AFGHANISTAN
HUMANITARIAN FUND

ANNUAL REPORT

2018

AHF Afghanistan Humanitarian Fund

THE AHF THANKS ITS DONORS FOR THEIR GENEROUS SUPPORT IN 2018

Australian Aid
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Ministry of Foreign Affairs of Denmark
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Deutsche Humanitäre Hilfe
Norwegian Ministry of Foreign Affairs
Qatar Fund for Development
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Schweizerische Eidgenossenschaft
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Confederazione Svizzera
Confederaziun svizra
Swiss Agency for Development and Cooperation SDC
UKaid from the British people
United Nations Foundation

CREDITS

This document was produced by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) Afghanistan. OCHA Afghanistan wishes to acknowledge the contributions of its committed staff both at headquarters and in the field in preparing this document.

The latest version of this document is available on the OCHA website at:

https://www.unocha.org/afghanistan

Full project details, financial updates, real-time allocation data and indicator achievements against targets are available at gms.unocha.org/bi.

For additional information, please contact:
Afghanistan Humanitarian Fund
ahf-afg@un.org
Tel: +93 (0) 793001122

Front Cover and Page 5: IDPs camp Sharak e Sabz, Hirat, Afghanistan, December 2018

Photo Credit: OCHA Afghanistan

Financial data is provisional and may vary upon financial certification

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of Humanitarian Affairs

FOREWORD

I am pleased to present you the 2018 Annual Report of the Afghanistan Humanitarian Fund (AHF). It provides an overview of the AHF: how it worked, how it was used, and how it supported cluster targets and objectives. It also provides an update on the management and accountability of the AHF.

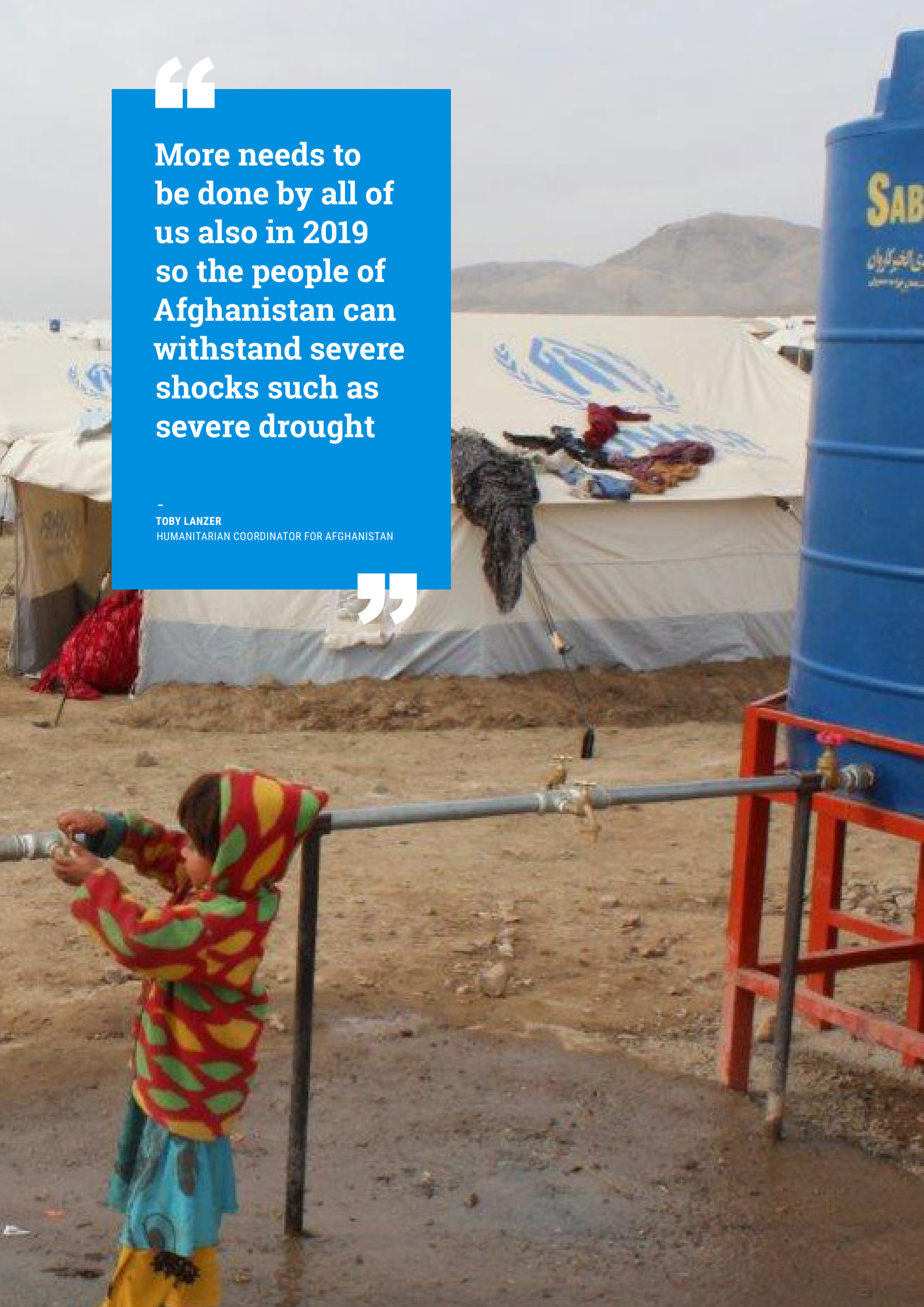
In 2018, Afghanistan suffered its worst drought in decades. Conflict grew in intensity and geographic scope and levels of poverty climbed to 54 per cent. At the same time, the unprecedented Eid ceasefire in June 2018 gave people their first taste of peace after decades of war. Economic growth picked up, and the international community met in Geneva to reaffirm its commitment to Afghanistan's stability, self-reliance, and regional connectivity. Working towards a better tomorrow, however, could not detract us from pressing issues of the day The severe drought of 2018, particularly in the north and west of Afghanistan, unleashed a host of problems on already hard-hit communities, exposing people to additional risks and pushing them to unsustainable short-term coping strategies. 13.5 million people faced crisis or worse levels of food insecurity - six million people more than 2017 – and 3.6 million were just one step away from famine.

In response, the AHF allocated US$63 million to 41 aid agencies in order to implement 84 urgent humanitarian projects. To ensure these agencies could provide timely and much needed humanitarian assistance (including in hard-to-reach areas), the AHF conducted the highest ever number of annual allocations of any Country-based Pooled Fund (CBPF).

Aid agencies supported affected populations and enabled internally displaced people to sustain themselves throughout the harsh winter. This required the distribution of food and seeds; maintaining primary health services; providing emergency shelter as well as safe drinking water; and the treatment of children suffering from severe malnutrition. The work of the AHF and its partners in 2018 would not have been possible without strategic guidance provided to me by the AHF Advisory Board, as well as management support provided by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and its humanitarian financing team in Kabul. I also want to thank colleagues who backed the transition from the Common Humanitarian Fund to the now fully revised AHF.

No fund would function without donor supports. The Governments of Australia, Canada, Denmark, Germany, the Republic of Korea, Norway, Qatar, Sweden, Switzerland, the United Kingdom, as well as donations made by private individuals to the United Nations Foundation, enabled the work to take place, for which I am most grateful. As 2019 takes hold, I would like to count on donors again to enable aid agencies' fast and principled response to suffering. The AHF enables just that and together we can build on last year's improvements to ensure that the best possible protection and assistance reached people, on time. Thank you.

Toby Lanzer
Humanitarian Coordinator



More needs to be done by all of us also in 2019 so the people of Afghanistan can withstand severe shocks such as severe drought

–
TOBY LANZER
HUMANITARIAN COORDINATOR FOR AFGHANISTAN

AHF 2018 ANNUAL REPORT

2018 IN REVIEW

This Annual Report presents information on the achievements of the Afghanistan Humanitarian Fund during the 2018 calendar year. However, because grant allocation, project implementation and reporting processes often take place over multiple years (CBPFs are designed to support ongoing and evolving humanitarian responses), the achievement of CBPFs are reported in distinct ways:

1. Information on 2018 allocations is shown in blue colour, indicating the intended impact of allocations, rather than achieved results. Since project implementation and reporting often continues into the subsequent year, final result information is often not available at the time of publication of CBPF annual reports.

2. Results reported in 2018 may originate from allocations launched in 2017 and prior years (shown in orange).

3. Data used in this report has been extracted from final narrative reports between 1 January 2018 – 31 January 2019.

4. Duplications were removed from data by applying HRP duplications removal method.

5. Contribution recorded based on the exchange rate when the cash was received which may differ from the Certified Statement of Accounts that records contributions based on the exchange rate at the time of the pledge.

2018 IN REVIEW

HUMANITARIAN CONTEXT

Armed Conflict and Protection of Civilians

Ongoing armed conflict continued to drive humanitarian needs across Afghanistan, inflicting the world's highest levels of civilian casualties and the destruction critical public infrastructure. The first nine months of 2018 registered a 46 per cent increase in the number of civilian casualties from suicide attacks; a 39 per cent increase in civilian casualties and a 153 per cent increase in aid workers killed or injured compared to the same period of the previous year. Large-scale military operations and indiscriminate use of improvised explosive devices (IEDs) caused extreme levels of physical and psychological harm to civilians. 2018 was the fifth consecutive year with over 10,000 civilian casualties. Violations of International Humanitarian Law (IHL) and Human Rights occur frequently, and the protection of civilians was a key priority for humanitarians also in 2018.

Prolonged drought conditions

Severe drought affected more than two-thirds of Afghanistan, devastated the agricultural sector and left some four million people across the worst-affected provinces in dire need of life-saving humanitarian assistance.

Population Displacement and Returns

People continued to use mobility, often as the only coping strategy, trying to evade a range of conflict, protection and livelihoods related risks and hazards. Though the number of people displaced due to conflict initially declined, the effects of the drought contributed to a significant increase of displacement.

An estimated 263,000 people were displaced in the provinces of Badghis and Hirat alone, resulting in the establishment of 19 informal settlements. While immediate humanitarian assistance remained critical such as safeguarding lives and protection needs of IDPs and returnees, both groups often required longer-term and significant development assistance. Lack of basic services, socio-economic pressure and inter-communal tensions created inequalities and resulted in secondary displacement.

Cross-border Influx

Returns from Iran accelerated to an estimated 670,000 and reached unprecedented levels. In contrast, returns from Pakistan were at an estimated 43,000 and thereby an all-time low.

Access to Basic and Essential Services

Active armed conflict, large-scale population movements, and limited livelihood options continued to impact on the provision of essential services, particularly for health and education. Forced closure of schools, health services, attacks against health workers and destruction of facilities and assets increased in terms of both frequency and severity. While reduced access to basic services affected all parts of the population, internally displaced people (IDPs) and returnees were particularly impacted.

Desease Outbreaks

Access to the National Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS) remained uneven across the country. Surveys revealed imbalances across socio-economic levels, a clear urban/rural divide and high out-of-pocket expenditures for the majority of the population. Population displacement further increased the number of disease outbreaks, including viral hepatitis, diarrhoea, measles and Crimean Congo Haemorrhagic Fever (CCHF).

Security and Access Constraints

Security-related constraints posed significant challenges to the delivery of both humanitarian and development assistance across Afghanistan. AHF partners experienced an increasing range of challenges for example in terms of their ability to move goods and personnel, and various types of requirements imposed by both state- and non-state actors. The continuous development of context-sensitive strategies and project design became a key requirement for all implementing partners.

Operational Capacity

The number of partners implementing AHF projects across Afghanistan increased in 2018. However, additional measures were and continue to be required to extend the presence of partners particularly to hard-to-reach locations where humanitarian needs are increasing.

Humanitarian Response Plan

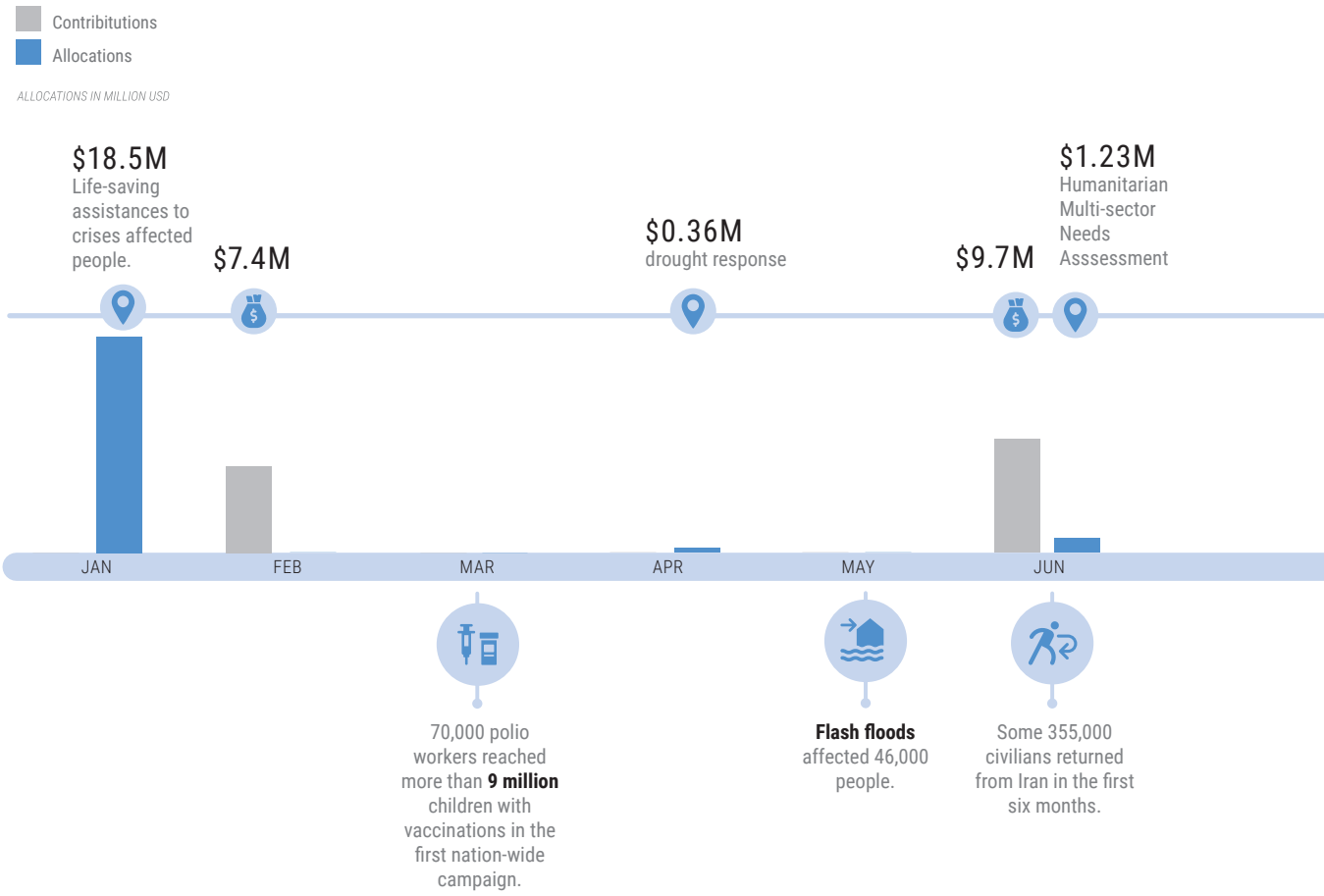
The humanitarian response during the first half of the year was hampered by underfunding and insecurity. The Humanitarian Country Team has agreed to revise the HRP in July 2018 based on situational analysis which show that the country is now experiencing a drought. The revised HRP included drought related requirements.

6.6M People in need

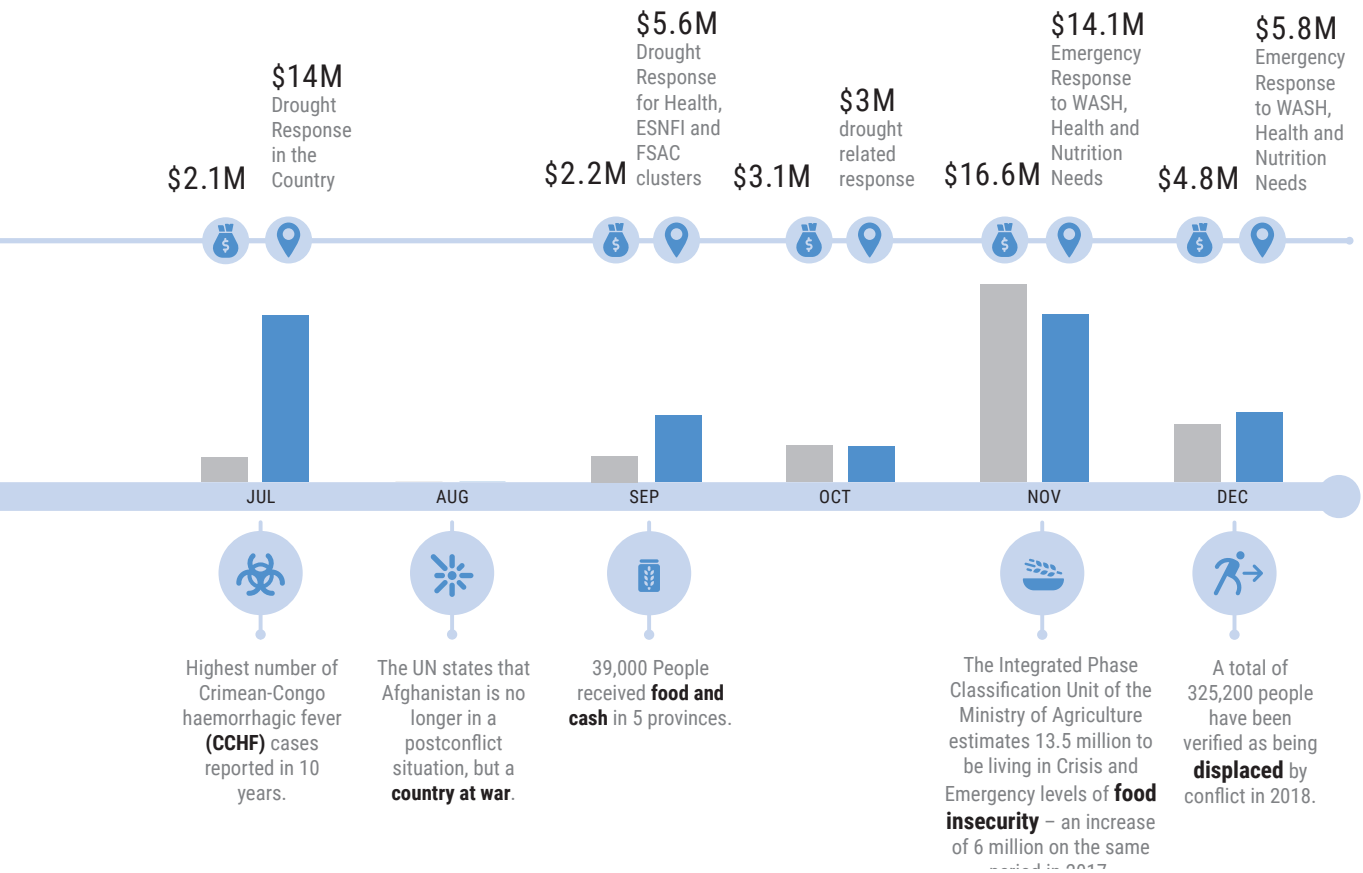
5.2M People targeted

$599M Funding requirement

2018 TIMELINE



THE AFGHANISTAN HUMANITARIAN FUND ALLOCATED NEARLY US$63 MILLIO
PROGRAMS ADDRESSING THE STRATEGIC OBJECTIVES OF THE AFGHANISTAN
ALLOCATIONS WERE DISBURSED VIA PRIORITIZATION PROCESSES AND IN CLO

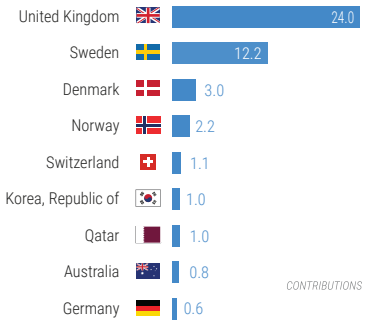


N, MOSTLY IN THE SECOND PART OF THE YEAR, TO HUMANITARIAN 2018-2021 HRP. DURING THIS PERIOD, TWO (2) STANDARD AND SIX (6) RESERVE SE COLLABORATION WITH HUMANITARIAN CLUSTERS AND PARTNERS.

AFGHANISTAN HUMANITARIAN FUND AT A GLANCE

2018 ALLOCATION

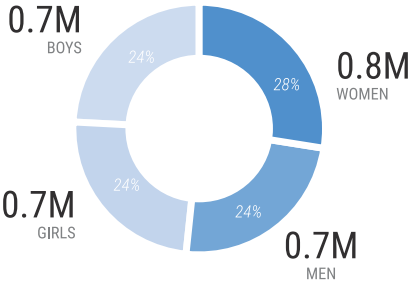
$45.9M
CONTRIBUTIONS



CONTRIBUTIONS IN MILLION USD

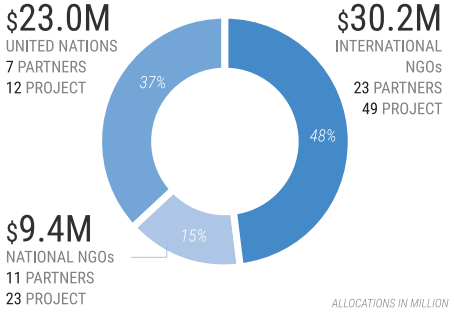
2.9M
PEOPLE TARGETED

For people reached visit: http://bit.ly/CBPF_overview



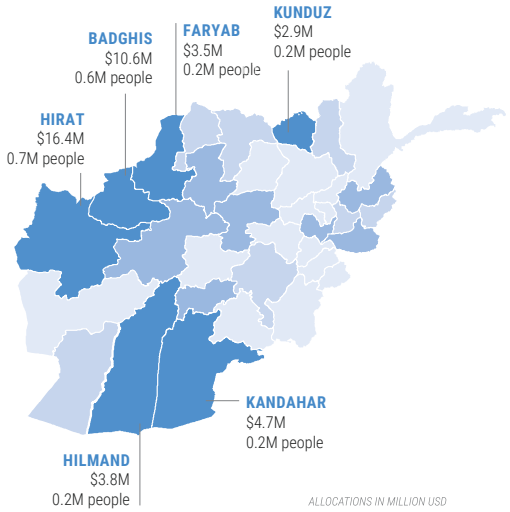
IN MILLIONS OF PERSONS

41 PARTNERS | **84** PROJECTS



ALLOCATIONS IN MILLION USD

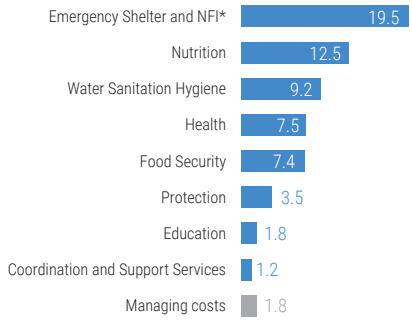
$62.6M ALLOCATIONS | **2.9M** PEOPLE TARGETED



ALLOCATIONS IN MILLION USD

Other regions: Ghor $2.8M, 0.4M people; Nangarhar 2.8M, 0.2M; Uruzgan $2.6M, 0.3M; Kabul $1.9M, 26K; Bamyan $1.5M, 40K; Sar-e-Pul $1.1M, 61K; Balkh $1.0M, 100K; Laghman $0.9M, 43K; Takhar $0.7M, 70K; Jawzjan $0.7M, 70K; Ghazni $0.7M, 0.6K; Kunar $0.4M, 0.3K; Nimroz $0.4M, 75K; Samangan $0.4M, 30K; Zabul $0.3M, 19K; Paktika $0.3M, 7K; Badakhshan $0.2M, 11K; Farah $0.2M, 0.1K; Baghlan $0.2M, 0.1K; Daykundi $0.2M, 40K; Paktya $0.2M, 0.1K; Wardak $0.1M, 9K; Logar $0.1M, 1K; Parwan $20K, 0.1K; Panjsher $20K, 0.1K; Kapisa $20K, 0.1K; Khost $20K, 0.1K

ALLOCATIONS BY CLUSTER
6.4% OF HRP REQUIREMENTS



*NFI - Non-food Item

ALLOCATIONS IN MILLION USD

See explanatory note on p.6

RESULTS REPORTED IN 2018

$52.4M
ALLOCATIONS

4.5M
PEOPLE TARGETED

4.5M
PEOPLE REACHED

2015

$0.4M	1	1
ALLOCATIONS	PROJECT	PARTNER

2016

$12.1M	10	8
ALLOCATIONS	PROJECTS	PARTNERS

2017

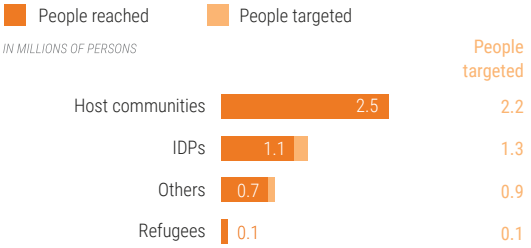
$35.1M	43	36
ALLOCATIONS	PROJECTS	PARTNERS

2018

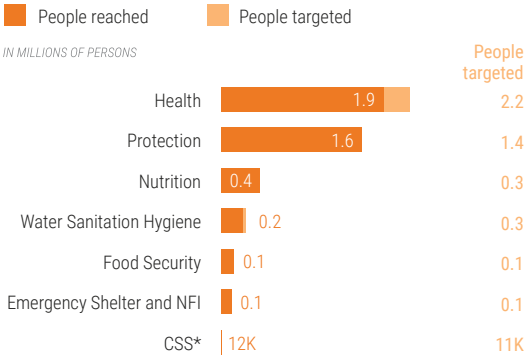
$4.8M	11	11
ALLOCATIONS	PROJECTS	PARTNERS

PEOPLE REACHED		PEOPLE TARGETED
1.2M WOMEN		1.1
1.0M MEN		1.0
1.1M GIRLS		1.1
1.2M BOYS		1.2

PEOPLE TARGETED AND REACHED BY TYPE

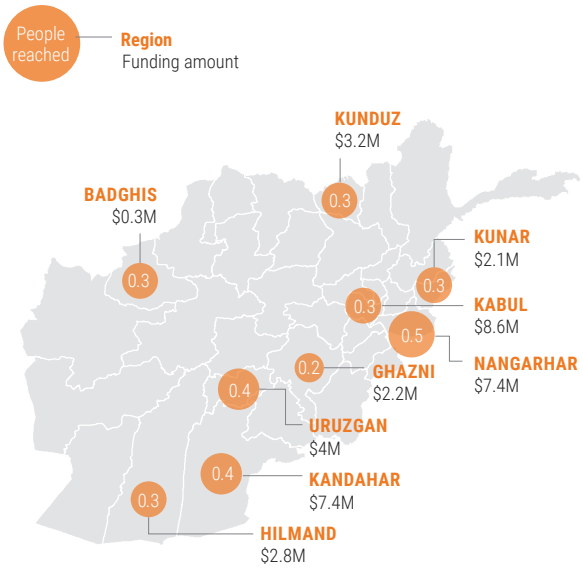


PEOPLE TARGETED AND REACHED BY CLUSTER



*NFI - Non-food Item, CSS - Coordination and Support Services

PEOPLE REACHED AND FUNDING BY REGION



Other regions: Zabul 138K people, $0.9M; Badakhshan 128K, $1M; Faryab 110K, 0.6M; Takhar 101K, $1.4M; Paktika 93K, $0.5M; Baghlan 90K, $0.6M; Laghman 77K, $0.8M; Ghor 74K, $0.4M; Sar-e-Pul 69K, $0.6M; Logar 61K,$0.7M; Nuristan 58K, $0.4M; Balkh 57K, $0.4M; Kapisa 56K, $0.4M; Khost 41K, $1.4M; Hirat 37K, $3.3M; Jawzjan 37K, $0.2M; Paktya 36K, $0.5M; Wardak 32K, $0.4M; Nimroz 28K, 64K; Farah 27K, $0.3M; Parwan 24K, $0.2M; Samangan 20K, $0.2M; Daykundi 18K,$0.2M; Panjsher 7K, 77K; Bamyan 52, $9K.

Results are based on 2018 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year.

2018 IN REVIEW

ABOUT THE AFGHANISTAN HUMANITARIAN FUND

An Investment in Humanity

The AHF is a country-based pooled fund (CBPF) established in 2014, designed to support swift and principled humanitarian action in Afghanistan. The AHF enables timely allocation and disbursement of donor resources to address the most critical humanitarian needs defined in the Afghanistan HRP. It supports in-country relief organizations to reach the most vulnerable people and aims to ensure maximum impact with limited resources. Core principles are:

- Inclusive and promoting partnerships: Funds are directly available to a wide range of relief partners.
- Timely and flexible: It supports the delivery of an agile response in a fluid emergency.
- Efficient and accountable: It minimizes transaction costs and provides transparency and accountability. Recipient organizations are thoroughly evaluated, and relief projects are monitored with regular reporting on achievements.

The AHF enables principled, coordinated and timely humanitarian response in Afghanistan. It is distinguished by its focus, flexibility and its ability to boost response through targeted allocations as well as to strengthen humanitarian coordination and leadership in Afghanistan. Like all CBPFs, the AHF is designed to complement other humanitarian funding sources such as bilateral funding and the Central Emergency Response Fund (CERF).

What does the AHF fund?

The AHF funds activities that have been prioritised as most urgent and strategic to address critical humanitarian needs in close alignment with the Afghanistan HRP. It funds interventions to support immediate response to sudden onset crises or rapidly deteriorating humanitarian conditions in the country.

Who can receive AHF funding?

The AHF is inclusive and promotes partnerships. Funds are directly available to a wide range of relief partners. These partners include national and international NGOs, UN agencies and Red Cross/Red Crescent organisations. Recipient organisations are thoroughly assessed, and projects are monitored with regular reporting on implementation and achievements. NGOs undergo eligibility and capacity assessments to ensure they have the necessary structures and capacity to meet the Fund's robust accountability standards and efficiently implement humanitarian activities in Afghanistan.

Who sets the AHF priorities?

The UN Humanitarian Coordinator, in consultation with the AHF Advisory Board, informed by the Inter-Cluster Coordination Team (ICCT), decides on the highest priority needs to be funded. Cluster Leads work with their cluster members to define cluster-specific priorities per geographical areas, which are then addressed in AHF allocation strategies.

How are projects selected for funding?

The AHF uses two grant allocation modalities:

1. Standard Allocations: to enable projects included in the HRP and OPS, based on strategies that identify highest priority needs, as well as underpinned by vulnerability data and needs analysis. Project proposals are prioritised and vetted through cluster review committees before they are recommended to the AHF AB for endorsement, and approval by the UN Humanitarian Coordinator.

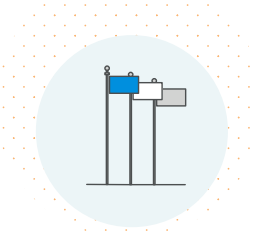
2. Reserve Allocations: to enable rapid and flexible allocation of funds in the event of unforeseen emergencies, or to address acute gaps. Though Reserve allocation processes are fast-tracked to enable fast disbursement, all project proposals are vetted through cluster review committees and then recommended to the AHF AB for endorsement, and approval by the UN Humanitarian Coordinator.

Who provides the funding?

The AHF receives contributions from UN Member States and also private and public donors.

Location: Herat province, Photo credit: OCHA

HOW DOES THE AFGHANISTAN HUMANITARIAN FUND WORK

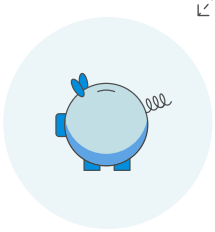


DONOR CONTRIBUTIONS

Donors contribute to the humanitarian funds before urgent needs arise.

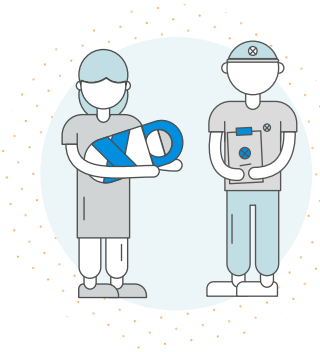
IDENTIFYING HUMANITARIAN NEEDS

Aid workers on the ground identify the most urgent types of humanitarian assistance that affected people need.



MANAGING FUNDS

Contributions are pooled into single funds.



ALLOCATING FUNDS

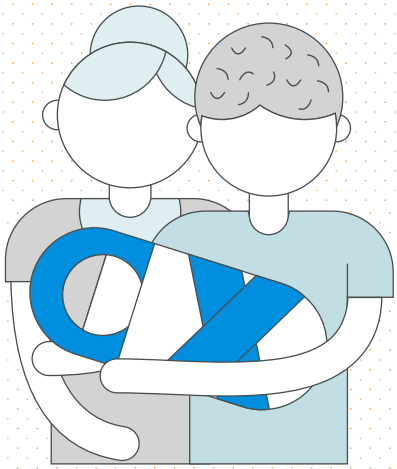
Based on expert advice from aid workers and on needs, the Humanitarian Coordinator allocates CBPF funding.

REQUESTING FUNDS

Humanitarian partners work together to prioritize life-saving relief activities. They request CBPF funding through the Humanitarian Coordinator.

HUMANITARIAN RESPONSE

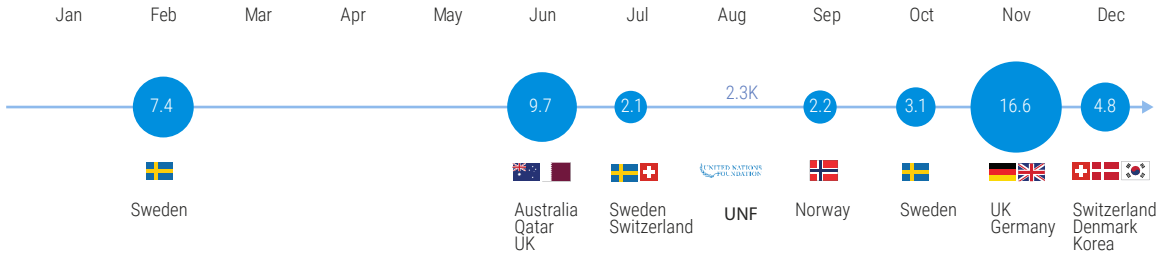
Relief organizations use the money for urgent aid operations. They always track spending and impact, and report back to the Humanitarian Coordinator.



2018 IN REVIEW

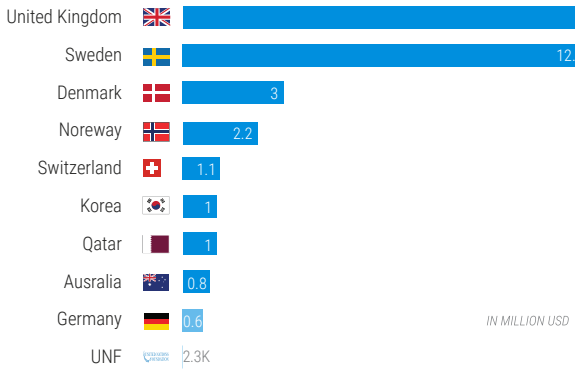
DONOR CONTRIBUTIONS

CONTRIBUTIONS TIMELINE



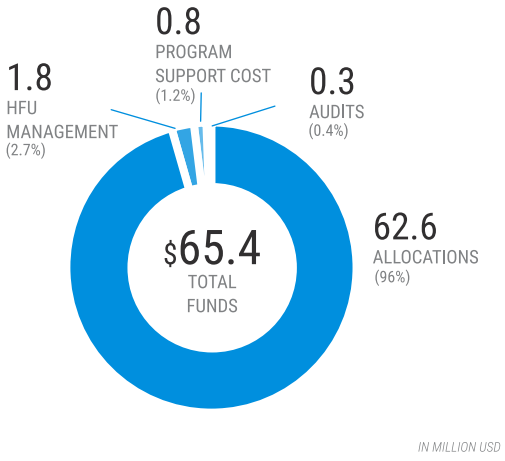
DONOR CONTRIBUTIONS

$45.9M
CONTRIBUTIONS



1 Excludes $4.2M additional 2016 contribution, deposited on 4 January 2017

UTILIZATION OF FUNDS



Carry over and refunds

The AHF carried-over US$ 24.3 million from 2017 and received US$ 0.6 million in refunds (under-spent budget or declared ineligible costs) from partners.

Renewed Support

It is understood that donor trust in the AHF grew. Donors expressed their confidence by providing US$ 45.9 million in 2018. Their commitment and generous contributions enabled the AHF to continue supporting humanitarian partners in addressing most critical needs throughout Afghanistan

Contribution to the HRP

Donor support provided to the AHF contributed 7.66 per cent to the total amount disbursed by all funding sources in support of HRP objectives.

Complementarity

Commitments by donors to the AHF complemented other funding sources, in particular a US$ 12 million allocation by the Central Emergency Response Fund (CERF) that was managed by the team in OCHA which also manages the AHF. The two pooled funds jointly supported the scaling-up of the humanitarian response during worsening drought conditions in twenty provinces of Afghanistan. Without diminishing the importance and value of bi-lateral and other funding provided to the drought response, a substantial part of related funding was channelled by donors through the AHF, also because its ability to allocate grants in a fast manner. The AHF provided US$37 million to the collective drought response in 2018. Timely and foreseeable donor contributions are vital to AHF partners to be able to provide urgent and life-saving humanitarian assistance to vulnerable and under-served populations throughout Afghanistan .

Increased Funding

Though there was a very noticeable drop in contributions during the first half of 2018, renewed donor support resulted in a total increase in annual funding of 13 per cent compared to the previous year. This represents the third highest level of donor support since launch of the fund in 2014.

Revision of AHF Operations

The increase in funding is understood to be due to overall revision of AHF operations in the second half of 2018 and compliance with CBPF global guidelines. The AHF will be part of the CBPF global evaluation in 2019, also to guide any further steps needed to optimise its processes.

Maintaining Support

The AHF was able to maintain support provided by current donors, re-gained support from previous ones, as well as attracted first-time donors such as Qatar. Overall, more donors supported the AHF, compared to any previous year

Multi-year Funding

IIn the second half of 2018, Switzerland committed multi-year funding to the AHF. Doing so, Switzerland actively supports global calls for predictive funding (Grand Bargain, World Humanitarian Summit, etc) and is now enabling the AHF to 'plan ahead', both in terms of its operational costs and project expenses. The AHF is thereby the first CBPF that received a 4-year funding commitment by a UN Member State that includes annual amounts and disbursement times.

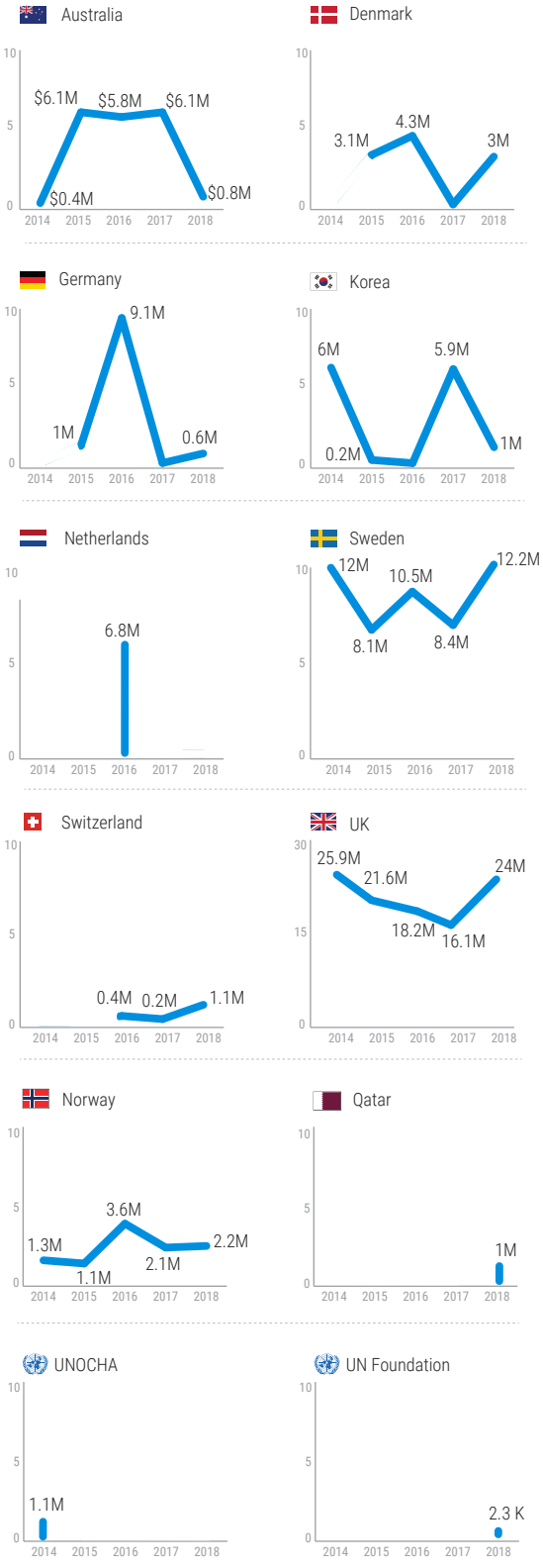
Donor Relations

The AHF acknowledges the significant importance and therefore actively supports close interaction, improved transparency, accountability and enhanced reporting towards all its stakeholders. Though there have been substantial efforts made, together with donors, to further improve and harmonize CBPF reporting (incl. Annual Reports), the AHF acknowledges that additional information may be required by donors particularly at country-level.

Collaboration

Collaborative relationships with both contributing and non-contributing donors continue to focus on supporting their, but also the ability of the AHF to further enhance and future-proof humanitarian financing in Afghanistan. For example, through developing predictive analytics, optimizing cost-effectiveness and risk-management, as well as co- and multi-year funding of partner projects

DONOR TREND



1 Donor with multi-year agreement

2018 IN REVIEW

ALLOCATION OVERVIEW

In summary, a total of US$62.6 million was allocated under two standard- and six reserve allocations. They enabled 84 mostly live-saving projects, implemented by 11 national, 23 international NGOs and 7 UN agencies, targeting approximately 2.9 million people in urgent need of assistance.

Under the leadership of the Humanitarian Coordinator and supported by the members and observers of the AHF Advisory Board, the fund demonstrated its increasing ability to actively support a timely, coordinated and effective humanitarian response in Afghanistan. For example, AHF allocations enabled the provision of essential services and addressed most urgent and multisectoral needs of IDPs, drought-affected host communities and other highly vulnerable parts of the population. The Fund promoted diversity, improved its partners geographical presence and enhanced collective ownership of the response by including stakeholders in decision-making processes.

Combining strategic leadership of the Humanitarian Coordinator, guidance by the Advisory Board managerial support by OCHA with technical guidance provided by Clusters, AHF allocations not only saved lives and alleviated suffering, but also contributed to strengthening the overall humanitarian architecture and thereby response in Afghanistan.

It is vital to the AHF, to further enhance the role of the Cluster system in all respective technical and managerial aspects of the fund. This is particularly important for Standard allocations during which Cluster coordinators are required to present (and 'defend') their respective AHF funding requirements to the AHF Advisory Board. And when Cluster coordinators need to demonstrate clearly how CBPF funds are planned to be used by their cluster members (UN, NGO, RC) 'in concert' with all other funding sources.

All CBPFs managed by OCHA are situated right at the 'interface' of humanitarian coordination. While the AHF is supported extensively by OCHA infrastructure both at HQ and country-level and works in direct support of the Cluster system, it also requires close collaboration with all other relevant in-country coordination mechanisms. Therefore, the AHF enhanced its collaboration with the Agency Coordinating Body for Afghan Relief and Development (ACBAR) where it now convenes monthly meetings, provides technical 'clinics' and conducts trainings for all NGO partners. Trainings and workshops are also available to UN partners, be it individual such as per cluster and agency, as well as joint multi-day workshops together with NGO partners to improve GMS access, financial processes and risk-management.

While close collaboration with NGO partners continued to be of high importance, the strategic focus of the AHF was set on supporting frontline responders and to enable service delivery where it was needed most. Therefore, more than US$39.6 million, almost 63 per cent of programmed funds was provided to non-governmental partners. US$30.2 million (48 per cent) was granted to international and US$9.4 million (15 per cent) to national NGOs.

The AHF actively supports the DFID-funded 'NGO Twinning-Program', a globally unique approach aimed at localisation and integration of national partners into the overall humanitarian response. Following a complete revision of AHF partner assessment protocols in the second half of 2018, there are now more than 100 humanitarian organisations eligible to receive AHF funding, most of them are national NGOs.

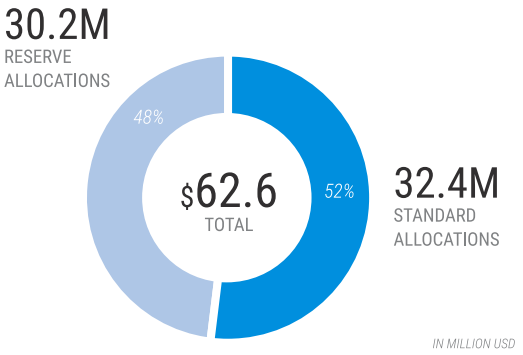
However, the AHF also supported United Nations agencies, funds and programmes. These received $23 million (37 per cent) in funding to enable projects implemented by NGOs, for example by procuring certified seeds and emergency shelters, as well as for UN agencies that are implementing projects directly. As mentioned before, the HFU not only manages AHF, but also CERF allocations in Afghanistan. It did so in 2018 on basis of a comprehensive strategy, aiming to ensure complementarity of both funds. CERF allocations are only accessible by UN agencies, funds and programmes. Compliant with CBPF global guidelines, all AHF-funded projects supported approved cluster strategies, as well as the strategic objectives (SO) of the HRP 2018 – 2021:

SO 1: Save lives in areas of highest need.

SO 2: Reduce protection violations and increase respect for International Humanitarian Law.

SO 3: People struck by sudden onset crises get the help they need, on time.

ALLOCATIONS BY TYPE



ALLOCATIONS BY STRATEGIC FOCUS

S01 Lives are saved in the areas of highest need.

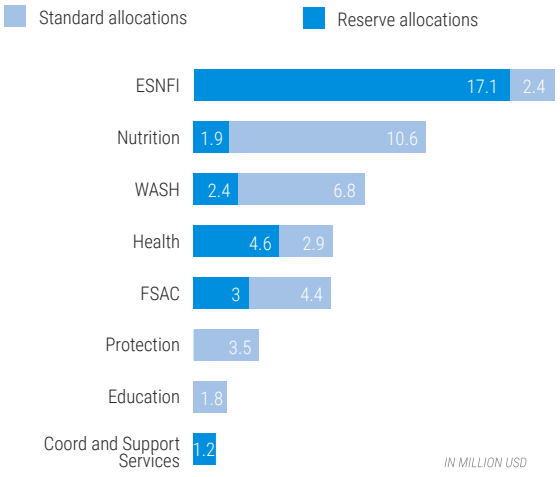
S02 Protection violations are reduced and respect for International Humanitarian Law (IHL) is increased.

S03 People affected by sudden- and slow-onset crises are provided with a timely response.

Allocations by strategic focus

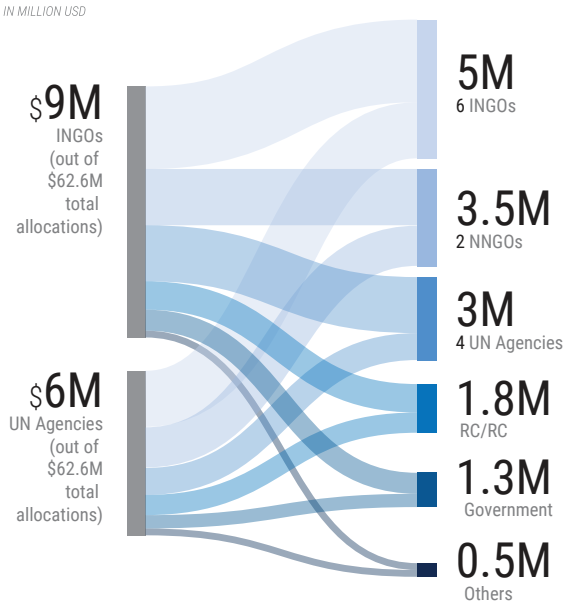
$53.1M S01 $5.5M S02 $4M S03

ALLOCATIONS BY CLUSTER

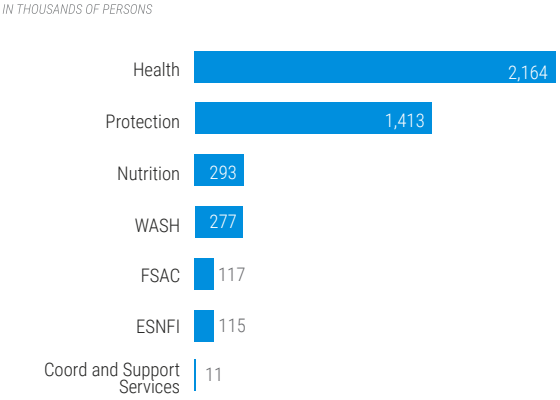


[1] MPTF administrative agent fee (1% of donor deposits); UN Secretariat Programme Support Costs (Jan-May 2016 3% of NGO allocations, 2% since June 2016); Management (OCHA Somlia HFU); Accountability costs (capacity assessments and external monitoring); Audits (as budgeted).

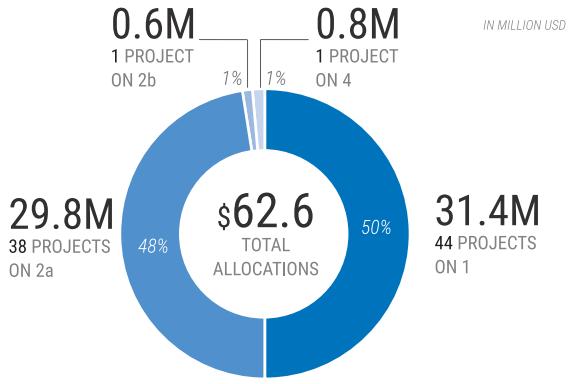
SUBGRANT BY PARTNER TYPE



PEOPLE TARGETED BY CLUSTER



GENDER MARKER PROJECTS



1 - The project is designed to contribute in some limited way to gender equality
2a - The project is designed to contribute significantly to gender equality
2b - The principle purpose of the project is to advance gender equality
4 - Not applicable - only used for very small number of projects, such as "support services"

FUND PERFORMANCE

With the introduction of the Common Performance Framework (CPF) in 2018, OCHA added a new tool to the set of management, reporting and accountability instruments for the Country-Based Pooled Funds (CBPFs).

The CPF provides Humanitarian Coordinators (HC), Advisory Boards, OCHA and other stakeholders a way to monitor and improve the performance of CBPFs. The tool is built on the five fundamental principles (below) that guide the management of CBPFs: Inclusivity, flexibility, timeliness, efficiency and accountability and risk management.

The CPF applies a common methodology and set of indicators based on the five principles to measure Fund-management performance (Fund Management Level) and the extent to which the use of the Fund adds value to the quality of response (Response Outcome Level).

PRINCIPLE 1

INCLUSIVENESS

A broad range of humanitarian partner organizations (UN agencies and NGOs) partici¬pates in CBPF processes and receive funding to implement projects addressing identified priority needs.

1 Inclusive governance

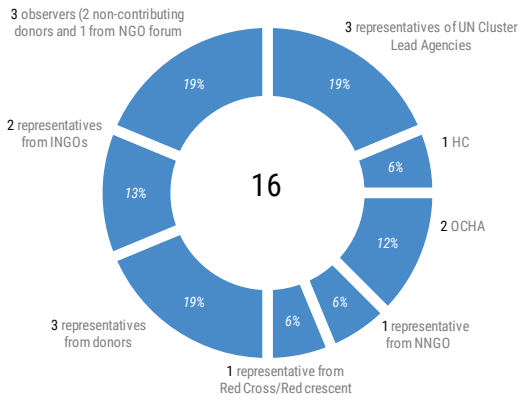
The Advisory Board has an appropriate size and a balanced representation of CBPF stakeholders.

Target

i. Humanitarian Coordinator
ii. OCHA Head of Office
iii. AHF Head of Unit
iv. 3 Representatives of contributing donors
v. 3 Representatives of UN Cluster Lead Agencies
vi. 3 Representatives of the NGO community (1 NNGO representative, 2 INGO representatives)
vii. 2 Representatives of a non-contributing donor
viii. 1 Representative of an NGO forum
ix. 1 Representative of a Red Cross/Red Crescent organisation

Results

COMPOSITION OF ADVISORY BOARD



Analysis

The AHF Advisory Board is composed as prescribed by the AHF Operational Manual and CBPF global guidelines.

Follow-up Action

The composition of the AB is to be reviewed annually.

2 Inclusive programming

The review committees of the Fund have the appropriate size and a balanced representation of different organizations.

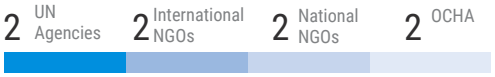
Target

All Strategic Review Committee (SRC) and Technical Review Committee (TRC) meetings are chaired by Cluster Coordinator, technically supported by the AHF and with equal representation of Cluster members by type of organisation (NGO, UN, RC).

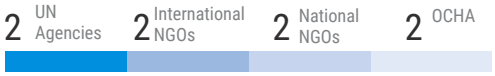
Results

REPRESENTATIVES IN THE COMMITTEE

# of representatives that participated in average in Strategic Review Committee



# of representatives that participated in average in Technical Review Committee



Analysis

The AHF developed a Standard Operating Procedure (SOP) Terms of Reference (TOR) for all SRC and TRC meetings. For example, review committees are led and convened by the respective cluster coordinator. Composition is established by cluster members through an election process. Members of review committees are nominated/elected by active members of the relevant cluster. Cluster leads, and members of review committees are not permitted to represent or support the interests of the agency they are employed by. The process is compliant with CBPF global guidelines, ensuring inclusive reviews by peers at cluster level.

Follow-up Action

Ensure process compliance and support all committee members as needed.

PRINCIPLE 1

INCLUSIVENESS

3 Inclusive implementation

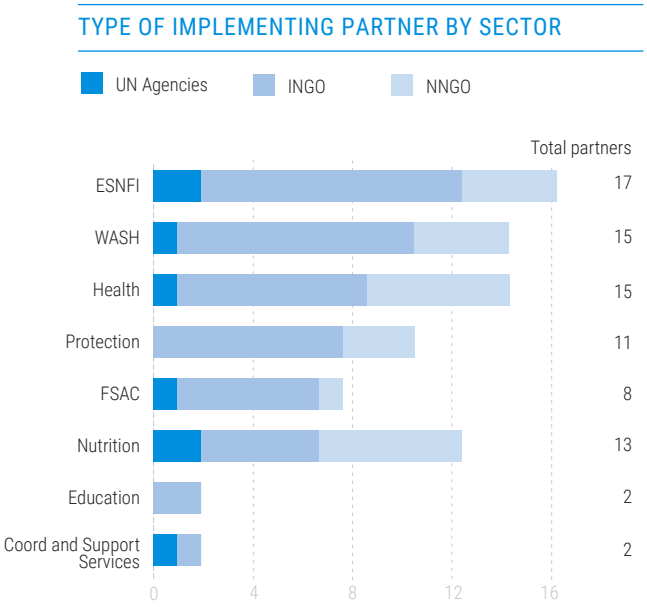
CBPF funding is allocated to the best-positioned actors, leveraging the diversity and comparative advantage of eligible organizations.

Target

Increased ability to include NGO partners and improve on 2017 partner eligibility share per type of organisation (35% UN, 47% INGO, 18% NNGO).

Results

2018 partner eligibility share per type of organization: 37% UN, 48% INGOs and 15% NNGOs.



Analysis

The AHF eligibility assessment process is compliant with CBPF global guidelines. The AHF completed all pending (submitted by prospective partners before June 2018) eligibility assessments by 31 December 2018. By then, 103 NGOs were eligible to receive AHF funding (INGO = 49, NNGO = 44) The fund developed respective training materials and provides direct support to all new applicants

Follow up actions

HFU to ensure that all new applications are completed in a timely manner. HFU to continue providing information and support sessions for prospective partners

4 Inclusive engagement

Resources invested by OCHA's Humanitarian Financing Unit (HFU) in supporting the capacity of local and national NGO partners are within the scope of CBPF strategic objectives, for example through trainings, workshops, communication material to national partners

Target

More national NGOs are eligible to apply for AHF funding. To increase their capacity to access and manage AHF grants, the fund provides e.g. GMS training and assistance before allocations, as well as actively supports capacity building initiatives for national partners e.g. by conducting debriefing after eligibility assessments

Results

The fund provided in-kind support to national partners:

a) GMS and Finance workshops for all partners in Kabul in December 2018, facilitated by HQ finance and GMS experts. During these workshops, 159 individuals (73 INGOs, 78 NNGOs and 8 UN) representing 74 organizations were trained in AHF procedures. Attendees received a training certificate provided feedback via a client satisfaction survey. Since then, the AHF is conducting satisfaction surveys after all trainings it provided

b) Monthly training and learning sessions at ACBAR (NGOs coordination body) since August 2018. Since then 280 individuals were trained in using the GMS and received training or information sessions on topics such as due diligence online application, proposal writing and budget development.

c) Weekly 'clinics' at the AHF office to address specific needs for training or information.

d) On-demand training for partners at their offices.

e) Developed training materials for new partners (guidance documents, PowerPoints and videos)

f) Developed a budgeting guideline for partners.

Analysis

The AHF increased its support, both for prospective and eligible partners. More NGO partners are now eligible to access AHF funding. Partners are better informed and trained in AHF processes.

Follow up actions

Continue current activities and further increase support to partners as needed. Use surveys and meetings with partners to establish needs and frequency of AHF training offers.

PRINCIPLE 2

FLEXIBILITY

The programmatic focus and funding priorities of CBPFs are set at the country level and may shift rapidly, especially in volatile humanitarian contexts. CBPFs are able to adapt rapidly to changing priorities and enable humanitarian partners to identify appropriate solutions to address humanitarian needs in the most effective way

5 Flexible assistance

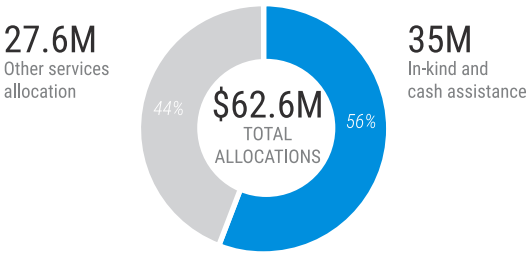
CBPF funding for in-kind and in-cash assistance is appropriate.

Target

Consider, prioritise and provide funding for in-kind and cash-based response whenever possible. Maintain 2017 levels (12% of allocated funds) and increase them, if possible.

Results

ALLOCATION THROUGH IN-KIND ASSISTANCE



Analysis

The AHF is 'cash-ready by design' and demonstrated its growing ability to support clusters and partners in implementing context-appropriate in-kind and cash-based assistance modalities. The AHF attended multiple trainings on cash-based assistance

Follow up actions

Support flexible assistance modalities, compliant with Grand Bargain (Work Stream 3) commitments.

6 Flexible operation

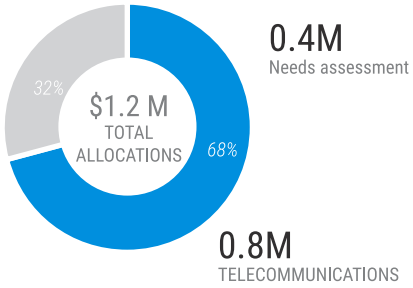
CBPF funding supports an enabling operational environment (common services).

Target

CBPF funding supports an enabling operational environment through funding allocated to common services funding allocated to common services.

Results

ALLOCATION THROUGH COMMON SERVICES



Analysis

Approximately 5% of AHF grants provided in 2018 improved and sustained common services of the humanitarian community in Afghanistan, for example::

a) Whole of Afghanistan multi-sector needs assessment.

b) Real-time and two-way flow of information between affected communities and the community of humanitarian organisations (Awaaz project).

Follow up actions

Support common services as required and in absence of other funding sources. Strict prioritisation of AHF grants on basis of the HRP and guidance provided by the Humanitarian Coordinator and AHF Advisory Board.

PRINCIPLE 2

FLEXIBILITY

7 Flexible allocation process

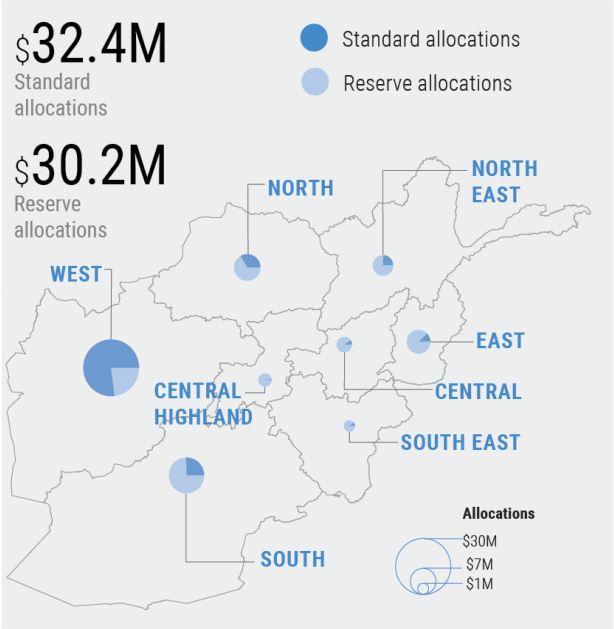
CBPF funding supports strategic planning and response to sudden onset emergencies and applies the most appropriate modality based on the objectives of each allocation to generate operational impact at the right time.

Target

The AHF applies the most appropriate allocation modality (Standard, Reserve), is strategic in terms of the use of its financial capacity, thereby able to respond to acute changes of the humanitarian context and humanitarian financing environment in Afghanistan.

Results

ALLOCATION TYPE BY REGION



Analysis

The AHF conducted two standard and six reserve allocations in 2018. It significantly reduced (by over 50%) the time required to allocated grants to its partners. It improved strategic planning, thereby utilization of AHF resources and increased the impact of its contribution to strictly prioritised humanitarian action in Afghanistan.

Follow up actions

AHF to ensure strategic use of its resources alongside CERF and other funding sources. Context appropriate use of allocation modalities as per CBPF global guidelines.

8 Flexible implementation

CBPF funding is successfully reprogrammed at the right time to address operational and contextual changes.

Target

Project revision requests are processes in full compliance with CBPF global guidelines and the AHF Operational Manual. Requests are processed within a period of 10 working days.

Results

The AHF processed 13 project revisions in 2018, each of them compliant with all respective guidelines. Average time of completion was 5 working days.

Analysis

The AHF enables its partners to respond to e.g. volatile security context by processing requests for re-programming of project activities. The AHF improved its workflows, communication and involvement of respective partners in the revision process. Permitting its implementing partners to adjust projects to the context, enables flexible humanitarian service provision to target beneficiaries. Any changes to projects continued to address the objectives of the respective grant agreement. Improved and more frequent interaction between implementing partners and the fund throughout the project cycle resulted in timely revision requests and closer coordination with the respective clusters.

Follow up actions

AHF to provide timely support and process guidance to partners requiring a project revision e.g. due to changes in context. It is important that all partners are fully aware of the respective steps needed to initiate and to complete revision requests compliant with respective guidelines. AHF to further improve its working relationship with partners throughout the project cycle in order to encourage early communication of issues, thereby increasing the fund's ability to support mitigation measures e.g. in collaboration with OCHA's access and security unit in Kabul, as well as OCHA sub-offices throughout Afghanistan.

PRINCIPLE 3

TIMELINESS

CBPFs allocate funds and save lives as humanitarian needs emerge or escalate.

9 Timely allocation

Allocation processes have an appropriate duration vis-à-vis the objectives of the allocation timeline.

Target

Improve allocations based on CBPF global guidelines and experiences made in other CBPFs (best-practice approach). Reduce time needed to complete allocation processes also by involving partners and stakeholders proactively in all respective aspects.

Results

Compared to 2017, the AHF significantly reduced the average number of calendar days required to complete both Standard and Reserve allocation processes. As per the AHF operational manual released in December 2018, Standard allocations are to be concluded within 4 weeks and Reserve allocations within 2 weeks. In 2018, Standard allocations took 26 workig days and Reserve allocations took 15 working days on average.

Analysis

The AHF improved its allocation processes in 2018 and was able to allocate grants in a timelier manner. Both standard and reserve allocation timelines are now more inclusive and actively involve all stakeholders and partners. The Standard allocation timeframe is not yet 'on-target' as prescribed by the new AHF operational manual. The AHF provided trainings to all partners before allocation processes, guided and supported partners throughout the proposal writing phase (including weekends and after business hours) and improved communication with partners resulting in fewer proposal revision steps.

Follow up actions

AHF to continue improving allocation process also through close collaboration and involvment of stakeholders and partners. Continue trainings and refresher sessions for all partners and provide additional guidance material as needed. Conduct surveys to further establish training and information needs of partners. Conduct standard allocation in under four weeks.

10 Timely disbursements

Payments are processed without delay

Target

10 working days from the date of OCHA Executive Officer approval of a grant agreement to first payment disbursed into the bank account of the partner. [1]

Results

Though the average time of disbursement was 7 working days, not all

Analysis

Most of the payments to the implementing partners were done within 7 working days. There were some individual cases that took 15 – 20 days e.g. because partners changed their banking details at the end of the allocation process. Grants to UN agencies are disbursed by UNDP/MPTF while grants to NGO partners are disbursed by OCHA (HQ New York). Disbursement times between MPTF and OCHA vary frequently, are conducted via different financial systems and OCHA disbursement processes require less administrative steps compared to MPTF. OCHA disbursement information is available in real-time in the GMS and GMS business intelligence platform while MPTF platforms (MPTF Gateway) reflect transaction data with delay. Some implementing partners noticed payments late (due to internal matters) and thereby delayed project implementation. Delays in disbursement, or noticing payments late, resulted in no-cost extension requests submitted by some partners. disbursements were made within the set timeframe.

Location: Herat province, Photo credit: OCHA

1 For UNDP managed Funds the average number of days will be considered from the Implementing Partner signature date.

PRINCIPLE 3

TIMELINESS

11 Timely contributions

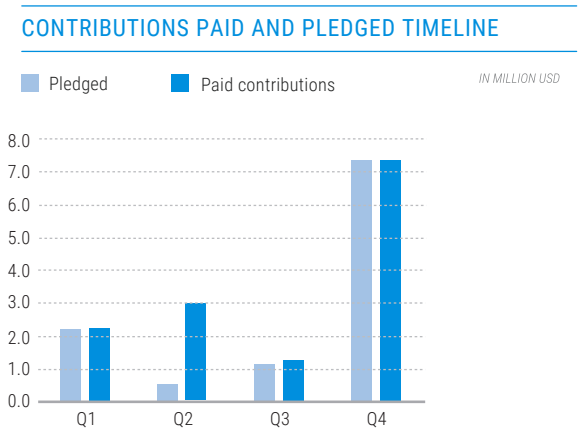
Pledging and payment of contributions to CBPFs are timely and predictable.

Target

70% of donor contributions received before the end of the first half of the year. Donors are confident that AHF operations are compliant with CBPF global guidelines, as well as global agreements and commitments made by OCHA.

Results

Less than 50% of donor contributions were made and received before the end of the first half of the year. The majority of contributions were received after June 2018.



Donor confidence in all technical and managerial aspects of the AHF is linked directly to their level of financial support. Fund performance at national level not only influences funding decisions in-country but may impact on global funding decisions too. As such, continuing and adequate performance of country-based pooled funds, such as the AHF, at country-level is of significant importance to the humanitarian response in Afghanistan, as well as continuing donor support to OCHA-managed CBPPs, globally. Understood as linked directly to their performance, CBPFs received the highest donor contributions in 2018 on record and received higher funding than other pooled-funding mechanisms including the CERF.

Location: Herat province, Photo credit: OCHA

PRINCIPLE 3

TIMELINESS

Analysis

Donors expressed at both local and global level that a comprehensive revision of AHF processes is required before further contributions would be made. The revision process started in June 2018 and was conducted in a collaborative fashion, including all partners and stakeholders.

It resulted in compliance of the AHF (previously known as 'CHF') with CBPF global guidelines, the creation of an entirely new AHF operational manual, revision of the AHF operational structure, and numerous SOPs and TORs all designed to improve the funds' performance. In response and while included in the revision process, current donors continued, previous donors re-joined, and new donors provided contributions to the AHF. By the end of 2018, the AHF received the third highest level of donor contributions since its launch in 2014. It would have been the second highest result, but some 2018 donor contributions were received only in early 2019, thus need to be attributed accordingly.

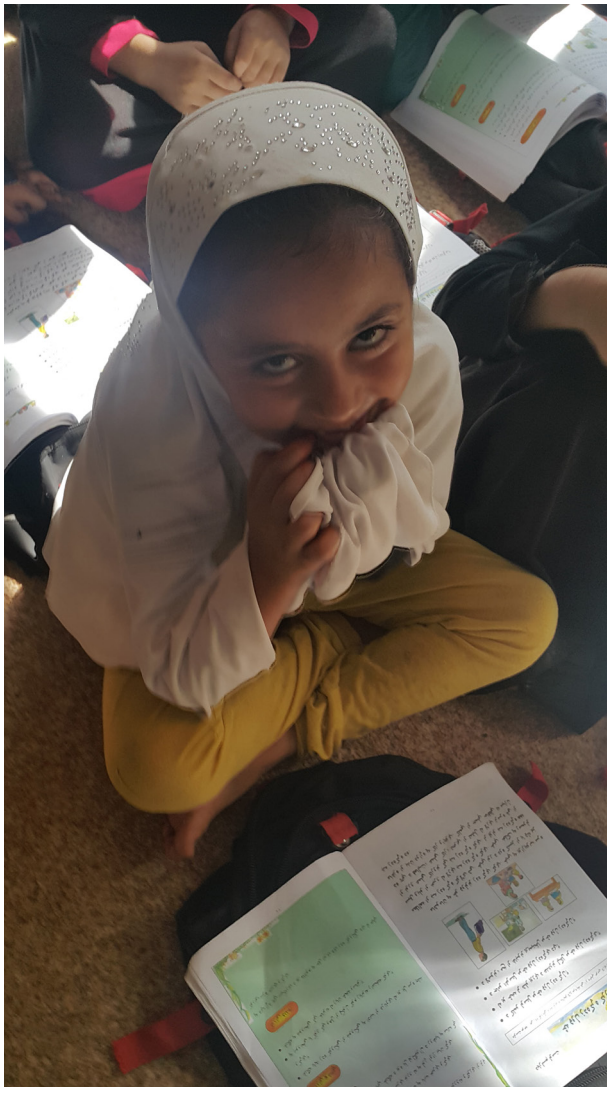
AHF governance, management and technical processes and structures are now nearly fully compliant with CBPF global guidelines and seek to improve further by learning also from best-practice approaches and experiences made in other CBPFs. They are aiming to foster strong partnerships, include stakeholders to the maximum extent possible, and are designed to enable collaborative, transparent and supportive working relationships with stakeholders and partners at all levels of interaction.

The nearly complete revision of nearly all AHF processes within a period of 6 months would not have been possible without pro-active support by stakeholders and partners at both country and global level. The AHF management and team would like to take this opportunity to again express its sincere gratitude for the support it received by all partners and stakeholders throughout the revision process.

Follow up actions

Though progress has been made over the past 6 months, not all AHF processes are fully aligned with CBPF global guideline. These include the format of allocation strategy papers, the fund's monitoring and reporting capacity, and linked to it, its ability to detect, prevent and mitigate risks during project implementation.

Guided by the Humanitarian Coordinator supported by the AHF Advisory Board, OCHA and the AHF management prioritised and committed to improve on these and any remaining aspects in 2019. Further improvements must be done in close collaboration and transparent communication with all stakeholders and partners. The AHF volunteered to be assessed as part of the global evaluation of CBPFs, the first evaluation since standardization of CBPFs in 2015. It is an independent assessment of how CBPFs performed since then. The AHF will continue to share findings of evaluations and assessments with its stakeholders



Location: Nagarhar province, Photo credit: OCHA

PRINCIPLE 4

EFFICIENCY

Management of all processes related to CBPFs enables timely and strategic responses to identified humanitarian needs. CBPFs seek to employ effective disbursement mechanisms, minimizing transaction costs while operating in a transparent and accountable manner.

12 Efficient scale

CBPFs have a critical mass to support the delivery of the HRPs.

Target

15% of HRP funding requirements.

Results

The AHF funding contributed 7.66 per cent to the 2018 HRP (US$599M) and fell short its annual fundraising target of 15 per cent. It achieved the third-highest level of CBPF contribution to the HRP, following Iraq (10%) and Myanmar (7.8%).

Analysis

As requested by the Secretary-General of the United Nations and based on high-level discussions during the Grand Bargain and World Humanitarian Summit, Donors are requested to channel their financial contributions through CBPFs, equating to 15 per cent of the total funding need per HRP.

Unfortunately, CBPFs rarely achieve their globally set fundraising target. This impacts on their ability to develop a realistic, as well as compliant, yearly fundraising target.

Follow up actions

AHF to further improve its operations, thereby removing obstacles and reasons for Donors not to provide increased contributions to the fund.

Advocate for increased contributions as requested by the Secretary General of the United Nations.

Collaborate closely with all donors at country-level to harmonize humanitarian financing and to avoid duplication. Provide funding information in real-time also via the AHF website. Close collaboration with clusters and OCHA coordination, informing donors on both humanitarian context and financing developments.

13 Efficient prioritization

CBPF funding is prioritized in alignment with the HRP.

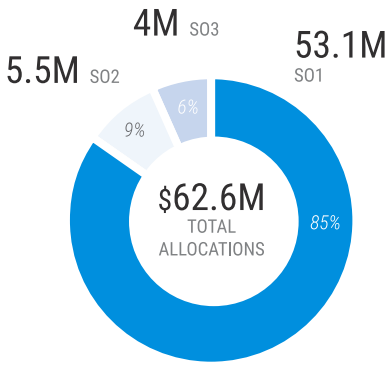
Target

All funded projects address HRP strategic objectives and priorities.

Results

All AHF projects addressed HRP objectives and ICCT/HCT approved cluster strategies.

ALLOCATION BY HRP STRATEGIC OBJECTIVES



S01 Lives are saved in the areas of highest need.
S02 Protection violations are reduced and respect for international Humanitarian Law (IHL) is increased.
S03 People affected by sudden- and slow-onset crises are provided with a timely response.

Analysis

The AHF complies with CBPF global guidelines and best-practice approaches, enabling strictly prioritised humanitarian action in Afghanistan.

Follow up actions

AHF to continue and further improve its current processes, incorporating all partners into strategy development and peer-review mechanisms of proposals at cluster level.

PRINCIPLE 4

EFFICIENCY

14 Efficient coverage

CBPF funding reaches people in need.

Target

AHF has a diverse (multi-cluster) group of implementing partners in all priority geographic areas of the humanitarian response in Afghanistan. Partners are able to reach and support all target beneficiaries as per their respective AHF grant agreements.

Results

Most of targeted beneficiaries have been reached by AHF partners. All targeted beneficiaries' group reached except men.

PEOPLE TARGETED AND REACHED BY GENDER AND AGE

Analysis

AHF partners were able to reach total targeted beneficiaries by 100%. Calculation of beneficiary data: All data has been normalized and double counting removed.

Follow up actions

AHF to continue and further improve its current processes, incorporating all partners into strategy development and peer-review mechanisms of proposals at cluster level.

15 Efficient management

CBPF management is cost-efficient and context-appropriate.

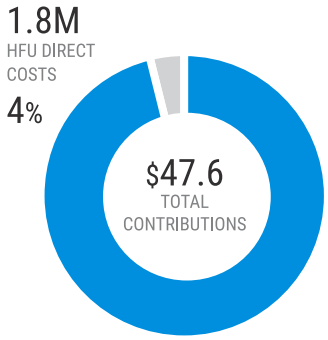
Target

Annual AHF operating cost is less than 5 per cent of annual donor contributions to the fund. AHF staffing layout is compliant with CBPF guidelines and flexibly adjusted. Appropriate balance of national and international staff positions. AHF staffing reflects OCHAs strategy on gender and geographic representation of international staff.

Results

HFU operation cost was 4 per cent of annual donor contributions to the fund.

CONTRIBUTIONS AGAINST TOTAL HFU EXPENDITURE



Staffing layout and level are not yet fully compliant with CBPF guidelines

Analysis

The AHF revised its staffing level and layout by the end of 2018. The approved direct-cost plan enables the AHF to be compliant in terms of its staffing level, prioritising national staff positions over international whenever feasible. At the start of 2019, the AHF is recruiting 7 national and 1 international staff. The fund's management committed to conducting recruitment in support of OCHAs strategy on gender and geographic representation of international staff

Follow up actions

AHF to complete its 2019 recruitment processes as soon as possible. Adjust staffing as needed e.g. in case there is a change in humanitarian context or donor support.

PRINCIPLE 4

EFFICIENCY

16 Efficient management Compliance with guidelines

CBPF management is compliant with management and operational standards required by the CBPF Global Guidelines.

Target

The AHF has an up-to-date and compliant fund operational manual and respective frameworks in place. They include for example the Common Performance and Risk Management Framework. The AHF Annual Report is compliant with OCHA global guidance and reporting templates applicable for all CBPFs.

Results

The AHF has yet to release a country-level common performance framework.The fund allocation strategy paper format is not fully compliant with the template prescribed by the CBPF global guideline.The AHF is using the format and template prescribed for all CBPF annual reports.

Analysis

The AHF revised and newly developed most of its procedures and protocols in the second half of 2018. Though most of these activities were completed by end of 2018 and early 2019 respectively, there are still important tasks remaining, such as finalising the common performance framework. The AHF conducted more Advisory Board meetings than in previous years and informed AB members regarding the progress it is making in revising the fund.

Follow up actions

It is of utmost importance that the AHF achieves 100 per cent compliance with the CBPF global guidelines and as soon as possible. AHF management and leadership to be fully transparent about all aspects that still require revision and improvement in order to achieve full compliance.

It is important that the fund aims to exceed minimum compliance e.g. by using OCHA corporate as well as AHF staff capacity in developing context-appropriate approaches and solutions to future-proof the fund.

PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

CBPFs manage risk and effectively monitor partner capacity and performance. CBPFs utilize a full range of accountability tools and measures.

17 Accountability to affected people

CBPF funded projects have a clear strategy to promote the participation of affected people.

Target

The AHF and its implementing partners achieve AAP and PSEA objectives as per respective policies and guidelines. The fund itself and AHF-funded projects are managed responsibly in compliance with respective policies and guidelines. AHF partners are required to include AAP an PSEA strategies in their project proposals. Proposals are peer-reviewed, also by including experts in AAP and PSEA. Partners are required to ensure community participation throughout the project life-cycle and to establish project-appropriate feedback and complaint mechanisms.

Results

Partners are legally required (grant agreements) to report any and all cases of SEA. All (84) projects approved in 2018 include activities that promote AAP and mechanisms to receive beneficiary feedback and to enhance community participation.

Analysis

The AHF monitoring and reporting format analyses respective achievements and shortcomings. While respective AHF processes are compliant with CBPF guidelines the fund must make continuous and additional efforts in both areas, ensuring that all AHF-funded projects provide a maximum level of AAP and PSEA. AHF partners are ultimately responsible for project level activities, project outputs and for reporting accurately on results, as well as incidents.

Follow up actions

Ensuring AAP and PSEA in all its funded projects must be of continuing and significant importance to the AHF. Follow respective guidelines and policies, conduct frequent information sessions for partners and incorporate expert guidance in all relevant areas of fund operations.

PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

CBPFs manage risk and effectively monitor partner capacity and performance. CBPFs utilize a full range of accountability tools and measures.

18 Accountability and risk management for projects

CBPF funding is appropriately monitored, reported and audited.

Target

All AHF-funded projects are monitored timely by using the most appropriate and context-sensitive modalities.

Results

The AHF monitored 65 projects 2018. 18 of these projects started in 2017 and 47 projects started in 2018. 59 per cent of projects were monitored as required. The fund conducted 14 out of 15 required financial spot checks in 2018. None of the 110 required external audits of AHF-funded projects took place in 2018

Analysis

The AHF needs to improve its monitoring capacity in 2019 as a matter of urgency AHF monitoring capacity in 2018 relied on one international staff, two remote-call operators, one national finance officer, infrequent and limited support provided by other AHF, as well as OCHA sub-office staff. Reliance on partner reporting, direct field visits and remote-calls with beneficiaries were the primary methods of AHF monitoring. AHF staff required first-time and re-training in CBPF monitoring modalities and operations.

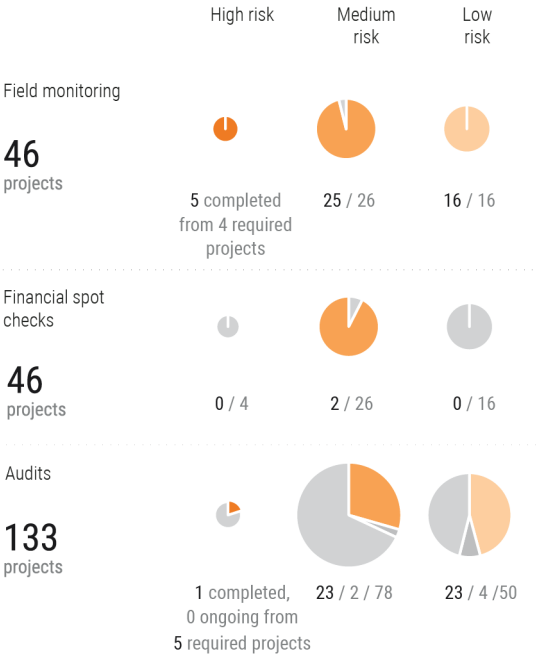
Delays in implementing a global LTA for auditing providers resulted in all pending audits needing to be conducted in 2019. Appropriate and timely monitoring of AHF-funded projects is a prerequisite enabling risk management including detection of fraud, corruption and diversion. The funds risk management capacity depends largely on and is linked proportionally to its actual monitoring capacity. The fund under-budgeted audit costs for 2018 projects and needs to address this through a reallocation (planned 3rd Reserve Allocation 2019) of AHF funds. The AHF attempted to improve its monitoring capacity throughout the second half of 2018, but due to internal circumstances was only able to make substantial progress by December 2018. The fund fully revised its monitoring operations, budgeted accordingly, and now needs to implement change as a matter of urgency.

Note: All active narrative and financial reports have been reviewed and approved in January 2019. The AHF call centre was discontinued in February 2019, its activities have been revised and will be outsourced to UNOPS (Awaaz call centre in Kabul) as of April 2019. The external audit contract was finalised in February 2019 and all pending 2017/2018 independent financial audits of projects are to be completed throughout 2019.

Follow up actions

The AHF is implementing all available monitoring modalities as per the CBPF monitoring toolkit (version 2018), planning to become the first CBPF that is using all modalities. Monitoring of the remaining 2018 projects (37) is to be concluded in 2019. Implementation of third-party monitoring is planned to start in April 2019. Urgent recruitment of six AHF monitoring staff based permanently in OCHA sub-offices. Release of an AHF Monitoring Guideline (incl. SOPs and TORs) for staff and partners by May 2019. Conduct (re-)training of AHF staff and frequent information sessions on the new guideline for all partners. Keep stakeholders informed and provide frequent progress updates to the Humanitarian Coordinator and AHF Advisory Board. Continue close collaboration with OCHAs Oversight, Compliance & Fraud Management Unit.

PROGRESS ON RISK MANAGEMENT ACTIVITIES



PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

19 Accountability and risk management of implementing partners

CBPF funding is allocated to partners with demonstrated capacity.

Target

All AHF processes and funding decisions consider and address risks as outlined in the AHF risk management framework. The AHF risk management framework is up-to-date and revised at least annually. Partner risk levels inform funding AHF decisions. Partner risk levels are revised on basis by the partner performance index (PI). Full compliance with AHF operational modalities (see AHF operational manual). Increase the number of national partners while addressing the aspect e.g. in funding decisions that national partners (upon entry) are often rated as high-risk partners.

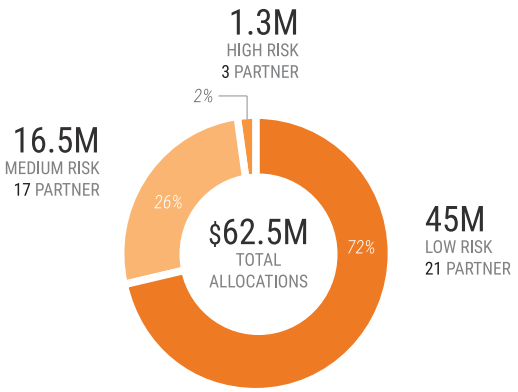
Results

The AHF fully revised its risk management framework in the second half of 2018. It forms part of the new AHF operational manual, replacing the previous version of 2015. Partner risk levels informed the proposal development and funding decisions. The AHF revises partner risk levels based on the PI as required. The AHF revised its operational modality and all grants provided to partners in 2018 do not exceed the maximum limit. The AHF conducted six (6) Reserve allocations in 2018 and frequently prioritised, in direct consultation with clusters and members, implementing partners with the highest capacity to implement AHF-funded projects in emergency situations.

Analysis

The AHF fully revised all respective guidelines, frameworks and modalities in the second half of 2018. The fund is compliant with set rules but needs to improve its risk management capacity in 2019 and as a matter of urgency (see previous analysis of AHF monitoring capacity in 2018). The total number of eligible partners increased from 67 in 2017 to 103 by the end of 2018. The new partners are predominately national NGOs with a high-risk rating. Forty-one (41) partners (7 UN, 22 INGO and 12 NNGO) received AHF funding in 2018. Grants by partner type: UN: US$22.97M (36.71%), INGO: US$30.17M (48.21%) and NNGO: US$9.44M (15.08%). The AHF actively supports 'localisation', Grand Bargain and World Humanitarian Summit commitments aimed at including national partners into the humanitarian response in Afghanistan. It therefore supports the DFID-funded 'Twinning Project' managed by ACBAR. National, often more so than international, partners are able to operate in remote (hard-to-reach) geographic locations and regions controlled by non-state actors and armed opposition groups. Supporting these partners e.g. in building their capacity to implement AHF-funded projects in full compliance with all respective guidelines and policies is of continuing importance to the AHF. AHF funding decisions must consider a diverse set of risks and strike a careful balance between investing (directly or indirectly) in partner capacity building, vis-à-vis selecting the most capable low-risk partner available at the time. Increasing access of AHF partners to hard-to-reach areas, be it national or international partners, should be considered preferentially but funding decisions must be supported by highly robust and context-appropriate risk prevention and mitigation strategies. Previous and present capacity building support provided to AHF partners resulted in an increasing number of national and international partners rated medium to low-riskcompliance with all respective guidelines and policies is of continuing importance to the AHF. AHF funding decisions must consider a diverse set of risks and strike a careful balance between investing (directly or indirectly) in partner capacity building, vis-à-vis selecting the most capable low-risk partner available at the time. Increasing access of AHF partners to hard-to-reach areas, be it national or international partners, should be considered preferentially but funding decisions must be supported by highly robust and context-appropriate risk prevention and mitigation strategies. Previous and present capacity building support provided to AHF partners resulted in an increasing number of national and international partners rated medium to low-risk.

IMPLEMENTATION BY PARTNER RISK LEVEL TYPE



Follow up actions

The AHF needs to communicate more comprehensively its approach to 'localisation' and pursuit of Grand Bargain and World Humanitarian Summit commitments. In doing so, the AHF can (continue to) benefit also from OCHA corporate and respective experiences made by other CBPFs that operate in similar contexts.

20 Accountability and risk management of funding

Appropriate oversight and assurances of funding channeled through CBPFs.

Target

The AHF risk management and accountability framework is up-to-date, revised as need and fit for purpose. Fraud, corruption and diversion cases are processed in compliance with CBPF global guidelines and procedures prescribed by the newly revised AHF operational manual. Staff and partners are trained in CBPF risk management protocols and informed about AHF procedures.The AHF informs the Humanitarian Coordinator, the AHF Advisory Board, the UN Country Team based on agreed principles for information sharing of formal (forensic) investigations and cases of potential fraud involving implementing partners. The AHF provides updates on the new and ongoing cases of concerns to the Advisory Board members as part of regular AB meetings, at least four times per calendar year. The fund is committed to continuous learning and improving its risk management modalities.

Results

All potential and established cases of fraud, corruption or diversion were processed in compliance with CBPF global guidelines, respective SOPs and the AHF operational manual. The AHF developed a risk (case) register in the second half of 2018. The register and all cases are managed by the Head of Unit who maintains frequent contact with OCHAs Oversight, Compliance & Fraud Management Unit. Based on HQ guidance, the AHF developed principles for information sharing of formal (forensic) investigations and cases of potential fraud involving implementing partners. As part of a mission conducted by OCHAs Oversight, Compliance & Fraud Management Unit in early 2019, all AHF staff have been (re-)trained in CBPF risk management protocols. OCHAs Oversight, Compliance & Fraud Management Unit and the AHF provided trainings for partners in Kabul.

Analysis

OCHA, the Humanitarian Coordinator and the AHF Advisory Board have a duty of care to protect funds provided to the AHF and to ensure that they are used only for the purpose intended. The AHF is committed to working with all stakeholders and to address any and all concerns regarding fraud, corruption, diversion or misappropriation of AHF funds. None of the cases detected and reported to the AHF, be it individually or combined, posed a significant risk to the fund and its donors. The fund improved its relationship with partners, encouraging self-reporting of suspected fraud, corruption and diversion cases. As stated in previous sections of this report, the ability of the AHF to detect fraud, corruption and diversion cases depends also on its capacity to monitor projects of implementing partners. The AHF commits to training new staff and partners and to refresh their knowledge at least annually.

Location: Badghis province, Photo credit: WVI

AHF 2018 ANNUAL REPORT

ACHIEVEMENTS BY CLUSTER

This section of the Annual Report provides a brief overview of the AHF allocations per cluster, targets and reported results, as well as lessons learned from 2018.

The cluster level reports highlight indicator achievements against planned targets based on narrative reports submitted by partners within the reporting period, 1 January to 31 December 2018. The achievements indicated include reported achievements against targets from projects funded in 2016 (when applicable), 2017 and/or 2018, but whose reports were submitted in 2018. The bulk of the projects funded in 2018 are still under implementation and the respective achievements against targets will be reported in the subsequent AHF reports. Text and analysis provided by the respective cluster

ACHIEVEMENTS BY CLUSTER

COMMON SERVICES

CLUSTER OBJECTIVES

Objective 1: Facilitate and enhance strategic and operational decision-making and coordination modalities at all levels, streamline assessments and consolidate analysis of humanitarian needs, gaps and response, mobilize sufficient, timely and coordinated humanitarian funding, advocate for principled response and solutions to crises, and promote accountability towards affected populations

Objective 2: Promote principled, coordinated and standardized approaches to information management across clusters and sectors for diverse recipient groups, including maintaining common data and information repositories, to ensure credible, comprehensive, and evidence based situational overview and analysis.

LEAD ORGANIZATIONS OCHA

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS	TARGETED PEOPLE[1]	WOMEN	MEN
$1,236,704	2	2	20,590	4,577	15,853
				GIRLS	BOYS

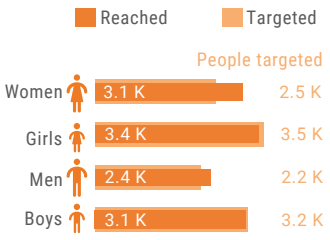
In 2018, AHF supported two projects implemented by two AHF partners to achieve the aforementioned cluster objectives. The AHF funded Whole of Afghanistan Assessment (WoAA) which aimed to increase humanitarian organizations' understanding of the multi-sector needs and vulnerabilities of different population and groups across Afghanistan. The projects are providing multi-sector baseline information for the 2019 HNO and for any subsequent adjustments in programming required to the current Humanitarian Response Plan (HRP) (2018-2021). WoAA Multi-Sector Needs Assessment (MSNA) has been carried out in close coordination with all Clusters and in line with AHF priorities to provide comprehensive and quantifiable data of all relevant groups and populations in the country. The assessment has covered accessible districts and provide indicative information for Hard to Reach (H2R) districts throughout Afghanistan. The second project VoX-Afghanistan (VoX-AF) uniquely facilitates real-time two-way flow of information between people affected by conflict, violence, natural disaster and displacement, and the entire humanitarian community. At full capacity, VoX-AF can communicate directly with 4,000 people per month, or indirectly with 24,000 Afghans per month (based on an average family size of seven). Functioning as a cross-network, toll-free call centre, VoX-AF facilitates the two-way communication between affected populations and the humanitarian community at a localised and country-wide level. By dialling 410, any person with access to a mobile phone can speak to operators in either Dari, Pashto, or English, to access information on or lodge feedback about the ongoing huma34nitarian interventions around the country.

Results reported in 2018

ALLOCATIONS	PROJECTS	PARTNERS
2017 $0.7M	3	3

PEOPLE TARGETED 11,454

PEOPLE REACHED 12,142



OUTPUT INDICATORS	TARGETED	ACHIEVED	%
Number of IDPs assessed for ESNFI needs	4586	4616	100.6
Number of sector-specific and intersectoral needs assessments complete	5	5	100

ACHIEVEMENTS BY CLUSTER

EDUCATION

CLUSTER OBJECTIVES

Objective 1: Ensure emergencies and crisis-affected children and youth have access to safe and protective learning environment.
Objective 2: Ensure vulnerable children and youth are enganged in life-saving learning that promotes personal well-being adn social cohession
Objective 3: Strengthened capacity to deliver effective adn coordinated education system

LEAD ORGANIZATIONS UNICEF, Save the Children

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS	TARGETED PEOPLE[1]	WOMEN	MEN
$1,779,121	2	2	30,000	1,000	1,000
				GIRLS 14,300	BOYS 13,700

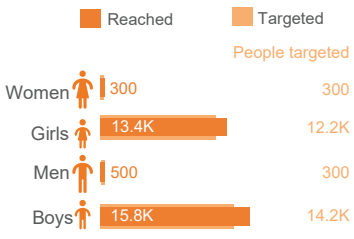
Active conflict and drought have displaced children, affecting their access to a quality education and making them vulnerable to protection risks. The role of the EiEWG is to provide access to quality education for these crisis-affected children. According to the cluster report, during 2018, 103,902 school aged children (54,479 girls and 49,423 boys) were reached, and 246,000 (124,600 girls, 121,400 boys) children and youth across the country in the EiE sector and were engaged in learning that promoted their personal wellbeing and social cohesion. AHF contributed US$2 million to the Afghanistan Education in Emergency Working Group to support children education in 4 provinces. In addition to providing the education services to the affected children, the EiEWG supported coordination by creating standardized tools, operations and documents such as EiE monitoring tool, teacher training manual, comprehensive school safety framework and EiE kits with the support of its implementing partners through different task-forces and technical working groups.

Results reported in 2018

ALLOCATIONS	PROJECTS	PARTNERS
2017 $3.2M	6	5

PEOPLE TARGETED 27,000

PEOPLE REACHED 30,000



OUTPUT INDICATORS	TARGETED	ACHIEVED	%
# Number of children (b/g) receiving school supplies	21050	21690	103
Number of new teachers (f/m) recruited & trained	505	510	101

OUTPUT INDICATORS	TARGETED	ACHIEVED	%
Number of new TLS established	2,015	2,060	100
Number of School Management Shura's trained in social mobilization activities	216	216	100

1 Results are based on 2018 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

FOOD SECURITY & AGRICULTURE

CLUSTER OBJECTIVES

Objective 1: Number of drought affected people receiving agriculture and livestock assistance
Objective 2: Number of drought affected population (men, women and children of all ages) received timely and adequate food/cash assistance
Objective 3: IDP, returnee, refugee and non-displaced conflict affected women, men, and children of all ages with a minimum household food consumption score above 42.5

LEAD ORGANIZATIONS FAO, World Vision International

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS
$7,440,000	9	8

TARGETED PEOPLE[1]	WOMEN	MEN
345,519	85,994	79,260
	GIRLS	BOYS
	91,870	88,395

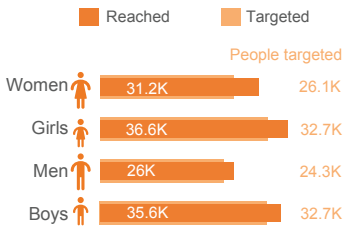
FSAC partners remain considerably successful in responding to the urgent needs of affected communities caused by drought, conflict and cross border movement. Total 3.9 million people (71%) received assistance against a total target of 5.5 million people. Lifesaving food assistance was provided to 3.4 million people whereas livelihoods protection assistance was delivered to 493,640 people. The AHF 2018 allocations contributed 7.44 million USD to the FSAC cluster which represents 3.9% of the total fund received by FSAC partners. AHF funds were disbursed to 8 partners through 9 FSAC projects, addressing food security needs of drought and conflict affected people. The overall targeted beneficiaries (0.35 million) represent 8.9% of the total people received assistance by the FSAC cluster

Results reported in 2018

	ALLOCATIONS	PROJECTS	PARTNERS
2016	$0.4M	2	2
2017	$3.1M	9	9

PEOPLE TARGETED 116,004

PEOPLE REACHED 129,880



OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of IDP, returnee, refugee and non-displaced conflict-affected women, men and children of all ages who receive timely and adequate food assistance	*Women*	16459	18445	112
	Girls	23879	26760	112
	Men	13951	15634	112
	Boys	24115	27025	112

OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Drought affected people received food assistance (in kind and cash)	*Women*	16459	18445	112
	Girls	23879	26760	112
	Men	13951	15634	112
	Boys	24115	27025	112
Number of farmers receiving livestock protection assistance	*Women*	6950	7100	100
	Girls	0	0	
	Men	6250	6200	100
	Boys	0	0	

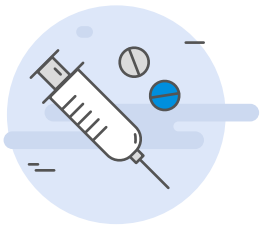
Food for drought-affected families in Badghis

Location: Badghis province , Afghanistan
Credit: World Vision International

Mohammad Aman, 50, who is originally from Qarqaito village, Badghis province, had to flee with his family of six to southwest of Qala-e-Naw to find for a way to feed his children. He used to work as a wheat farmer for a landowner in his village, but the recent drought destroyed all the livestock and crops. The landowner could not even feed his own children, not to mention to pay off Mohammad Aman's salary.Mohammad Aman decided to leave his village and come to Qale-e-Naw city to look for a job and earn a salary. In addition to being destitute, he is suffering from a physical disability on one leg which makes him unfit for difficult manual labour.Mohammad Aman who doesn't have an older son or any other relatives to help him financially, was appealing for his neighbour's goodness through Zakat, the Islamic alms-giving treated as a religious obligation or tax. "My entire family's eyes are looking at my empty pockets to provide them with a loaf of bread to eat to fulfil their hunger." Mohammad Aman Says. "It is very difficult for a father to see his own children hungry. Coming to the Centre, if people didn't help me, my children wouldn't survive."Considering his situation and his disability, World Vision Afghanistan (WVA), through the AHF funding, enrolled him in a Food Emergency Project. "WVA selected me and donated me Wheat Flour, Rice, Oil, Sugar, Pulses, and Salt. The food, I am receiving is helping my family to sleep with a fully belly at night. Now that I've food at home for my children to eat, I can relax and sleep well for some nights, says Mohammad Aman". Mohammad Aman wishes to send his children to school to have a better future, He also calls on all humanitarian organizations to help the people of Badghis, considering them one of the most affected communities by famine and drought. "I'm very thankful for the assistance I got through the WV's food emergency project. I'm hoping for the repetition of such live saving interventions, so that my family will have 2-3 months of relief and normal life in Qala-e-Naw center". The Badghis Emergency project funded by the Afghanistan Humanitarian Funding with the amount of US $987,500 reached 1,882 highly vulnerable households in 4 districts of Badghis Province, thus providing life-saving relief to those families for 2 to 3 months. Moving forward, however, it remains uncertain how Mohammad Aman's family will be able to meet their basic needs, if he does not find a sustainable income-generating activity.

ACHIEVEMENTS BY CLUSTER

HEALTH



CLUSTER OBJECTIVES

Objective 1: Ensure access to essential life-saving and emergency primary health care
Objective 2: Ensure access to emergency trauma care, rehabilitation and psychosocial support for affected people
Objective 3: Provide immediate response to those affected by public health outbreaks disasters, procure and distribute essential medicine abd supplies to respond to health emergencies
Objective 4: Strengthen capacity in emergency response preparedness and advocacy regarding violations of International Humanitarian Law

LEAD ORGANIZATIONS WHO, Ministry of Public Health

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS	TARGETED PEOPLE[1]	WOMEN	MEN
$7,489,865	21	15	1,198,148	368,730	345,819
				GIRLS 229,698	BOYS 253,901

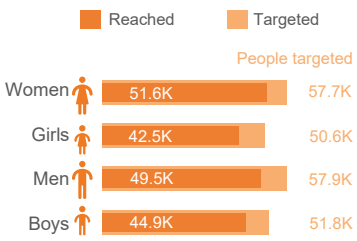
In 2018, AHF supported the implementation of 21 projects toward the aforementioned cluster objectives. The funds were utilized to improve essential life-saving trauma care in health facilities through the establishment of First Aid Trauma Posts (FATPS), secondary and tertiary care trauma care, and the provision of rehabilitation care and psychological first aid to affected population. In addition, the fund supported the provision of life saving primary health care services to drought-affected people both at displacement sites and at the areas of origin. The AHF also supported procurement of emergency supplies, disease surveillance and response as well as capacity building as part of the Cluster preparedness plan. Impact in the health sector from the AHF allocation includes significant reduction in mortality and morbidity of population affected by conflict and natural disasters. Through the AHF, projects are implemented in an integrated approach through complementarity with other clusters in order to achieve maximum efficiency and sustainable impact for the most vulnerable population.

Results reported in 2018

ALLOCATIONS		PROJECTS	PARTNERS
2015	$0.3M	1	1
2016	$6.6M	5	4
2017	$7.9M	14	12

PEOPLE TARGETED 2,181,517

PEOPLE REACHED 1,887,201



OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of individuals receiving trauma care services	*Women*	14,946	30,023	201
	Girls	24,990	17,735	71
	Men	34,049	49,279	145
	Boys	13,198	25,389	192
Number of conflict affected people in white areas served by emergency PHC/mobile services	*Women*	165,312	189,880	115
	Girls	105,697	95,566	90
	Men	138,002	123,596	90
	Boys	125,540	96,359	77
Number of IDPs in HTR areas receiving emergency health services from Mobile Health Teams	*Women*	78,020	101,961	131
	Girls	54,248	42,218	78
	Men	70,779	61,915	87
	Boys	57,788	42,366	73

OUTPUT INDICATORS	TARGETED	ACHIEVED	%
Number of individuals receiving trauma care services	87,183	122,426	140
Number of conflict affected people in white areas served by emergency PHC/mobile services	534,551	505,401	95
Number of IDPs in HTR areas receiving emergency health services from Mobile Health Teams	260,835	248,461	95

1 Results are based on 2018 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

NUTRITION

CLUSTER OBJECTIVES

Objective 1: Improving equitable access to quality lifesaving curative nutrition services through systematic identification, referral and treatment of acutely malnourished cases

Objective 2: Deliver timely lifesaving nutrition services for vulnerable population groups affected by new crisis focusing on appropriate infant and young child feeding practices in emergency, micronutrient interventions, nutritional supplementation and optimal maternal nutrition

Objective 3: StStrengthen system, capacity, partnership and coordination for robust evidence based decision making for timely emergency nutrition response

LEAD ORGANIZATIONS UNICEF, Ministry of Public Health

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS
$12,496,484	20	13

TARGETED PEOPLE[1]	WOMEN	MEN	GIRLS	BOYS
570,415	149,912	66,831	181,406	172,266

AHF grants accounted for 21 per cent of the total funding requirement (HRP, US$62.3M) of the Nutrition cluster in 2018, and 39 per cent of total funding received (US$34.4M) in support of HRP objectives. 13 nutrition cluster partners implemented 20 projects and provided emergency nutrition services in prioritised geographic locations throughout Afghanistan. Key activities included for example treatment of severe acute and moderate acute malnutrition, procurement and delivery of essential nutrition supplies, mobile nutrition teams, infant and young child feeding practices (IYCF), as well as services for pregnant and lactating women (PLW).

AHF funds were used to support coordinated multi-sectoral approaches (water, sanitation, hygiene, protection) with strong community engagement components. Such projects established for example health centres, enabling primary healthcare services, including childcare and immunization

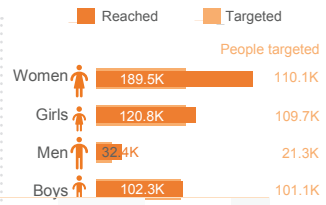
Results reported in 2018

ALLOCATIONS		PROJECTS	PARTNERS
2016	$4M	3	3
2017	$9.7M	11	10

OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of boys and girls 6-59 months with SAM enrolled in therapeutic feeding program	*Women*	-	-	-
	Girls	10,821	7,449	78
	Men	-	-	-
	Boys	9,988	7,449	75
Number of boys and girls 6-59 months with MAM enrolled in therapeutic feeding program	*Women*	-	-	-
	Girls	47,505	55,673	117
	Men	-	-	-
	Boys	47,250	45,453	96
Number of PLW with acute malnutrition enrolled in Targeted Supplementary Feeding Program (TSFP)	*Women*	63,729	95,376	150
	Girls	-	-	-
	Men	-	-	-
	Boys	-	-	-
Number and proportion of boys and girls aged 6-23 months at risk of acute malnutrition among new crisis affected populations who received BSFP	*Women*	4,800	8,944	186
	Girls	4,800	5,624	117
	Men	-	-	-
	Boys	4,800	5,624	117

PEOPLE TARGETED 342,625

PEOPLE REACHED 445,064



OUTPUT INDICATORS	TARGETED	ACHIEVED	%
Number of boys and girls 6-59 months with SAM enrolled in therapeutic feeding program	20,809	15,873	76
Number of boys and girls 6-59 months with MAM enrolled in therapeutic feeding program	94,755	101,126	107
Number of PLW with acute malnutrition enrolled in Targeted Supplementary Feeding Program (TSFP)	63,729	95,376	150
Number and proportion of boys and girls aged 6-23 months at risk of acute malnutrition among new crisis affected populations who received BSFP	14,400	20,192	140

1 Results are based on 2018 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

PROTECTION

CLUSTER OBJECTIVES

Objective 1: Displaced children are protected from negative coping mechanism
Objective 2: At risk IDP, returnee and non-displaced conflict-affected women - including separated and unaccompanied IDP and returnee children - live in a safe environment.
Objective 3: Reduce protection violations and increase respect for international humanitarian law

LEAD ORGANIZATIONS IRC, APA, Save the Children

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS	TARGETED PEOPLE[1]	WOMEN	MEN
$3,470,000	15	11	169,665	46,638	40,567
				GIRLS 40,821	BOYS 41,639

With AHF support, the Gender-based Violence sub-Cluster (GBVSC) of the Afghanistan Protection Cluster conducted GBV outreach and community-based services. GBVSC members reached areas that were previously not covered by multi-sectoral and survivor-centred services in prioritised districts of Badghis, Ghor, Helmand, Balkh, Faryab and Herat. AHF allocations empowered local organizations to lead GBV services. Partners reached 13,060 girls, women, boys and men, resulting in a 121% achievement rate against the HRP target (HRP = 10,780 people). GBVSC partners reached a total of 13,060 women, girls, boys and men against the (HRP) target of 10,780 people. The achievement rate for all three respective objectives was 121%.Indicator "Number of at-risk IDP, returnee and non-displaced conflict-affected GBV survivors, including children, receiving assistance through a multi-sector response (legal, safety, health and psychosocial)":

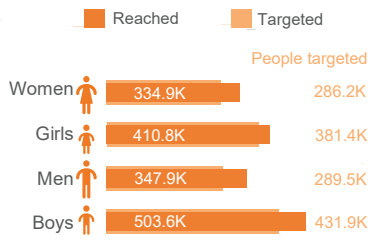
3,529 women, girls, boys and men reached (target was 3,370). Indicator "Number of community members involved in community dialogues to prevent and respond to GBV": 2,545 women, girls, boys and men reached (target was 2,510). Indicator "Number of IDP and returnee women and children receiving psychosocial support": 6,986 women, girls, boys and men reached (target was 4,900).Child Protection in Emergencies (CPiE) sub-cluster partners provided child-friendly spaces, structured activities in IDP sites, temporary learning centres, case management services, capacity building of social workers. Mobile teams monitored child protection risks among displaced communities and increased

Results reported in 2018

	ALLOCATIONS	PROJECTS	PARTNERS
2016	$0.4M	3	2
2017	$8M	23	21
2018	$0.8M	3	3

PEOPLE TARGETED 1,389,105

PEOPLE REACHED 1,597,449



OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of at-risk IDP, returnee and non-displaced conflict-affected GBV survivors, including children, receiving assistance through a multi-sector response (legal, safety, health and psychosocial)	*Women*	1400	1463	105
	Girls	552	576	104
	Men	945	993	105
	Boys	473	497	105
Number of children receiving case management services and referral for other services	*Women*	0	0	
	Girls	25	13	52
	Men	0	0	
	Boys	25	10	40

OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of IDP and returnee women and children receiving psychosocial support	*Women*	0	0	
	Girls	2064	2558	124
	Men	0	0	
	Boys	2836	4428	156

ACHIEVEMENTS BY CLUSTER

SHELTER AND NON-FOOD ITEMS

CLUSTER OBJECTIVES

Objective 1: Ensure timely, adequate access to shelter and non-food items for vulnerable internally displaced and returnees
Objective 2: Ensure that the living conditions of vulnerable people are improved
Objective 3: Ensure adequate response capacity through prepardness measures and prepositioning of emergency shelters and Non-Food items

LEAD ORGANIZATIONS UNHCR, IOM

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS	TARGETED PEOPLE[1]	WOMEN	MEN
$19,510,315	24	17	585,000	GIRLS 161,200	BOYS 172,300

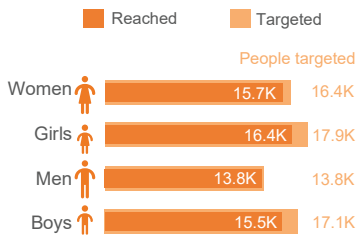
Drought was the key driver of humanitarian need during the period 01 July – 30 September 2018 with more than 224,000 individuals displaced in western Afghanistan, living in open spaces and makeshift shelters that did not enable dignity, privacy and protection from the elements. The large group of people, a lack of adequate hosting arrangements and rental solutions, coupled by the start of winter with sub-zero temperatures accentuated the situation further.

Girls and women were exposed to protection risks with the majority of the population consisting of 58 per cent children (0-18years), 22 per cent women and 20 per cent men including older persons, persons with disabilities and chronically ill. The majority of IDP families had settled on private land without permission risking possible eviction, a challenge to provision of medium-term local shelter solutions. UNHCR agreed to procure tents, drawing from existing global emergency stocks in Pakistanl.

ALLOCATIONS		PROJECTS	PARTNERS
2016	$0.2M	1	1
2017	$2.5M	8	8
2018	$2.4M	9	9

PEOPLE TARGETED 62,000

PEOPLE REACHED 65,000



OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of people receiving basic household items (NFIs) to meet their immediate needs	*Women*	6,625	6,920	104
	Girls	6,983	7,948	114
	Men	6,651	6,608	99
	Boys	7,215	8,168	113
Number of people receiving emergency shelter assistance, including cash for rent support	*Women*	3,097	2,095	68
	Girls	3,441	2,942	85
	Men	2,964	1,968	66
	Boys	3,104	2,919	94

OUTPUT INDICATORS	TARGETED	ACHIEVED	%
Number of people whose shelter was upgraded allowing for safer and dignified living conditions	20,003	22,479	112

1 Results are based on 2018 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

WATER, SANITATION & HYGIENE

CLUSTER OBJECTIVES

Objective 1: Ensure timely access to a sufficient quantity of safe drinking water, use of adequate and gender sensitive sanitation, and appropriate means of hygiene practices by the affected population.
Objective 2: Ensure timely and adequate access to WASH services in institutions affected by emergencies
Objective 3: One year transition of cluster leadership to Ministry of Rural Rehabilitation and Development set in motion

LEAD ORGANIZATIONS UNICEF, Ministry of Rural Rehabilitation and Development

Allocations in 2018

ALLOCATIONS	PROJECTS	PARTNERS	TARGETED PEOPLE	WOMEN	MEN	GIRLS	BOYS
$9,164,589	21	15	696,518	175,300	159,186	181,548	180,484

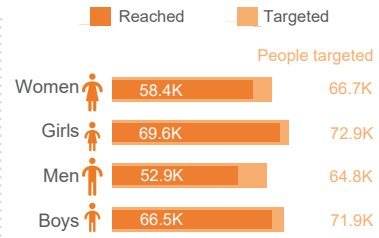
In 2018, AHF allocation to the WASH cluster represented 22 per cent of the HRP funding requirement USD 39 million and 31 per cent of the HRP funding received ($ 27.30 million).The AHF overall targeted beneficiaries represent 43 percent of the HRP overall targeted beneficiaries of 1.63 million people. The AHF supported the implementation of 21 WASH projects through 15 partners towards the achievement of aforementioned cluster target and objectives. Unlike in the previous years, the WASH cluster paid great attention to the WASH needs of childcare (over 500 community-based schools and child friendly spaces), 40 health facilities. Drought response was by far the biggest action with over 1.0 million people reached across 13 provinces.The AHF strategy for the 2018 2nd standard allocation encouraged partners to plan and deliver a multi –sector response wherever possible incorporation a mixed package of services and mainstreaming gender and protection. WASH cluster prioritized durable solution wherever possible strengthening the recovery and humanitarian development linkage. For example, construction of water storage facilities, renovation of non-functioning water systems and installation of new piped schemes in drought affected areas

Results reported in 2018

ALLOCATIONS		PROJECTS	PARTNERS
2016	$0.08M	1	1
2017	$3M	10	10
2018	$1.6M	5	5

PEOPLE TARGETED 276,569

PEOPLE REACHED 247,618



OUTPUT INDICATORS		TARGETED	ACHIEVED	%
Number of people in need with access to at least 15lpcd of drinking water	*Women*	28,342	28,615	101
	Girls	25,854	34,013	132
	Men	28,809	26,932	140
	Boys	25,690	36,086	93
Number of people in need with access to a functioning sanitation facility	*Women*	15,461	15,102	98
	Girls	18,154	16,310	90
	Men	17,512	15,563	89
	Boys	19,321	16,459	85
Number of people in need with access to water and soap for handwashing	*Women*	13,223	13,871	105
	Girls	10,217	13,152	129
	Men	13,984	13,780	99
	Boys	9,939	12,001	121

OUTPUT INDICATORS	TARGETED	ACHIEVED	%
Number of people in need with access to at least 15lpcd of drinking water	108,694	125,647	116
Number of people in need with access to a functioning sanitation facility	70,448	63,433	90
Number of people in need with access to water and soap for handwashing	47,363	52,804	111

1 Results are based on 2018 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

AHF 2018 ANNUAL REPORT

ANNEXES

In the annexes section you will find the below:

Annex A: ALLOCATIONS BY RECIPIENT ORGANIZATION

Annex B: AHF FUNDED PROJECTS

Annex C: AHF ADVISORY BOARD

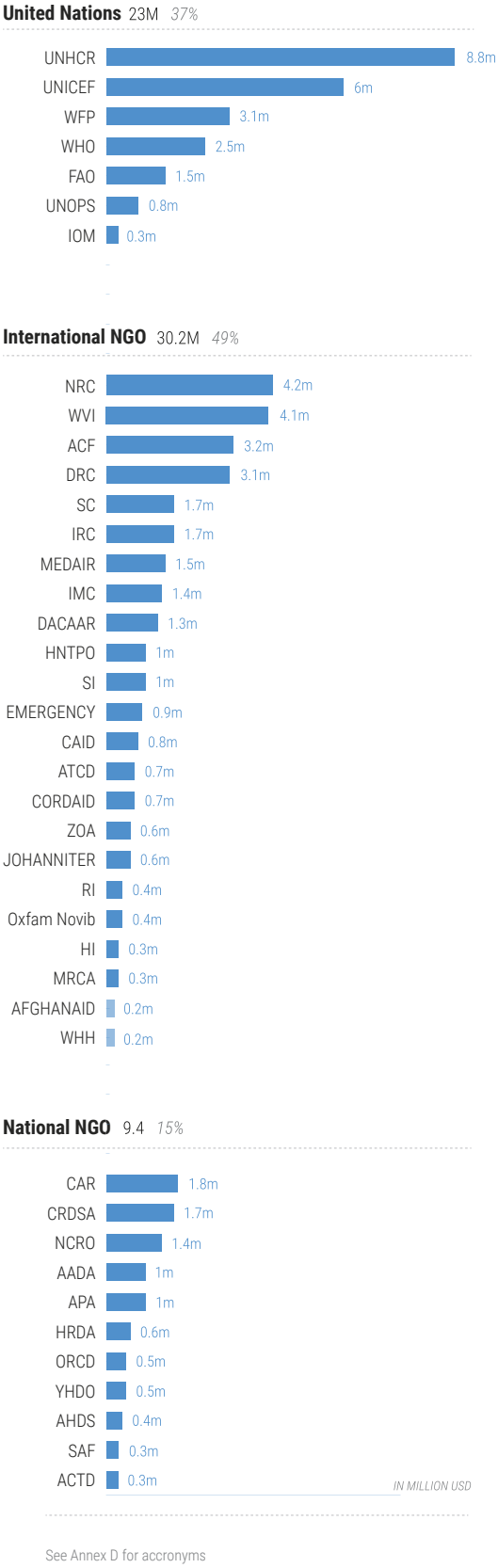
Annex D: ACCRONYMS AND ABBREVIATIONS

Annex E: REFERENCE MAP

AHF Afghanistan Humanitarian Fund

ANNEX A

ALLOCATIONS BY RECIPIENT ORGANIZATION



See Annex D for accronyms

ANNEX B

AHF-FUNDED PROJECTS

#	Project code	Cluster	Organization	Budget
1	AFG-18/3481/RA4/FSAC/INGO/10790	FSAC	ACF	700,000
2	AFG-18/3481/RA3/H/INGO/10495	Health	ACF	258,518
3	AFG-18/3481/SA1/N-WASH-GBV/INGO/7687	Nutrition	ACF	715,355
4	AFG-18/3481/SA2/N-WASH-APC/INGO/9711	Nutrition	ACF	400,000
5	AFG-18/3481/SA1/N-WASH-GBV/INGO/7687	Protection	ACF	217,161
6	AFG-18/3481/SA2/N-WASH-APC/INGO/9711	Protection	ACF	200,000
7	AFG-18/3481/SA1/N-WASH-GBV/INGO/7687	WASH	ACF	344,903
8	AFG-18/3481/SA2/N-WASH-APC/INGO/9711	WASH	ACF	400,000
9	AFG-18/3481/6RA/H-N/NGO/11416	Health	AHDS	259,439
10	AFG-18/3481/6RA/H-N/NGO/11416	Nutrition	AHDS	116,560
11	AFG-18/3481/SA1/GBV-CPiE-ESNFI/NGO/7714	ESNFI	APA	162,881
12	AFG-18/3481/SA1/GBV-CPiE-ESNFI/NGO/7714	Protection	APA	488,643
13	AFG-18/3481/SA2/APC/NGO/9759	Protection	APA	302,430
14	AFG-18/3481/RA5/ESNFI/INGO/11280	ESNFI	AFGHANAID	236,089
15	AFG-18/3481/6RA/H-N/NGO/11413	Health	ACTD	245,743
16	AFG-18/3481/6RA/H-N/NGO/11413	Nutrition	ACTD	81,914
17	AFG-18/3481/6RA/H-N/NGO/11412	Health	AADA	83,950
18	AFG-18/3481/SA1/H-N/NGO/7702	Health	AADA	257,721
19	AFG-18/3481/6RA/H-N/NGO/11412	Nutrition	AADA	162,961
20	AFG-18/3481/SA1/H-N/NGO/7702	Nutrition	AADA	219,540
21	AFG-18/3481/SA2/N/NGO/9743	Nutrition	AADA	309,424
22	AFG-18/3481/RA2/CCS/INGO/9487	Coord and Support Services	ATCD	399,872
23	AFG-18/3481/SA1/ESNFI/INGO/7693	ESNFI	ATCD	350,000
24	AFG-18/3481/RA5/ESNFI/INGO/11271	ESNFI	Christian Aid	309,014
25	AFG-18/3481/SA2/WASH/INGO/9746	WASH	Christian Aid	509,197
26	AFG-18/3481/RA5/ESNFI/NGO/11276	ESNFI	CAR	422,977
27	AFG-18/3481/SA1/ESNFI/NGO/7669	ESNFI	CAR	413,706
28	AFG-18/3481/SA2/FSAC-WASH/NGO/9713	FSAC	CAR	559,112
29	AFG-18/3481/SA2/FSAC-WASH/NGO/9713	WASH	CAR	439,302
30	AFG-18/3481/RA3/ESNFI/NGO/10485	ESNFI	CRDSA	500,000
31	AFG-18/3481/RA5/ESNFI/NGO/11277	ESNFI	CRDSA	502,154
32	AFG-18/3481/SA1/WASH-GBV-CPiE/NGO/7700	Protection	CRDSA	239,568

#	Project code	Cluster	Organization	Budget
33	AFG-18/3481/SA2/WASH-APC/NGO/9763	Protection	CRDSA	164,087
34	AFG-18/3481/SA2/WASH-APC/NGO/9763	WASH	CRDSA	246,130
35	AFG-18/3481/SA1/ESNFI/INGO/7690	ESNFI	CORDAID	297,298
36	AFG-18/3481/SA2/FSAC/INGO/9739	FSAC	CORDAID	369,430
37	AFG-18/3481/6RA/WASH/INGO/11414	WASH	DACAAR	500,000
38	AFG-18/3481/SA1/WASH/INGO/7711	WASH	DACAAR	800,000
39	AFG-18/3481/RA3/ESNFI/INGO/10481	ESNFI	DRC	884,000
40	AFG-18/3481/RA5/ESNFI/INGO/11279	ESNFI	DRC	957,189
41	AFG-18/3481/SA2/FSAC/INGO/9723	FSAC	DRC	1,275,000
42	AFG-18/3481/SA1/WASH-ESNFI/INGO/7713	ESNFI	DW	43,929
43	AFG-18/3481/SA1/WASH-ESNFI/INGO/7713	WASH	DW	165,256
44	AFG-18/3481/SA1/H/INGO/7685	Health	EMERGENCY	904,333
45	AFG-18/3481/RA4/FSAC/UN/10816	FSAC	FAO	1,500,000
46	AFG-18/3481/6RA/H/INGO/11417	Health	HI	270,000
47	AFG-18/3481/RA3/H/INGO/10491	Health	HNTPO	253,121
48	AFG-18/3481/SA1/H-N-GBV-CPiE/INGO/7691	Health	HNTPO	196,852
49	AFG-18/3481/SA1/H-N-GBV-CPiE/INGO/7691	Nutrition	HNTPO	78,741
50	AFG-18/3481/SA2/N-APC/INGO/9716	Nutrition	HNTPO	200,616
51	AFG-18/3481/SA1/H-N-GBV-CPiE/INGO/7691	Protection	HNTPO	161,856
52	AFG-18/3481/SA2/N-APC/INGO/9716	Protection	HNTPO	133,744
53	AFG-18/3481/SA2/WASH-APC/NGO/9732	Protection	HRDA	265,752
54	AFG-18/3481/SA2/WASH-APC/NGO/9732	WASH	HRDA	287,898
55	AFG-18/3481/SA1/H-WASH/INGO/7671	Health	IMC	298,393
56	AFG-18/3481/SA2/WASH-APC/INGO/9714	Protection	IMC	235,758
57	AFG-18/3481/SA1/H-WASH/INGO/7671	WASH	IMC	323,259
58	AFG-18/3481/SA2/WASH-APC/INGO/9714	WASH	IMC	550,103
59	AFG-18/3481/RA5/ESNFI/UN/11275	ESNFI	IOM	250,000
60	AFG-18/3481/RA3/ESNFI/INGO/10483	ESNFI	IRC	671,057
61	AFG-18/3481/RA5/ESNFI/INGO/11284	ESNFI	IRC	482,163
62	AFG-18/3481/SA2/APC/INGO/9760	Protection	IRC	501,001
63	AFG-18/3481/SA1/H-APC/INGO/7705	Health	JOHANNITER	415,867
64	AFG-18/3481/SA1/H-APC/INGO/7705	Protection	JOHANNITER	138,622
65	AFG-18/3481/SA2/N-FSAC-WASH/INGO/9731	FSAC	MEDAIR	686,783
66	AFG-18/3481/SA2/N-FSAC-WASH/INGO/9731	Nutrition	MEDAIR	656,923
67	AFG-18/3481/SA2/N-FSAC-WASH/INGO/9731	WASH	MEDAIR	149,301
68	AFG-18/3481/RA3/H/INGO/10492	Health	MRCA	258,878

#	Project code	Cluster	Organization	Budget
69	AFG-18/3481/RA5/ESNFI/NGO/11278	ESNFI	NCRO	315,265
70	AFG-18/3481/SA1/ESNFI-WASH/NGO/7688	ESNFI	NCRO	352,831
71	AFG-18/3481/SA1/ESNFI-WASH/NGO/7688	WASH	NCRO	325,691
72	AFG-18/3481/SA2/WASH/NGO/9756	WASH	NCRO	449,976
73	AFG-18/3481/SA1/EIE/INGO/7706	Education	NRC	1,343,029
74	AFG-18/3481/RA3/ESNFI/INGO/10484	ESNFI	NRC	940,400
75	AFG-18/3481/RA5/ESNFI/INGO/11273	ESNFI	NRC	515,360
76	AFG-18/3481/RA5/ESNFI/INGO/11292	ESNFI	NRC	1,354,640
77	AFG-18/3481/RA3/H/NGO/10486	Health	ORCD	233,753
78	AFG-18/3481/SA2/N/NGO/9712	Nutrition	ORCD	244,031
79	AFG-18/3481/SA2/WASH-APC/INGO/9736	Protection	Oxfam Novib	74,199
80	AFG-18/3481/SA2/WASH-APC/INGO/9736	WASH	Oxfam Novib	296,797
81	AFG-18/3481/SA1/ESNFI/INGO/7703	ESNFI	RI	399,859
82	AFG-18/3481/SA1/EIE-CPiE/INGO/7670	Education	SC	436,092
83	AFG-18/3481/SA2/FSAC/INGO/9751	FSAC	SC	561,249
84	AFG-18/3481/SA2/N/INGO/9750	Nutrition	SC	380,831
85	AFG-18/3481/SA1/EIE-CPiE/INGO/7670	Protection	SC	290,728
86	AFG-18/3481/SA1/WASH-ESNFI-CPiE/INGO/7694	ESNFI	SI	269,220
87	AFG-18/3481/SA1/WASH-ESNFI-CPiE/INGO/7694	Protection	SI	55,068
88	AFG-18/3481/SA1/WASH-ESNFI-CPiE/INGO/7694	WASH	SI	287,576
89	AFG-18/3481/SA2/WASH/INGO/9703	WASH	SI	386,461
90	AFG-18/3481/6RA/H-N/NGO/11424	Health	SAF	153,784
91	AFG-18/3481/6RA/H-N/NGO/11424	Nutrition	SAF	180,529
92	AFG-18/3481/6RA/N/UN/11421	Nutrition	UNICEF	1,009,443
93	AFG-18/3481/SA1/N/UN/7665	Nutrition	UNICEF	2,657,555
94	AFG-18/3481/SA2/N/UN/9708	Nutrition	UNICEF	874,415
95	AFG-18/3481/6RA/WASH/UN/11422	WASH	UNICEF	1,499,990
96	AFG-18/3481/RA5/ESNFI/UN/11282	ESNFI	UNHCR	8,758,844
97	AFG-18/3481/RA2/CCS/UN/9472	Coord and Support Services	UNOPS	836,832
98	AFG-18/3481/SA1/N/UN/7668	Nutrition	WFP	3,054,086
99	AFG-18/3481/6RA/H/UN/11419	Health	WHO	517,957
100	AFG-18/3481/RA3/H/UN/10498	Health	WHO	1,184,404
101	AFG-18/3481/SA1/H/UN/7678	Health	WHO	830,619
102	AFG-18/3481/RA4/FSAC/INGO/10805	FSAC	WVI	800,000
103	AFG-18/3481/SA2/FSAC/INGO/9744	FSAC	WVI	987,500

#	Project code	Cluster	Organization	Budget
104	AFG-18/3481/6RA/N-H/INGO/11415	Health	WVI	234,000
105	AFG-18/3481/RA3/H/INGO/10482	Health	WVI	225,000
106	AFG-18/3481/6RA/N-H/INGO/11415	Nutrition	WVI	286,000
107	AFG-18/3481/SA2/N/INGO/9745	Nutrition	WVI	823,000
108	AFG-18/3481/RA1/WASH/INGO/8807	WASH	WVI	367,000
109	AFG-18/3481/SA1/WASH/INGO/7701	WASH	WVI	350,000
110	AFG-18/3481/6RA/H-N/NGO/11418	Health	YHDO	202,998
111	AFG-18/3481/RA3/H/NGO/10487	Health	YHDO	204,537
112	AFG-18/3481/6RA/H-N/NGO/11418	Nutrition	YHDO	44,561
113	AFG-18/3481/SA1/WASH-ESNFI/INGO/7682	ESNFI	ZOA	121,437
114	AFG-18/3481/SA1/WASH-ESNFI/INGO/7682	WASH	ZOA	485,748

ANNEX C

AHF ADVISORY BOARD

Chairperson	Humanitarian Coordinator
INGO	Norwegian Refugee Council (NRC)
INGO	Afghanaid
NNGO	Afghan Women Education Center (AWEC)
UN	United Nations High Commissioner for Refugees (UNHCR)
UN	World Health Organization (WHO)
UN	United Nations Children's Fund (UNICEF)
Donor	United Kingdom, Department for International Development (DFID)
Donor	Australia, Department of Foreign Affairs and Trade (DFAT)
Donor	Sweden, International Development Cooperation Agency (SIDA)
Observer	Agency Coordinating Body for Afghan Relief and Development (ACBAR)
Observer	European Civil Protection and Humanitarian Aid Operations (ECHO)
Observer	Switzerland, Agency for Development and Cooperation (SDC)
AHF/OCHA	United Nations Office for the Coordination of Humanitarian Affairs (OCHA)

ANNEX D

ACCRONYMS & ABBREVIATIONS

ACF	Action Contre la Faim
ACTED	Agency for Technical Cooperation and Development
CBPF	Country-Based Pooled Fund
CERF	Central Emergency Response Fund
DRC	Danish Refugee Council
ECHO	European Civil Protection and Humanitarian Aid Operations
EO	OCHA Executive Officer
FAO	Food and Agriculture Organization
FCS	Funding Coordination Section
GBV	Gender-based violence
GMS	Grant Management System
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HFU	OCHA Afghanistan Humanitarian Financing Unit
HRP	Humanitarian Response Plan
IDPS	Internally displaced persons
INGO	International Non-Governmental Organization
IOM	International Organization for Migration
MPTF	Multi-Partner Trust Fund
NCA	Norwegian Church Aid
NFI	Non-food items
NGO	Non-Governmental Organization
NNGO	National Non-Governmental Organization
NRC	Norwegian Refugee Council
OCHA	Office for the Coordination of Humanitarian Affairs
PLW	Pregnant and Lactating Women
RI	Relief International
RMU	Risk Management Unit
SC	Save the Children
AHF	Afghanistan Humanitarian Fund
TPM	Third Party Monitoring
UK	United Kingdom
UN	United Nations
UNDP	United Nations Development Programme
UNDSS	United Nations Department of Safety and Security
UNFPA	United Nations Population Fund
UNHAS	United Nations Humanitarian Air Services
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNOPS	United Nations Operation Services
USD	United States Dollar
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organization
WVI	World Vision International
AAP	Accountability to Affected Populations
AB	Advisory Board
ACBAR	Agency Coordinating Body for Afghan Relief & Development
BPHS	Basic Package of Health Services
CA	Capacity Assessment
CCHF	Crimean Congo Hemorrhagic Fever
HTR	Hard to Reach
IHL	International Humanitarian Law
IPC	Integrated Phase Classification
LTA	Long Term Agreement
NFI	Non-Food Items
PHC	Public Health Clinic
SCU	Strategy and Coordiation Unit
SRC	Strategic Review Committee
TRC	Technical Review Committee

ANNEX E

REFERENCE MAP

Map Sources: UNCS, ESRI, The Times Atlas of the World.
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. Map created in Sep 2013.

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AHF Afghanistan Humanitarian Fund