

HUMANITARIAN IMPLEMENTATION PLAN (HIP)
**THE AFGHAN CRISIS (INCLUDING AFFECTED POPULATIONS OF
AFGHANS IN IRAN AND PAKISTAN)**

AMOUNT: EUR 31 500 000

0. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

Severe flooding and landslides in the first half of 2014 seriously affected over 150 000 people. An estimated 8 850 homes were totally destroyed and 8 345 badly damaged. Significant impact on harvests and rural livelihoods is expected.

The Shelter Cluster, with the support of OCHA, has developed a Shelter Response Plan (SRP) to cover in a coordinated manner the needs for transitional shelters before the onset of winter, i.e. late October in most of the affected area. At least 8 100 units are urgently needed. The total funding requirement taking into account the standardized shelter design is USD 24 million. There is urgency in responding to the needs before the coming winter.

Additionally new wave of displacement from North Waziristan Agency in Pakistan following the launch of military operations by the Pakistan Army against armed non state actors in North Waziristan has taken place since mid-June. Nearly one million people are now displaced. UNHCR Afghanistan reports an estimated 13 600 families (estimated over 112 000 individuals) displaced into the Khost and Paktika provinces of Afghanistan. A scaling up of relief efforts is urgently needed to provide food, WASH, shelter, health services and medicines to the displaced. Services in Khost and Paktika are reported as overstretched. A joint UN and NGO Preliminary Response Plan (PRP) with an appeal for funding has been launched shortly for an estimated USD 24 million.

1. CONTEXT

Afghanistan ranks 175th out of 187 countries in the 2012 Human Development Index (HDI). In the European Commission's Global Needs Assessment (GNA)'s vulnerability index, Afghanistan ranks as Index 3 (high vulnerability) and under the crisis index as Index 3 (high vulnerability). DG ECHO¹'s **Integrated Analysis Framework for 2013-14** identified high humanitarian needs in Afghanistan. The vulnerability of the population affected by the crisis is assessed to be very high.

More than **three decades of war** have made Afghanistan one of the **most dangerous countries to live and work in**, generating the world's largest number of refugees and asylum seekers. While the international community is assisting the Government in

¹Direktorate General for Humanitarian Aid and Civil Protection

rebuilding the country, armed opposition groups (AOG) are actively involved in a nationwide Taliban-led insurgency.

The positive trend showed in the decrease of violence and civilian casualties in 2012 no longer prevailed in 2013 which by mid-year had seen a **47% increase of security incidents as well as 24% more civilian casualties**². Comparing figures from the past ten years, 2013 is on target to be the worst year ever in terms of armed opposition group (AOG) attacks, military operations impacting civilians, and criminality. The proliferation and fragmentation of AOGs, and the attrition and non-reliability of state security structures inside Afghanistan, are also of major concern. The epicentre of the fighting, which used to be in the south and east of the country, is spreading to the northern and western regions. This is the thirty-fifth consecutive year of conflict in Afghanistan.

The accelerated transition is scheduled to be achieved by 2014 when the combat mission of the International Security and Assistance Force (ISAF) will end and 100 000 foreign combat troops will depart. Subsequently, international financial support could significantly reduce. The market created by the presence of International Military Forces (IMF) will also shrink. Both these **transition related consequences will lead to negative socio-economic impacts and further destabilising effects**. Moreover, upcoming elections will create additional tensions and increased violence, likely culminating in early 2014 when the presidential campaign is at its peak.

There is **widespread and significant displacement amongst the Afghan population**. It is caused mainly by conflict, and natural disasters to a certain extent. In the last 10 years 5.7 million Afghan refugees have returned to Afghanistan, leaving **2.49 million documented Afghans predominantly in neighbouring Pakistan and Iran**. It is estimated that 2.5 million undocumented Afghans also live in Pakistan and Iran. At the same time, conflict in Pakistan is increasing. Over 100 000 refugees have been displaced from Pakistan into Afghanistan, and future conflict could lead to increased displacement and needs.

Additionally, the number of **conflict-induced Internally Displaced People (IDPs)** is on a constant rise.

Moreover, **Afghanistan is a natural disaster prone country** with weak institutional means and mechanisms to mitigate risks and respond to emergencies. It is affected on a regular basis by floods, epidemics, earthquakes, landslides, avalanches, extreme temperatures as well as sand storms. There is an average of eight significant natural disasters per year. Although the 2013 wheat harvest is still expected to be above the general average, pockets of droughts which chronically affect Afghanistan have been reported.

²Afghanistan Common Humanitarian Action Plan (CHAP) Mid-Year review 2013

Severe flooding and landslides in the first half of 2014 affected over 150 000 people and totally destroyed at least 8 000 houses. Significant impact on harvests and rural livelihoods is expected.

Total population: Approx. 30 400 000³

34% of the population is food-insecure (approximately 9 million people, of whom 2.1 million are severely food-insecure). Chronic under nutrition is high (59%). Potential pockets of acute malnutrition also prevail although no up-to-date or accurate data is currently available on the overall scale of acute malnutrition⁴.

2. HUMANITARIAN NEEDS

- 1) Affected people / potential beneficiaries:

Conflict Affected People

IDPs

The United Nations High Commissioner for Refugees (UNHCR) reports about 59 000 newly displaced people in 2013, bringing the number of conflict-induced displaced people to more than 583 000 as of end of August 2013 (mainly located in the South, East and West)⁵.

War wounded casualties are also on the rise in different parts of the country, the increase in Helmand (South) even reaching 110% compared to 2011⁶.

Returnees

From January to August 2013, a total of 30 724 Afghan refugees (averaging 126/day) voluntarily repatriated to Afghanistan. The rate of return in mid-2013 is lower (-40%) compared to the 51 864 Afghans who returned during the same period in 2012⁷. Areas of highest return include the eastern border provinces (Nangarhar & Laghman), central region provinces and major urban centres, Kabul City primarily.

³The CIA world factbook

⁴Common Humanitarian Action Plan 2013 mid-year review Afghanistan.

⁵UNHCR IDP monthly update August 2013

⁶Emergency NGO August 2013

⁷UNHCR VOL REP report August 2013

Afghan refugees in Pakistan & Iran

The 2.49 million⁸ registered Afghan refugees remain both in Iran (840 000) and Pakistan (1.65 million). Humanitarian needs relating to these groups are also addressed in this HIP.

Pakistani refugees in Afghanistan

As a result of conflict, around 112 000 Pakistani refugees have been displaced into Afghanistan. A number of them are in a refugee camp but most of them are staying in Afghan host communities having very limited resources. Humanitarian needs relating to Pakistani refugees and vulnerable host communities in Afghanistan can also be addressed under this HIP.

Natural Disaster & Epidemic Affected people

Nearly half of Afghanistan's 400 districts are hazard-prone and 250 000 Afghans are affected by natural disasters every year. In 2012, 345 natural disasters were recorded in 177 districts. These resulted in 441 deaths and 251 086 people affected, with the damage or destruction of 27 430 homes and properties⁹.

In the first six months of 2013, over 140 000 people were affected by natural hazards, notably floods and earthquakes. Pockets of drought were also reported. These hazards resulted in 21 000 damaged or destroyed homes¹⁰ as well as in 25 076 disaster induced IDPs in need of assistance¹¹.

Outbreaks of infectious diseases such as tuberculosis, typhoid, malaria, cholera, measles, meningitis, gastrointestinal viruses and diphtheria are frequent. Vaccination campaigns in some areas have been successful. However due to the on-going conflict, lack of resources and repeated displacement, outbreaks are still common in Afghanistan.

Extensive flooding and landslides in northern Afghanistan during the first half of 2014 result in over 150 000 people affected, and the total destruction of at least 8 000 homes. The extent of the damage has severely affected the resilience of communities to survive through the winter.

2) Description of the most acute humanitarian needs

a) Food Assistance

⁸UNHCR 2012

⁹CHAP 2013 mid-year review Afghanistan.

¹⁰UNICEF Afghanistan Situation Report 31 July 2013

¹¹Food Security and Agriculture Cluster Dashboard July 2013

Reduced access to food amongst crisis affected households. Food consumption falls below acceptable levels in terms of quantity and quality. Livelihood assets are eroded and options further undermine immediate food security.

b) WASH¹²

Lack of access to disaster-resilient drinking water, sanitation facilities and hygiene awareness, for crisis-affected populations.

c) Health

Limited capacity of the health sector to provide life saving medical support to those affected by conflict. A lack of surveillance, preparedness and response to epidemics in high risk areas is also observed.

d) Nutrition

Risk of acute malnutrition amongst crisis-affected populations. One main issue to address nutrition is the limited human resources and technical capacities of nutrition actors and the glaring need for systematic nutrition surveillance, and improved coverage of nutrition services.

e) Shelter and Non Food Items (NFI)

Urgent, transitional and “innovative” shelter and NFI for those affected by conflict and natural disasters. More should also be done in rehabilitation and recovery support to vulnerable returning refugees and populations recovering from conflict and natural disasters. In cases of large-scale displacement and destruction, durable shelter solutions to facilitate recovery and increase resilience are necessary.

f) Protection

Protection from violence and abuse, for the most vulnerable populations affected by conflict and natural disasters, including refugees in neighbouring countries, in conformity with the international legal framework.

g) Coordination and information management

Systematic and timely needs assessments, data collection, analysis, presentation and dissemination, leading to enhanced humanitarian coordination.

h) Support Services

Safety & security for the humanitarian community, and improved access to remote areas.

¹²Water, Sanitation and Hygiene

3. HUMANITARIAN RESPONSE

1) National / local response and involvement

Responsibility for the coordination of response to natural disasters lies with the Afghanistan National Disaster Management Authority (ANDMA). The Authority has provincial representations.

For conflict related displacement, the Ministry of Refugees and Repatriation (MoRR), which is supported by UNHCR, leads the response and is assisted by the Afghan Red Crescent Society (ARCS). In conflict affected areas without government accessibility, ARCS/ICRC often takes the lead.

Overall national and local response is restricted by a limited absorption capacity, poor governance, and high staff turnover. International actors' involvement in large scale emergency response should not undermine the national and local response.

2) International Humanitarian Response

The Deputy Special Representative of the Secretary General (DSRSG) of the United Nations Department of Peacekeeping Operations (DPKO) Mission, United Nations Assistance Mission in Afghanistan (UNAMA), is also the Humanitarian Coordinator and the Resident Coordinator for Afghanistan. For humanitarian activities, he is assisted in these tasks by UNOCHA¹³.

As the CAP¹⁴ 2012 was significantly underfunded, the appeal was redesigned into a **more strategic tool in 2013 i.e. the CHAP¹⁵**. Overall increased “bunkerisation” of the international humanitarian community has resulted in limited access to, and interaction with, the population in need. This led the humanitarian community to reflect on how to implement humanitarian activities in remote and difficult areas as well as how to access funding. Following this process, the CHF¹⁶ pool fund is likely to be introduced in 2014, in addition to ERF¹⁷/CERF¹⁸. Although this could lead to a potential increase in humanitarian funding and thus improve appropriate responses in a timely manner, several issues such as remote management, quality control, monitoring and evaluation still need to be properly addressed.

¹³United Nations Office for the Coordination of Humanitarian Affairs

¹⁴Consolidated Appeal Process

¹⁵Common Humanitarian Action Plan

¹⁶ Common Humanitarian Fund

¹⁷ Emergency Response Fund

¹⁸Central Emergency Response Fund

Total Humanitarian Assistance per main Donor as of 08-August-2013 (USD¹⁹)

Japan	70 832 492	17.6%
United States	58 083 638	14.4%
European Commission	43 263 077	10.7%
Canada	32 951 644	8.2%
Sweden	20 987 318	5.2%
United Kingdom	20 517 699	5.1%
Germany	15 643 131	3.9%

3) Constraints and DG ECHO response capacity

- a) An **increase in insecurity and criminality has led many NGO²⁰s as well as DG ECHO to review their 'modus operandi'** and operational set-up. This could lead to implementation adaptations in 2014. In general, humanitarian partners still lack comprehensive access to populations in need. There is limited capacity to operate in areas where they have not been present before. Capacity building is needed in the area of access negotiation. However, this may depend on the local context, security and political aspects that are outside an organisation's mandate most of the time.
- b) Although humanitarian agencies have started to refocus on emergencies and building some capacity to deploy rapidly, there is a tendency for NGOs not to move from areas where they are well established and accepted. It is therefore not always easy to scale up humanitarian interventions in areas of greatest needs, not to mention the most insecure areas of the country. However, the most **robust emergency response strategies** will be supported by DG ECHO. Should DG ECHO partners wish to work with local implementing partners, sufficient training and supervision will have to be in place and eventually provided in order to respect humanitarian principles and standards.
- c) Coordination and support services sectors constitute a pre-condition for effective and secure humanitarian work in Afghanistan.

4) Envisaged DG ECHO response and expected results of humanitarian aid interventions.

The European Commission has remained consistently engaged in Afghanistan over the last eighteen years. Furthermore, it benefits from a legal basis that strictly defines the impartiality, independence and neutral nature of the operations it finances.

¹⁹United States Dollar

²⁰Non-governmental Organisation

The proposed humanitarian response includes the following activities:

Support Services, including the support of dedicated common services to facilitate access (humanitarian air transport and access to the same) and to provide safety & security support to humanitarian agencies.

Coordination and coherence of humanitarian needs assessments and response, as well as support to a civil-military dialogue on humanitarian issues through established formal coordination mechanisms.

Protection for conflict affected populations including those displaced, detainees in Afghan, US and ISAF detention facilities, voluntary and forcibly returned refugees, and Pakistani refugees. Given the history of conflict and cultural specificities of Afghanistan, particular attention must be paid to Gender Based Violence (GBV) and the needs of children both for conflict and natural disasters situations. There is also an urgent and pressing need to promote International Humanitarian Law and recall to the parties to the conflict their obligations under it.

Life-saving medical support is required by all victims of conflict, in the form of first aid and war surgery in conflict-affected areas and referral hospitals as well as the prevention and response to outbreaks of epidemics.

Relief assistance and support to reintegration & recovery of civilian populations, internally displaced people (whether affected by conflict or natural disasters), host communities and returning refugees requiring urgent support in the form of humanitarian food and nutrition assistance (either in cash or kind), shelter materials incorporating DRR and durable approaches, health, water, hygiene and sanitation and NFIs. Refugees can be assisted in the same manner. This is to alleviate their immediate suffering and maintain their dignity.

As previous years have demonstrated that the overall level of disaster preparedness of the communities, national & local institutions is not sufficient to cope with repeated shocks, and that local coping mechanisms are being eroded or ignored, all relief assistance activities will have to be conceived and conducted under a comprehensive **Disaster Risk Reduction (DRR)** approach that should increase community preparedness and resilience to natural disasters. Furthermore, a coherent, coordinated approach and response with the existing humanitarian mechanisms (OCHA, sector clusters and ANDMA as well as INGO supported ones) is expected. DG ECHO will require partners to properly and systematically address DRR and coordination in their project proposals.

Care & maintenance support for the most vulnerable elements of the Afghan refugees in Iran and Pakistan, and relief support for any fresh influx of displaced people.

Inclusion of marginalised groups (PWD²¹, women, elderly) must be properly and systematically addressed in all projects and sectors. DG ECHO will require partners to explain if they do not include these components.

²¹People with Disability

Gender-Age Mainstreaming: all project proposals/reports must demonstrate integration of gender and age in a coherent manner throughout the Single Form, including in the needs assessment and risk analysis, the logical framework, description of activities and the gender-age marker section.

Expected results of humanitarian aid interventions:

- a) Enhanced coordination of humanitarian action and information management in Afghanistan, through clusters and partners coordination
- b) Enhanced access through the provision of reliable safety & security support and humanitarian flight services.
- c) Enhanced protection for those affected by conflict, detainees, displaced and returnees and promotion of the application and respect of International Humanitarian Law.
- d) Ensuring that acceptable levels of food consumption are attained, enhanced nutrition, and access to emergency shelter, WASH assistance and non-food relief to victims of the conflict and natural disasters, including Disaster Risk Reduction measures.
- e) Provision of urgent life-saving medical assistance to the victims of conflict; including capacity building in mass casualty management and treatment of war wounded.
- f) Safe, dignified and voluntary return of the most vulnerable refugees.
- g) Provision of care & maintenance support to the most vulnerable of the remaining refugee caseloads in Iran and Pakistan.

Effective coordination is essential. DG ECHO supports the **Inter-Agency Standing Committee's Transformative Agenda (ITA)** and encourages partners to demonstrate their engagement in implementing its objectives, to take part in coordination mechanisms (e.g. Humanitarian Country Team/Clusters) and to allocate resources to foster the ITA roll-out.

Partners will be expected to ensure full compliance with **visibility** requirements and to acknowledge the funding role of the EU/DG ECHO, as set out in the applicable contractual arrangements.

4. LRRD²², COORDINATION AND TRANSITION

1) Other DG ECHO interventions

The **Epidemics HIP** may again be drawn upon for the prevention of, and response to, outbreaks of epidemics in Afghanistan. The **Small-Scale Response** and **Disaster Relief**

²²Linking Relief, Rehabilitation and Development

Emergency Fund (DREF) HIP may also be a funding option. Disaster Preparedness projects, under DIPECHO Action Plan VII, are also on-going in the region.

2) Other services/donors availability (such as for LRRD and transition)

There has been a major on-going international effort to stabilize Afghanistan, secure its transition and future development. However, limited counterpart capacity and difficult operating conditions posed a challenge to the efficiency and effectiveness of the stabilization and development response. This challenge will be increased with the upcoming election and final withdrawal of International Military Forces (IMF), which could impact negatively on local economic opportunities and conditions, leading to significant social tensions.

The **focal sectors of interventions of the EU are agriculture and rural development, health and governance**. DG ECHO's LRRD emphasis is on the mainstreaming of disaster risk reduction, resilience, gender, nutrition and water, sanitation and health. The crucial issue of social protection in areas of chronic vulnerability is a specific point of discussion in order to enhance the resilience of vulnerable communities.

The European Commission Aid to Uprooted People which is a regional budget line is still financing reintegration activities (notably through UNHCR and NGOs). Additionally, under the short term component of the Instrument for Stability, the EU is currently financing a capacity building project aimed at increasing the civilian policing capabilities of the Afghan National Police and is supporting a UNDP multi donor trust fund to strengthen electoral reform in Afghanistan. Food security interventions are also currently funded. However, Afghanistan is not a priority country for the Food Security Thematic Programme (FSTP) anymore. For such reason, **DG ECHO's future LRRD work should focus on advocating for more food security oriented agricultural and rural development programmes**.

Advocacy: DG ECHO and its partners will continue to advocate at country and international level, with other Commission services, European Institutions, Member States, other donor countries and internal institutions for:

- a) The respect of **International Humanitarian Law and humanitarian principles** by all parties to the conflict in Afghanistan, and all those engaged in-country;
- b) The promotion of initiatives aiming at improving **access and response capacities**;
- c) Better **LRRD** with other Commission services, the European External Action Service and other development donors;
- d) **Accountability** of aid provided to Afghanistan, for both humanitarian and development programmes.

3) Exit scenarios

Although concrete commitments have been reaffirmed to ensure long-term security (Chicago Conference) and continued economic development (Tokyo Conference), 2013 witnessed an increasing number of conflict related incidents and thus more and more

IDPs. With an uncertain and unstable national and regional security context (upcoming elections and withdrawal of the IMF, as well as the unpredictable status of refugees currently living in Iran and Pakistan) and an economic downturn, DG ECHO does not envisage an immediate exit scenario. **The Afghan crisis is likely to continue for the foreseeable future and to generate persistent humanitarian needs requiring a continued DG ECHO engagement.**