiality with which reported cases are handled. No cases of SEA were reported during the project. GBV awareness messages were disseminated throughout the project. IPs were also required to have Human Resources Policies that included prevention of SEA (PSEA) and stipulated training on PSEA as mandatory for their personnel to ensure they are aware that sexual exploitation and abuse are not tolerated.

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**d. Focus on women, girls and sexual and gender minorities, including gender-based violence:**

The lack of women in project teams and among health service providers often impedes women and girls from accessing services because they can only be attended to by other women. To increase women and girls' access to services under this project, UNMAS made it mandatory for the partners to hire women to participate in the implementation of the project to enable women and girls to access such services as the physical rehabilitation, the mental health and psychosocial support which were being offered under this project. Twelve women were employed to work in the implementation of the projects in the three provinces. In December 2022, the de facto authorities banned Afghan women from working with local and international NGOs. In April 2023, the de facto authorities issued another ban prohibiting women from working for the United Nations. Implementing partners requested for approval for female employees working on the projects to be allowed to continue working as they are health workers. In Uruzgan, the female staff were allowed to continue working after getting approval from local authorities who gave directives for NGOs to ensure women were covered and working in separate offices from the men. However, in some cases women were not able to travel for work to some areas without a male chaperone (Mahram). For example, in Zabul, female employees who were unable to organise a Mahram to accompany them were not able to join the mobile units for long distance visits as a result of the restrictions on women's movement.

#### e. People with disabilities (PwD):

People with disabilities often face barriers and sometimes get unintentionally excluded from receiving humanitarian assistance. This project targeted people living with disabilities as the primary beneficiaries of the project in provinces that usually lack victim assistance services. Physical rehabilitation and the provision of artificial and specialised mechanical devices improved the physical accessibility which eliminates barriers to schools, medical facilities, workplaces, and other amenities. The project demonstrated its commitment to increase efforts to improve access and inclusion for PwD by providing both static facilities and mobile teams with services. The mobile teams targeted PwD in marginalised and hard to reach areas. Implementing partners hired PwD and women as part of the project to ensure their meaningful participation and inclusion in the project. Hiring female staff members enabled women, who are often excluded because of cultural or movement restrictions, to access services offered under this project. Messages on disability and disability rights were disseminated through training sessions and information, education, and communication (IEC) materials, including posters, fliers, and brochures, were distributed among persons with disabilities, their family members, and the community in general. The disability and GBV community awareness campaign were aimed at ensuring that communities know and respect the rights and capacities of PwD. Implementing partners also put an emphasis on hiring people with disabilities - six people - to implement project activities.

#### f. Protection:

GBV awareness and disability rights-related messages were disseminated to 4,644 people, specifically targeting women. The project provided physical rehabilitation services to PwD in the three provinces without discriminating against those who were not injured by explosive ordnance.

#### g. Education:

No formal education courses were provided under this project.

### 8. Cash and Voucher Assistance (CVA)

#### Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	N/A	N/A

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

UNMAS Afghanistan did not provide cash and voucher assistance as part of this project. UNMAS Afghanistan, through its

implementing partners, directly assisted beneficiaries by providing them physical rehabilitation, mental health and psychosocial support.

#### Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
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N/A	0	US\$ 0	.
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9. Visibility of CERF-funded Activities	
Title	Weblink
Facebook	<a href="https://www.facebook.com/UnitedNationsMineActionService/posts/pfbid02bWC7aEY65Gx62uy5TBMaSQqVjsHuu2UF2wSA7rNn5H6ppLnmZT1ZDhcUpuhwwRBSI">https://www.facebook.com/UnitedNationsMineActionService/posts/pfbid02bWC7aEY65Gx62uy5TBMaSQqVjsHuu2UF2wSA7rNn5H6ppLnmZT1ZDhcUpuhwwRBSI</a>
Twitter	<a href="https://twitter.com/UNMAS/status/1575100510369038339">https://twitter.com/UNMAS/status/1575100510369038339</a>
Instagram	<a href="https://www.instagram.com/p/CjDOtr6vzvm/">https://www.instagram.com/p/CjDOtr6vzvm/</a>
Facebook	<a href="https://www.facebook.com/UnitedNationsMineActionService/posts/pfbid02wsUWRju4TDtizmQ3fy68d5jAy3tessJn75gdB6tU714c8aK47p46ZLb1tDTQR2Mml">https://www.facebook.com/UnitedNationsMineActionService/posts/pfbid02wsUWRju4TDtizmQ3fy68d5jAy3tessJn75gdB6tU714c8aK47p46ZLb1tDTQR2Mml</a>

### 3.4 Project Report 21-UF-WFP-025

1. Project Information			
Agency:	WFP	Country:	Afghanistan
Sector/cluster:	Food Security - Food Assistance	CERF project code:	21-UF-WFP-025
Project title:	Unconditional emergency food assistance to acutely food-insecure people in vulnerable rural areas		
Start date:	03/09/2021	End date:	02/09/2022
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 338,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 179,430,000
	Amount received from CERF:		US\$ 3,499,990
	Total CERF funds sub-granted to implementing partners:		US\$ 191,435
	Government Partners		US\$ 0
	International NGOs		US\$ 26,801
	National NGOs		US\$ 164,634
	Red Cross/Crescent Organisation		US\$ 0

### 2. Project Results Summary/Overall Performance

Using this generous contribution from CERF for Underfunded Emergencies, WFP provided emergency food assistance to a total 157,350 people living in IPC 3 and 4 areas for a period of four months, as part of WFP's 2022 scale-up in response to unprecedented food needs across Afghanistan. In order to ensure that lifesaving assistance reached extremely vulnerable populations in a timely manner, WFP utilised existing stocks in-country to serve the five priority provinces originally proposed under this contribution, including Faryab, Daikundi, Ghor, Nangarhar, and Balkh. CERF commodities were subsequently used to replenish WFP's pipeline to serve additional areas when they arrived in-country. A total 3,828.69 MT of mixed food commodities were procured and distributed under this award.

Of the 157,350 people assisted under this contribution, 77,101 were female and 80,249 were male. WFP reached 48,082 children and an estimated 31,470 persons with disabilities. For beneficiaries in IPC Phase 4 areas, WFP provided monthly in-kind food baskets comprised of 75kg fortified wheat flour, 6.83kg vegetable oil, 9.38kg pulses, and 0.75kg salt to meet 75 percent of basic food requirements for an average household size of seven people. Beneficiaries in IPC Phase 3 areas received in-kind food baskets comprised of 50kg fortified wheat flour, 4.55kg vegetable oil, 6.25kg pulses, and 0.50kg salt to meet 50 percent of basic food requirements for an average household size of seven people. Prior to January 2022, all beneficiary households were receiving a 50 percent ration; however, considering the steep increase in food needs during the 2021-22 winter lean season, WFP increased the ration size to 75 percent for IPC Phase 4 households in 2022. WFP also began providing specialised nutritious food commodities for the prevention of malnutrition among pregnant and lactating women and children aged 6-59 months under its Blanket Supplementary Feeding Programme (BSFP), as part of monthly emergency food baskets. Post-distribution monitoring results show a positive impact of assistance on affected populations, as evidenced by an increase in the number of households reporting improved food consumption scores.

### **3. Changes and Amendments**

During the period under review, WFP experienced delays in the delivery of internationally procured commodities due to increased lead times (4-6 months) and prolonged customs clearance processes that contributed to congestion at the border. This resulted in pipeline shortfalls for essential commodities, including oil and salary, across the 5 priority provinces originally named in this contribution's proposal (Faryab, Daikundi, Ghor, Nangarhar, and Balkh). As agreed with CERF, WFP utilised existing food stock in-country to meet the immediate needs of vulnerable populations in these priority IPC 4 provinces, and subsequently used CERF commodities to replenish WFP's pipeline once they arrived. CERF's flexibility in this regard allowed WFP to ensure that lifesaving assistance reached the most vulnerable in a timely manner.

#### 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Food Security - Food Assistance									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	157	154	171	188	670
Host communities	26,221	25,663	28,452	31,242	111,578	36,820	36,036	39,953	43,870	156,679
Other affected people	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>26,221</b>	<b>25,663</b>	<b>28,452</b>	<b>31,242</b>	<b>111,578</b>	<b>36,977</b>	<b>36,190</b>	<b>40,124</b>	<b>44,058</b>	<b>157,349</b>
<b>People with disabilities (PwD) out of the total</b>										
	5,173	5,063	5,614	6,164	22,014	7,395	7,238	8,025	8,812	31,470

\* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

WFP's emergency food assistance intervention aims to meet the immediate food needs of Afghanistan's most vulnerable, particularly in IPC Phase 3 and 4 areas where food insecurity levels are critical. WFP directly provides monthly food basket rations based on an average household size of seven people. The only component of this emergency intervention that may have indirectly benefitted additional populations, is the dissemination of nutrition messaging to affected communities, including to caregivers (non-recipients) of children under the age of five (6-59 months) at risk of moderate acute malnutrition. These people were indirectly made aware of nutrition issues and malnutrition prevention practices which could be further passed on to their own respective families.

## 6. CERF Results Framework

Project objective	Support people facing acute food insecurity in most vulnerable areas with life-saving emergency in-kind food assistance to support them to meet their basic food needs.			
Output 1	Unconditional in-kind food assistance is provided in a timely manner as per FSAC's agreed assistance package to support targeted beneficiaries to meet their basic food needs for four months			
Was the planned output changed through a reprogramming after the application stage?			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Sector/cluster	Food Security - Food Assistance			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	FN.1a Number of people receiving food	111,577	157,350	CP distribution reports
Indicator 1.2	FN.1b Quantity of food assistance distributed in MT	3,828.69	3,892.19	CP distribution reports
Indicator 1.3	Percentage of households by Food Consumption Score (FCS) phase (Poor)	<40%	18%	Post-distribution monitoring results
Indicator 1.4	Percentage of households by Food Consumption Score (FCS) phase (Borderline)	<50%	54%	Post-distribution monitoring results
Indicator 1.5	Percentage of households by Food Consumption Score (FCS) phase (Acceptable)	>10%	28%	Post-distribution monitoring results
Explanation of output and indicators variance:		During implementation, WFP assisted slightly more people than planned, as it was able to procure additional commodities under this award through cost-saving mechanisms. CERF commodities were used to replenish WFP's pipeline where and when needed to ensure that emergency food assistance reached the most vulnerable in a timely manner.  Post-distribution monitoring results show that WFP assistance effectively improved food consumption scores (FCS) among recipient households, as substantially less households reported Poor FCS at endline compared to baseline, while more households reported Acceptable FCS at endline compared to baseline. An increase was seen in households reporting borderline FCS due to the sharp decrease in those reporting poor FCS.		
Activities	Description		Implemented by	

Activity 1.1	Procurement of food and dispatch to relevant cooperating partners	WFP
Activity 1.2	Coordination with relevant line directorates at provincial level	WFP, Cooperating Partners, and Third-Party Monitors
Activity 1.3	Identification and selection of beneficiaries eligible for in-kind food assistance	WFP and Cooperating Partners
Activity 1.4	Distribution of in-kind food assistance to selected beneficiaries	WFP and Cooperating Partners

## 7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas<sup>10</sup> often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

### a. Accountability to Affected People (AAP)<sup>11</sup>:

In 2022, WFP worked to strengthen its Accountability to Affected Populations (AAP) framework in Afghanistan, with a specific aim to improve community consultations and programme design. WFP is in the process of developing a new Community Engagement Strategy, which will include the development of alternative Community Feedback Mechanisms (CFMs) to enhance accessibility for all populations. In 2022, WFP undertook several focused studies and needs assessments to inform future changes to this strategy, including a Gender and Access Study, Conflict Sensitivity Assessment, and a review of community information needs and preferred communication channels.

WFP conducted two retargeting exercises during the seasonal scale-up and scale-down of emergency assistance activities to ensure that the most vulnerable continued to receive assistance. During these exercises, WFP worked diligently with community members, leaders, and other humanitarian partners to redesign its beneficiary targeting and prioritisation strategy, with an increased focus on community-level consultations during the household-targeting phase.

### b. AAP Feedback and Complaint Mechanisms:

During implementation, WFP maintained a robust Community Feedback Mechanism (CFM) comprised of multiple communication channels for affected populations, including both beneficiaries and non-beneficiaries, to safely provide feedback, raise complaints, or seek answers to their queries. CFM channels include WFP's toll-free hotline, which can be reached via phone, short message service (SMS), or through a dedicated email address ([wfp.afg@wfp.org](mailto:wfp.afg@wfp.org)). The hotline is currently operated by 23 dedicated staff, of which 17 are female; all are fluent in Dari, Pashto, and English. WFP also encourages communities to utilise Awaaz Afghanistan's inter-agency toll-free hotline, which regularly refers relevant cases to WFP for follow-up. Where possible, a help desk is available at WFP food distribution sites to provide information and respond directly to queries from community members.

<sup>10</sup> These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

<sup>11</sup> AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).



During the implementation period, WFP registered 66,559 cases through CFM channels and successfully closed 94 percent (62,733) of them during intake through on-the-spot resolution. Cases requiring further actions were tracked to resolution via individual case numbers. Many cases registered (51 percent) were requests for WFP assistance, which indicates the high level of vulnerability experienced among affected populations. A further 43 percent of cases were requests for information; 2 percent of cases were related to complaints or feedback, while 1 percent pertained to targeting. Overall, 31 percent of callers were female, while the remaining 69 percent were male.

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**c. Prevention of Sexual Exploitation and Abuse (PSEA):**

Community Feedback Mechanism (CFM) channels were used as the primary means of identifying Gender-Based Violence (GBV) and Sexual Exploitation and Abuse (SEA) cases. However, WFP has a zero-tolerance policy in place to prevent such behaviour in association with programme implementation and assistance, specifically acts committed by WFP employees, partners, or other personnel associated with the work of WFP. To ensure that WFP partners are committed to this policy, a special clause and annex on SEA is included in all partner agreements. WFP internal response protocols for SEA complaints are aligned with recommendations from the Afghanistan Protection from Sexual Exploitation and Abuse (PSEA) Task Force.

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**d. Focus on women, girls and sexual and gender minorities, including gender-based violence:**

In January 2022, WFP began including specialised nutritious food commodities for the prevention of acute malnutrition among pregnant and lactating women (PLW) and children under the age of five (6-59 months) as part of emergency food assistance packages for households hosting these vulnerable groups. Specialised nutritious food commodities were provided under WFP's Blanket Supplementary Feeding Programme (BSFP) to ensure that food insecure women and girls of reproductive age received additional support to avoid the further deterioration of their nutrition status. Furthermore, as part of its emergency food assistance beneficiary targeting and selection process, WFP prioritizes female-headed households and those hosting PLW and children under five. During a review of its targeting strategy in 2022, WFP increased the vulnerability score for women to ensure that they were adequately considered for assistance.

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**e. People with disabilities (PwD):**

As part of its emergency food assistance beneficiary targeting and selection process, WFP prioritizes households headed and/or hosting persons with disabilities. During a review of its targeting strategy in 2022, WFP increased the vulnerability score for persons with disabilities to that they were adequately considered for assistance.

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**f. Protection:**

During the implementation period, WFP bolstered the capacity of its Access, Gender, Protection and Accountability teams through the recruitment of one international and one national Gender Officer, three international and two national Protection and Accountability Officers, as well as an Access advisor to lead negotiations with de facto authorities, as needed. WFP Gender and Protection focal points are responsible for reporting, escalating, and following-up on Protection-related cases in line with WFP corporate protocol, all the while ensuring strict case confidentiality.

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**g. Education:**

WFP conducted nutrition awareness campaigns to ensure that recipients of specialised nutritious commodities included as part of emergency food assistance packages, understood the purpose and correct use of nutrition assistance. Nutrition messaging primarily targeted pregnant and lactating women (PLW) and caregivers of children under the age of five (6-59 months) at risk of acute malnutrition. Sensitization sessions were provided at community health clinics via individual or group counselling with the aid of Information Education Communication (IEC) materials. Health and nutrition education campaigns aimed to improve community knowledge and subsequently ensure optimum nutrition-related practices and behaviours amongst beneficiaries.

## 8. Cash and Voucher Assistance (CVA)

### Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	0

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Cash and voucher assistance (CVA) is used by WFP to provide General Food Assistance (GFA) to vulnerable populations that are struggling to meet their basic food needs in areas where markets are functioning well. Following its plans set out in this agreement's original proposal, WFP utilised CERF funds for the provision of in-kind food assistance, primarily due to the donor's flexibility for pipeline replenishment. Since 2021, WFP has scaled up its cash-based transfer scheme to account for approximately 26 percent of all assistance provided and plans to continue scaling up the use of cash in 2023.

### Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
N/A	0	US\$ 0	Choose an item.	Choose an item.

## 9. Visibility of CERF-funded Activities

Title	Weblink
Twitter Post (21 August 2022)	<a href="https://twitter.com/WFP_Afghanistan/status/1561221656588259328">https://twitter.com/WFP_Afghanistan/status/1561221656588259328</a>
Twitter Post (30 August 2022)	<a href="https://twitter.com/WFP_Afghanistan/status/1564509494725545984">https://twitter.com/WFP_Afghanistan/status/1564509494725545984</a>
Twitter Post (03 October 2022)	<a href="https://twitter.com/WFP_Afghanistan/status/1576807386383519745">https://twitter.com/WFP_Afghanistan/status/1576807386383519745</a>

### 3.5 Project Report 21-UF-WHO-028

1. Project Information			
Agency:	WHO	Country:	Afghanistan
Sector/cluster:	Health Water, Sanitation and Hygiene	CERF project code:	21-UF-WHO-028
Project title:	Strengthen Health Emergency Response by Supporting Post Trauma Physical Rehabilitation and WASH Services to PWDs Living in Conflict Affected Areas		
Start date:	01/09/2021	End date:	31/08/2022
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 30,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 7,500,000
	Amount received from CERF:		US\$ 740,000
	Total CERF funds sub-granted to implementing partners:		US\$ 474,551
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 474,551
	Red Cross/Crescent Organisation		US\$ 0

### 2. Project Results Summary/Overall Performance

CERF allocated US\$ 740,000 to WHO Afghanistan from its window for underfunded emergencies to sustain the provision of life-saving assistance. The funding covered the activities under disability and WASH from 01/09/2021 to 31/08/2022.

This project provided support to the war trauma victims of the in three provinces (Kunar, Laghman and Paktia province and a portion to Zabul province as well) which were of the highest needs of disability and physical rehabilitation and WASH services. Through the project, the targeted communities received services in terms of physical rehabilitation, physiotherapy, psychosocial counselling, psychosocial training, social mobilization, and WASH assistance. A total of 23636 individuals (7500 under WASH and 16136 under disability and physical rehabilitation project) received services in the mentioned four provinces.

### 3. Changes and Amendments

The project was implemented as per the original plan with only change that WHO was able cover a part of the disability project in Zabul, in addition to the originally planned three provinces (Kunar, Laghman and Paktia provinces. Thus, the project beneficiaries increased to 23,636 against the initially planned 15,000.

#### 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Health									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	75	263	19	19	376	0	0	0	0	0
Returnees	150	525	37	38	750	0	0	0	0	0
Internally displaced people	150	525	37	37	749	103	94	65	61	323
Host communities	1,125	3,938	281	281	5,625	5060	4586	3163	3005	15814
Other affected people	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>1,500</b>	<b>5,251</b>	<b>374</b>	<b>375</b>	<b>7,500</b>	<b>5163</b>	<b>4680</b>	<b>3228</b>	<b>3066</b>	<b>16137</b>
<b>People with disabilities (PWD) out of the total</b>										
	1,500	5,251	374	375	7,500	407	542	203	203	1355

Sector/cluster	Water, Sanitation and Hygiene									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	150	188	19	19	376	150	188	19	19	376
Returnees	300	375	38	37	750	300	375	38	37	750
Internally displaced people	300	375	37	37	749	300	375	37	37	749
Host communities	2,250	2,813	281	281	5,625	2,250	2,813	281	281	5,625
Other affected people	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>3,000</b>	<b>3,751</b>	<b>375</b>	<b>374</b>	<b>7,500</b>	<b>3,000</b>	<b>3,751</b>	<b>375</b>	<b>374</b>	<b>7,500</b>
<b>People with disabilities (PWD) out of the total</b>										
	1,050	1,313	131	131	2,625	1,050	1,313	131	131	2,625

\* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

The total indirect beneficiaries for the project were estimated around 39,772 individuals with the following proportion in each technical area:

- Disability and physical rehabilitation: The indirect beneficiaries of the disability and physical rehabilitation were the disabled people, while the indirect beneficiaries were the attendants of the disabled people who benefited from the awareness sessions. project were the families of targeted disabled people, which were estimated to be around 32, 272 individuals (two person/family of the direct beneficiary).
- WASH: The indirect beneficiaries for the WASH project were the attendees of the clients which were estimated around 20% of the direct beneficiaries which makes it around 7500.

## 6. CERF Results Framework

<b>Project objective</b>	People of the conflict, underserved, and natural disaster affected provinces are protected from the negative consequences of the conflicts by restored mobility, psychosocial counselling, and appropriate WASH facilities			
<b>Output 1</b>	People living in undeserved and conflict/ natural disaster affected areas received post trauma physical rehabilitation services			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input type="checkbox"/>				
<b>Sector/cluster</b>	Health			
<b>Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Achieved</b>	<b>Source of verification</b>
Indicator 1.1	Number of post trauma physical rehabilitation centers established in high risk and conflict affected areas	3	4	Final Project Reports
Indicator 1.2	Number of people received post trauma physical rehabilitation services	7500	16,136	Final Project Report
<b>Explanation of output and indicators variance:</b>		In the initial plan, WHO intended to support 7500 people, however the project reached 16136 people. Since these activities did not have any funding implication therefore the project offered the service to all the people who required the services. This is why the total beneficiaries increased from the originally planned targets.		
<b>Activities</b>	<b>Description</b>	<b>Implemented by</b>		
Activity 1.1	Provision of post trauma physical rehabilitation services	ABRAAR, HDDO and AOAD NGOs		
Activity 1.2	Training health workers on psychosocial support)	ABRAAR HDDO and AOAD NGOs		
Activity 1.3	Public awareness and social mobilization regarding the physical rehabilitation	ABRAAR and HDDO NGOs		
Activity 1.4	Monitoring of the post trauma physical rehabilitation services	ABRAAR, HDDO NGOs and WHO		
<b>Output 2</b>	PWDs friendly WASH facilities established in the health facilities of undeserved, and natural disaster affected provinces			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input type="checkbox"/>				

Sector/cluster	Water, Sanitation and Hygiene			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of health facilities located in underserved and conflict affected areas with established PWDs friendly WASH facilities	4	4	Site visit, assessment, and reports
Indicator 2.2	Number of people living in undeserved and conflict/ natural disasters affected areas benefited from WASH facilities	7500	7500	Site visit, assessment, and reports
Indicator 2.3	Number of PwDs living in undeserved and conflict/ natural disasters affected areas benefited from WASH facilities	2625	2625	Site visit, assessment, and reports
<b>Explanation of output and indicators variance:</b>		No variances		
Activities	Description	Implemented by		
Activity 2.1	Drilling water well with hand-pump for PWDs with water supply piping work, solar powered	Implemented by Tariq Omar Construction Company with direct supervision of WHO		
Activity 2.2	Rehabilitation and construction of toilets with designated rooms for PWDs, ramp, and handrail	Implemented by Tariq Omar Construction Company with direct supervision of WHO		
Activity 2.3	Installation of special hand wash basins for PWDs	Implemented by Tariq Omar Construction Company with direct supervision of WHO		
Activity 2.4	Establishment of medical waste management facilities (Ash pit, sharp pit, organic pit)	Implemented by Tariq Omar Construction Company with direct supervision of WHO		
Activity 2.5	Monitoring of the WASH interventions	Implemented by WHO WASH team and Sub-offices		
Activity 2.6	Visibility	Implemented by WHO WASH team and Sub-offices		

## 7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas<sup>12</sup> often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

### a. Accountability to Affected People (AAP)<sup>13</sup>:

WHO focused on a systematic approach for identification of the prioritized needs of community; thus, making the best efforts to reflect such intention while planning our activities in line with community's needs. The implementation parts of this objective are achieved through

<sup>12</sup> These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

<sup>13</sup> AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

active and meaningful involvement of community elders in assessing the needs, prioritizing, and planning activities, and monitoring the interventions. Contact with Community health workers through capacity and awareness trainings ensured that they provide information to the community and religious leaders to sensitize them on the availability of these services (WASH and disability and physical rehabilitation including physiotherapy). Awareness campaigns, education sessions and consultation contact time at facilities utilized to communicate the necessary awareness creation among the beneficiaries. Feedback from clients were collected through the implementation partners as well as during monitoring visits by the team

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**b. AAP Feedback and Complaint Mechanisms:**

Inception meetings were planned before commencement of the interventions so that implementing partners understood the roles of partners, WHO and the affected communities in the project. Contact with Community Health Workers through the implementing partners with ensured that the communities have shared their viewpoints to the project inception, implementation, and monitoring. The community leaders were well sensitized on the project activities at all stages of the project and their participation and role including sharing their concerns and complaints to the management team. leaders to sensitize them on the availability of these services. Complaints from beneficiaries were handled with full transparency through local community, regional WHO focal point, national WHO focal point, Health Cluster and OCHA. Awaaz hotline was used for reporting and feedback to consumers.]

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**c. Prevention of Sexual Exploitation and Abuse (PSEA):**

Considering the gender-based disparity in access to health services by women and girls, the project ensured that all services were available to all strata of population living in the targeted communities. In order to improve access, utilization, acceptance of services, and availability of suitable space in a gender-sensitive way, the project focussed on to follows the protocol as recommended by the PSEA Task Force.

WHO is an active member of the PSEA Task Force and has conducted capacity building sessions for WHO staff and healthcare workers and all WHO's implementing partners of this project is to have clear PSEA policy within their organization. All members involved in this of this project had a designated PSEA policy implementing within their organization's operating structure. WHO regularly participate in PSEA task force meetings to ensure coordination with the protection Cluster.

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**d. Focus on women, girls and sexual and gender minorities, including gender-based violence:**

The project involved all groups of community and in decision making, respecting their input fosters a stronger relationship that preserves their dignity. Specific considerations were given to privacy and confidentiality and respect particularly when dealing and handling GBV cases. The project intended to provide services to all, but specific focus was given to women, girls and other minority groups who needed disability and physical rehabilitation.

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**e. People with disabilities (PwD):**

Disability as a consequence of trauma was addressed under this project. Physical rehabilitation including prosthetic care, physiotherapy for victims of conflict related injuries were provided with planned services. In addition, mental health and psychosocial support were provided through the trained staff and volunteers.

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**f. Protection:**

Protection was not intended under the project. However, through the health workers trained under the project, a referral pathway was established.

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**g. Education:**

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Health education and hygiene promotion has been one of the key components of the projects, through which the health care personnel educate patients about their health seeking behaviours. This was targeted both under the WASH and physical rehabilitation projects as the health awareness and health promotion were an integral part of the project.

## 8. Cash and Voucher Assistance (CVA)

### Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	[Fill in]

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

NA

### Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
N/A	0	US\$ 0	Choose an item.	Choose an item.

## 9. Visibility of CERF-funded Activities

Title	Weblink
N/A	



## ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Sector	Agency	Implementing Partner Type	Funds Transferred in USD
21-UF-HCR-018	Protection	UNHCR	NNGO	\$ 412,236
21-UF-OPS-003	Mine Action	UNOPS	NNGO	\$ 220,834
21-UF-OPS-003	Mine Action	UNOPS	NNGO	\$ 159,046
21-UF-OPS-003	Mine Action	UNOPS	NNGO	\$ 188,683
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 313
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 57
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 5,232
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 7,931
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 704
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 7,622
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 227
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 11,364
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 68,232
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 3,506
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 432
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 282
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 539
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 13,435
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 118
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 1,024
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 11,731
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 418
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 856
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 37,937
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 14,038
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 594
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 841
21-UF-WFP-025	Food Assistance	WFP	NNGO	\$ 0
21-UF-WFP-025	Food Assistance	WFP	INGO	\$ 4,001
21-UF-WHO-028	Health	WHO	NNGO	\$ 117,658

21-UF-WHO-028	Health	WHO	NNGO	\$ 56,876
21-UF-WHO-028	Health	WHO	NNGO	\$ 300,017
21-UF-HCR-018	Protection	UNHCR	NNGO	\$ 278,936