

Research Terms of Reference

NEEDS MONITORING FRAMEWORK

AFG2404

Afghanistan

June 2026

V1



1. Executive Summary

Country of intervention	Afghanistan		
Type of Emergency	<input checked="" type="checkbox"/> Natural disaster	<input type="checkbox"/> Conflict	<input type="checkbox"/> Other (<i>specify</i>)
Type of Crisis	<input checked="" type="checkbox"/> Sudden onset	<input type="checkbox"/> Slow onset	<input type="checkbox"/> Protracted
Mandating Body/ Agency	OCHA - Inter-Cluster Coordination Team / WFP		
IMPACT Project Code	AFG2404		
Overall Research Timeframe (<i>from research design to final outputs / M&E</i>)	Pilot: 01/11/2022 - 15/12/2022 This Round (10 th): 10/05/2026 - 07/06/2026 Ongoing on a quarterly basis		
Research Timeframe <i>Add planned deadlines (for first cycle if more than 1)</i>	1. Start data consolidation: 10/04/2026	4. Data/Analysis sent for analysis: 22/06/2026	
	2. Data collected: 07/06/2026	5. Outputs (dashboard) sent for validation: 30/06/2026	
	3. Data analysed: 20/06/2026	6. Outputs published: 05/07/2026	
Number of assessments	<input type="checkbox"/> Single assessment (one cycle)		
	<input checked="" type="checkbox"/> Multi assessment (more than one cycle) One cycle per quarterly prioritization exercised		
Humanitarian milestones <i>Specify what will the assessment inform and when e.g. The shelter cluster will use this data to draft its Revised Flash Appeal;</i>	Milestone		Deadline
	<input checked="" type="checkbox"/>	Donor plan/strategy	Quarterly
	<input checked="" type="checkbox"/>	Inter-cluster plan/strategy	Quarterly seasonal re-prioritisation for HPC and IPPC
	<input type="checkbox"/>	Cluster plan/strategy	--/--/----
	<input type="checkbox"/>	NGO platform plan/strategy	WFP - Quarterly
<input type="checkbox"/>	Other (Specify):	--/--/----	

Audience Type & Dissemination	Audience type		Dissemination	
Specify who will the assessment inform and how you will disseminate to inform the audience	<input checked="" type="checkbox"/> Strategic <input checked="" type="checkbox"/> Programmatic <input type="checkbox"/> Operational <input type="checkbox"/> [Other, Specify]		<input checked="" type="checkbox"/> General Product Mailing (e.g. mail to NGO consortium; HCT participants; Donors) <input checked="" type="checkbox"/> Cluster Mailing and presentation of findings at next cluster meeting <input checked="" type="checkbox"/> Presentation of findings (e.g. at AAWG and ICCT meetings) <input type="checkbox"/> Website Dissemination (Relief Web & REACH Resource Centre) <input type="checkbox"/> [Other, Specify]	
Detailed dissemination plan required	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
General Objective	<p>Needs in Afghanistan are evolving rapidly, marked by a surge in people in need (PiN) amid limited resources. The drivers of these needs have largely shifted from conflict to economic risks and climate-related hazards, intensifying the seasonal impact on various sectors. Despite the yearly Humanitarian Planning Cycle (HPC) relying on provincial-level assessments, there is a recognized necessity for a more frequent and detailed overview of multisectoral needs throughout the year. Addressing this gap, the Needs Monitoring Framework (NMF) was developed by the Assessment and Analysis Working Group (AAWG), modeled after the yearly Joint Intersectoral Assessment Framework (JIAF) and designed for quarterly monitoring using regularly updated and pre-existing data sources, where possible. As such, the primary objective of the NMF is to meet evolving HPC and IPPC planning needs by providing a quarterly and district-level understanding of country-wide needs.</p>			
Specific Objective(s)	<ul style="list-style-type: none"> • Provide a regular overview of the evolution of needs at a district level to better identify hotspots of needs and sudden deteriorations of needs. • Support regular strategic planning exercises undertaken by the Inter-Cluster Coordination Team (ICCT) in between biannual HPC processes, mainly the district-level seasonal prioritization. • Become a component of a broader real-time monitoring system in Afghanistan, to support a context-sensitive analysis of needs and their determinants (shocks) throughout the year. • Enable comparison of needs across different districts to inform the prioritization of resources, ensuring that the area with the most urgent needs receive timely and adequate support. • Facilitate the design of targeted and context-specific programs by identifying the main issues and sectoral needs in each district, allowing for more effective and efficient humanitarian interventions. • Support evidence-based advocacy and resource mobilization efforts by providing up-to-date and granular data on evolving needs, helping 			

	stakeholders to make informed decisions and secure necessary fundings.			
Research Questions	<ol style="list-style-type: none"> 1. What is the current severity of multi-sectoral and sectoral needs at the district level? 2. What are the trends in the severity of these needs over time? 3. How do specific shocks influence the development of needs, and what role do underlying vulnerabilities play in modifying the impact of these shocks? 			
Geographic Coverage	Nationwide			
Secondary data sources	<ul style="list-style-type: none"> • Integrated Phase Classification (IPC) • National SMART Survey (Nutrition Cluster) • Health Resource and Service Availability Monitoring Systems (WHO) • Whole of Afghanistan Assessment (REACH) • Humanitarian Situation Monitoring (REACH) • District Health Information Software2 (DHIS2) • Directorate of Mine Action Coordination (DMAC) • Afghanistan Livelihood Zoning • Afghanistan Nutrition Cluster 			
Population(s) <i>Select all that apply</i>	<input checked="" type="checkbox"/>	IDPs in camp	<input checked="" type="checkbox"/>	IDPs in informal sites
	<input checked="" type="checkbox"/>	IDPs in host communities	<input type="checkbox"/>	IDPs [Other, Specify]
	<input checked="" type="checkbox"/>	Refugees in camp	<input checked="" type="checkbox"/>	Refugees in informal sites
	<input checked="" type="checkbox"/>	Refugees in host communities	<input type="checkbox"/>	Refugees [Other, Specify]
	<input checked="" type="checkbox"/>	Host communities	<input type="checkbox"/>	[Other, Specify]
Data collection tool(s)	<input checked="" type="checkbox"/>	Structured (Quantitative)	<input type="checkbox"/>	Semi-structured (Qualitative)
	Sampling method		Data collection method	
Structured data collection tool # 1 <i>Select sampling and data collection method and specify target # interviews</i>	<input type="checkbox"/> Purposive <input type="checkbox"/> Probability / Simple random <input type="checkbox"/> Probability / Stratified simple random <input type="checkbox"/> Probability / Cluster sampling <input type="checkbox"/> Probability / Stratified cluster sampling <input checked="" type="checkbox"/> No primary data collection		<input type="checkbox"/> Key informant interview (Target #):_ <input type="checkbox"/> Group discussion (Target #):_ _ _ _ _ <input type="checkbox"/> Household interview (Target #):_ _ _ <input type="checkbox"/> Individual interview (Target #):_ _ _ <input type="checkbox"/> Direct observations (Target #):_ _ _ <input checked="" type="checkbox"/> No primary data collection	
Data management platform(s)	<input checked="" type="checkbox"/>	IMPACT	<input type="checkbox"/>	UNHCR
	<input type="checkbox"/>	[Other, Specify]		
Expected output type(s)	<input type="checkbox"/>	Situation overview #: _ _	<input type="checkbox"/>	Report #: _ _
	<input type="checkbox"/>		<input type="checkbox"/>	Profile #: _ _

	X	Presentation (Preliminary findings) #: _ _	<input type="checkbox"/>	Presentation (Final) #: _ _	<input type="checkbox"/>	Factsheet #: _ _
	X	Interactive dashboard #: Intended 06/2024	<input type="checkbox"/>	Webmap #: _ _	X	Map
	<input type="checkbox"/>	[Other, Specify] #: _ _				
Access	x	Public (available on REACH resource center and other humanitarian platforms)				
	<input type="checkbox"/>	Restricted (bilateral dissemination only upon agreed dissemination list, no publication on REACH or other platforms)				
Visibility Specify which logos should be on outputs	REACH					
	Donor: FCDO					
	Coordination Framework: Assessment and Analysis Working Group (AAWG)					
	Partners: AAWG					

2. Rationale

2.1 Background

Afghanistan remains in a protracted humanitarian crisis driven by economic instability, climate shocks, and structural vulnerabilities. While active conflict has declined, humanitarian needs remain persistently high. According to OCHA, the number of people in need (PiN) was 22.1 million in 2023, increasing to 23.7 million in 2024, and slightly decreasing to 22.9 million in 2025, with 16.8 million prioritized for multisectoral assistance. In 2026, an estimated 21.9 million people approximately 45 per cent of the population are expected to require humanitarian assistance.¹

The crisis is primarily driven by declining household purchasing power, high unemployment, and reduced humanitarian funding, which have limited access to basic services. At the same time, recurrent climate hazards including drought, floods, and harsh winters continue to erode livelihoods, particularly in rural areas. These challenges are compounded by large-scale population movements, including returns from neighboring countries, placing additional pressure on already vulnerable communities.

Since 2023, Afghanistan has experienced several major shocks that have further intensified humanitarian needs. The 2023 Herat earthquakes caused widespread destruction and displacement, followed by severe flooding in 2024 and 2025 affecting large parts of the country. These recurring and localized shocks highlight the increasingly complex and multi-hazard nature of the crisis.

In this context, the limitations of annual, provincial-level assessments under the Humanitarian Planning Cycle have become increasingly evident. The Needs Monitoring Framework (NMF) was established to address these gaps by providing quarterly, district-level analysis of multisectoral needs. To date, nine rounds of the NMF have been completed, with findings regularly informing discussions within the Assessment and Analysis Working Group. By complementing the JIAF 2.0, the NMF supports more timely, granular, and coordinated humanitarian decision-making.

¹ [Afghanistan: Humanitarian Needs and Response Plan 2026 Summary](#)

2.2 Intended impact

REACH proposes to support the strengthening of the humanitarian response's timeliness and adaptability by providing a quarterly evidence base on the evolution of needs in-between yearly Humanitarian Programming Cycles (HPCs). This will be achieved through the implementation of a quarterly analysis and aggregation of data sources stemming from various sectoral and multisectoral assessments, monitoring systems and remote sensing analyses, which will inform on the sectoral and multisectoral severity of needs at a district level. Among these, the Quarterly Food Security Monitoring (QFSM) will play a crucial role in tracking food security outcomes, allowing for a detailed understanding of food security dynamics across districts².

After a joint review facilitated by the AAWG, the findings will serve as part of an evidence base to inform individual clusters and the greater ICCT's seasonal prioritization process. In short, they will help identify geographic hotspots marked by an overlap of multisectoral needs and seasonal vulnerabilities, and support resource prepositioning as well as programmatic reassessments.

3. Methodology

3.1 Methodology overview

The Needs Monitoring Framework will consist of two components: a standard framework, modelled on the yearly JIAF list of indicators (recently adapted to JIAF 2.0) and aimed at providing updates on multisectoral and sectoral needs in between (bi)annual HRP targeting exercises; and a set of rotating seasonal indicators, tailored in coordination with clusters to reflect the varying vulnerabilities of districts to pre-identified seasonal hazards. Among the data sources considered, the Quarterly Food Security Monitoring (QFSM) framework will provide essential insights into food security dimensions, which are critical for a comprehensive understanding of multisectoral needs.

Given that a primary goal of the Needs Monitoring Framework is to support seasonal prioritization, and the limited availability of updated data sources, NMF analysis will be undertaken on a quarterly basis and align with the ICCT's seasonal prioritization timelines. Prior to running the pilot analysis, existing assessments and monitoring systems available across the Afghanistan response were reviewed, and used to create a NMF indicators list according to the following criteria:

- **Adaptability to JIAF (2.0) indicators:** data sources that contained indicators which could be used as proxy for the JIAF individual indicators were reviewed. When several sources were available for an indicator, they were all included in the framework, with the intention of building redundancy based on timelines and availability.
- **Timeliness:** only data sources available on a biannual, quarterly or continuous basis were considered. When JIAF indicators were unlikely to change significantly over time or when no proxy data source was available on a more regular basis, original data from the JIAF was used (for example, on the % of Children 6-23 months with minimum acceptable diet).
- **Coverage:** only sources with nationwide coverage were considered.
- **Granularity:** the NMF focused on data sources available at a district level in priority. Alternatively, data sources providing statistically representative results at a province level were also considered.

² For more detailed information, refer to the QFSM methodology note in the annex.

To enhance cluster planning exercises, indicators are not only measured across multiple sectors but are also broken down by individual sectors such as Education, Emergency Shelter and Non-Food Items (ESNFI), Health, Nutrition, Protection, Food Security, and Water, Sanitation and Hygiene (WASH). This approach facilitates more tailored and effective planning for each specific sector's needs. Building on this, a sector specific deeper analysis tools was also developed – the Quarterly Food Security Monitoring – which focuses on food security and its pillars³.

The initial framework for indicator mapping took inspiration from the 2023 Joint Intersectoral Analysis Framework (JIAF), with each JIAF indicator associated with a primary proxy indicator. In instances where the primary proxy indicator is unavailable, a secondary proxy indicator is recommended for use, ensuring the continuity of data collection. Priority is given to assessments that are conducted nationwide and provide results at either the provincial or district level on a regular basis. However, exceptions are made for indicators that do not significantly fluctuate over time or for which secondary data sources are not accessible.

The analysis is conducted on two levels: the province (differentiating between urban and rural areas) and the district. For datasets that are only available at the provincial level, the results and severity ratings are uniformly applied across all districts within the province, disaggregated by rural and urban where possible.

Roughly two thirds of the indicators come from the REACH Humanitarian Situation Monitoring (HSM). For these indicators, the process begins with using validated clean data to calculate severities for each indicator. This involves either direct computation from individual indicators or the creation of composite variables that contribute to individual indicators. After determining the severities at the interview level, the proportion of these severities are calculated at the area level. This calculation takes into account the weights applied to each interview according to the sampling frame of the assessment.

For WoAA indicators, validated clean data is also utilized to determine the severities. This is done by either directly using the indicators or creating composites. The proportion of severities are then aggregated at the provincial level, differentiating between urban and rural areas. Given that the area scope of NMF analysis is at district level, the results and severity ratings are uniformly applied across all districts within the province.

For other indicators requiring external data, which are mostly available at the district level, severities are calculated based on the thresholds defined in the DAP. These indicators do not have weights applied.

Once all indicators are aggregated at the district level, the final severity for each indicator is assessed using the 25%⁴ rule, assigning a severity score from **1 to 5**.

Sectoral Need:

To calculate sectoral need severity, the 50% worst severity indicators are identified, and a simple average is applied to determine the final sectoral severity.

³ See methodology note (Annex 1)

⁴ 25% was selected after testing thresholds of 10%, 15%, 20%, 25% and 30% on 10,000 simulated datasets with different distributions (uniform, normal and Poisson). These tests compared the NMF's simplified aggregation approach with two aggregation scenarios used during the JIAF 2.0 methodological testing: Scenario A, the reference method for assessing co-occurrence of needs across indicators, and Scenario B, the simplified method aligned with the NMF approach. The 25% threshold produced the same final severity class as Scenario A in 83% of the simulations, demonstrating that the simplified method provides a reasonable approximation of the more complex reference approach. When applying IPC/CH indicators, discrepancies may occur between the JIAF 25% rule and the IPC/CH 20% rule; however, these are resolved either through Step 4 (critical indicators overriding JIAF results) or by entering IPC information as a magnitude-based indicator.

Inter-Sectoral Severity:

After calculating needs severity for each sector, the inter-sectoral severity is determined using the JIAF 2.0 method.

Severity 1: Less than 4 sectors are in stressed or worse conditions.

Severity 2: At least 4 sectors are in Phase 2 (stressed) or worse conditions.

Severity 3: At least 4 sectors are in Phase 3 (crisis) or worse conditions.

Severity 4: At least 4 sectors are in Phase 4 (emergency) or worse conditions.

Severity 5: At least 2 sectors are in Phase 5 (catastrophe) and at least 2 additional sectors are in Phase 4 or worse conditions.

3.2 Population of interest

Given the nation-wide scale, the population of interest in this context includes the whole of the population of Afghanistan, with a specific interest on those facing various levels and types of humanitarian needs.

Geographic area assessed: The geographical area assessed is Afghanistan, which is divided into administrative districts (admin 2) within provinces (admin 1). The assessment focuses on providing a granular overview of needs at the district level, enabling the identification of hotspots and sudden deteriorations in various regions of the country.

Population assessed: The population assessed comprises the inhabitants of the districts in Afghanistan. This includes both rural and urban populations, as disaggregated data sources are considered to ensure comprehensive coverage and understanding of needs across different demographic and geographic settings,

Unit of measurement: The unit of measurement depends on the data source given that there is a multiplicity, with the aim to provide indicative district-level insights into needs and their evolution. Examples of indicators include sectoral indicators (e.g., health, education, food security) and seasonal risk indicators (e.g., drought severity, flood severity). The severity of these indicators is measured based on predefined scales and criteria, allowing for the quantification and comparison of needs and risks across different districts.

The rationale for these choices is to enable a comprehensive and detailed assessment of needs and vulnerabilities across Afghanistan, ensuring that interventions and responses are tailored to the specific contexts and challenges faced by different districts within the country. By focusing on district-level data and indicators, the assessment can capture local nuances and variations in needs, thereby facilitating targeted and effective humanitarian interventions and strategic planning processes.

3.3 Secondary data review

The following resources will be reviewed as part of secondary data review.

Source Name	Intended Use
Integrated Phase Classification	Contextualization of findings
National SMART Survey	Contextualization of findings

Health Resources and Services Availability Monitoring Systems	Support data collection and contextualization of findings
Whole of Afghanistan Assessment	Contextualization of findings
Afghanistan Livelihood Zoning	Contextualization of findings
Basic Service Unit (BSU) Mapping	Identification of most severely affected areas at a sub-district level

3.4 Dissemination

The analysed database was developed through the AAWG and with consultation with the clusters and ICCG. The analysis is intended to be shared firstly within the AAWG membership to allow for a joint technical review and contextualisation. Given the technical competencies of the group, the database itself is considered the right type of output to allow for interrogation and further analysis by the AAWG TWG. After joint endorsement at AAWG level, the NMF findings will be presented at the ICCT and intended to inform HNO/HNRP revisions and reprioritisation.

3.5 Limitations

The NMF, despite its structured approach to assessing humanitarian needs, remains limited by its largely indicative nature and due to data access challenges. These challenges often stem from assessment access constraints that may hinder the timeliness of coverage of the HSM, as well as from its dependence on secondary data sources. Potential delays in data acquisition introduces gaps in coverage and risks the use of outdated information, undermining the current accuracy of needs assessments.

Moreover, the framework's quarterly update cycle may not adequately capture the immediate needs arising from emergencies or acute shocks. Given the indicative nature of needs monitoring, the monitor's findings will benefit from ground truthing to reconcile reported data with actual conditions, enhancing the framework's functionality in prioritization and planning. Despite this, the NMF may still be a crucial signal for hotspot identification and further assessment of identified districts. Ultimately, the NMF's functionality in prioritization remains hindered by its cadence (quarterly) and granularity (district-level of analysis).

Furthermore, it is important to note that the various data sources used in the NMF have different data collection methodologies. For example, HSM indicators are collected from Key Informants (KIs) who are asked about the situation in the entire settlement, rather than individual households. This non-random, purposive sampling limits comparability to standard JIAF indicators, which are ideally based on representative household-level data. Even in cases where representative household surveys are conducted, these surveys often rely on KIs to report on household conditions, which means outcome-level data at the individual household level may not always be available. The use of settlement-level data from KIs introduces additional variability and potential biases, as these methods do not provide the same level of statistical rigor as household surveys.

Additionally, the application of JIAF severity calculation methodology, which is designed for HH data, to settlement-level KI data can result in inconsistencies. Moreover, the reliance on KI estimated population percentages for certain indicators add another layer of complexity and inaccuracy. These methodological

differences and the inherent limitations of each data source necessitate careful interpretation of the NMF findings.

Despite these limitations, ongoing efforts to refine the methodology and enhance the accuracy of the data sources are crucial for improving the framework's reliability and usefulness in prioritization and planning.

4. Key ethical considerations and related risks

The proposed research design meets / does not meet the following criteria:

<i>The proposed research design...</i>	<i>Yes/ No</i>	<i>Details if no (including mitigation)</i>
... Has been coordinated with relevant stakeholders to avoid unnecessary duplication of data collection efforts?	Yes	
... Respects respondents, their rights and dignity (<i>specifically by: seeking informed consent, designing length of survey/ discussion while being considerate of participants' time, ensuring accurate reporting of information provided</i>)?	N/A	No primary data collection
... Does not expose data collectors to any risks as a direct result of participation in data collection?	N/A	No primary data collection
... Does not expose respondents / their communities to any risks as a direct result of participation in data collection?	N/A	No primary data collection
... Does not involve collecting information on specific topics which may be stressful and/ or re-traumatising for research participants (both respondents and data collectors)?	N/A	No primary data collection
... Does not involve data collection with minors i.e. anyone less than 18 years old?	N/A	No primary data collection
... Does not involve data collection with other vulnerable groups e.g. persons with disabilities, victims/ survivors of protection incidents, etc.?	N/A	No primary data collection
... Follows IMPACT SOPs for management of personally identifiable information ?	Yes	

5. Roles and responsibilities

Table 3: Description of roles and responsibilities

Task Description	Responsible	Accountable	Consulted	Informed
Research design	AO	DRM	RM, AAWG	AAWG
Supervising data collection	N/A			
Data processing (checking, cleaning)	DBO	AO	SAO / Data specialist	
Data analysis	DBO	AO	SAO / Data specialist	
Output production	AO	AO	SAO	
Dissemination	AO	DRM	AAWG	
Monitoring & Evaluation	AO	PDO	SAO	
Lessons learned	AO	AO	DRM, RM, AAWG	

Responsible: the person(s) who executes the task

Accountable: the person who validates the completion of the task and is accountable of the final output or milestone

Consulted: the person(s) who must be consulted when the task is implemented

Informed: the person(s) who need to be informed when the task is completed

6. Data Analysis Plan

For those indicators that come from HSM, the HSM DAP is also available on request for further information on how the questions are coded.

#	Sector	Indicator name	Data Source	Granularity	1. None/Minimal	2. Stress	3. Severe	4. Extreme	5. Catastrophic
1	EDU	% settlements where KIs reporting on boys in the settlement currently attending school or % settlements where KIs reporting on girls in the settlement currently attending school	HSM	District	Almost all/all children (76 - 100%)	No criteria	Many children (51 - 75%)	Some children (26 - 50%) or Few children (1 - 25%)	No children (0%)
2	FSC	% settlements where KIs reporting on food insufficiency in the settlement in the past 30 days	HSM	District	Nobody or almost nobody (around 0%)	a few (around 1 in 4 people or 25%)	About half (around 2 in 4 people or 50%)	Most (around 3 in 4 people or 75%)	All or almost all (around 4 in 4 people or 100%)
3	FSC	% settlements where KIs reporting the proportion of households doing unusual things to obtain food in the past 30 days	HSM	District	Nobody or almost nobody (around 0%)	a few (around 1 in 4 people or 25%)	About half (around 2 in 4 people or 50%)	Most (around 3 in 4 people or 75%)	All or almost all (around 4 in 4 people or 100%)
4	FSC	% of settlements where KIs report a sudden increase in food item prices	HSM	District	No change or decreased	Increased a little	Increased a lot	No criteria	No criteria
5	HEA	% settlements where KIs reporting if the households have access to adequate healthcare, they need	HSM	District	≥85%	60–84%	30–59%	10–29%	<10%
6	HEA	% settlements where KIs reporting on the availability of any health centre providing maternity services	HSM	District	Public Health Facility, private clinic/Doctor, Mobile Health Team services	Traditional birth attendants/Traditional Healer	At home	No criteria	No criteria

7	HEA	% settlements where KIs reporting the average time for accessing the nearest functional health facility	HSM	District	<30 minutes	< 1 hour	< 3 hours	More than 3 hours	No criteria
8	PRO	% of settlements where KIs reporting on children's access constraints due to safety concerns	HSM	District	None	Community / religious spaces; Public transportation	Markets; Pathways to services; Aid distribution areas	Water points; Collecting firewoods	Latrines / bathing facilities; Homes
9	WSH/ FSC	% of settlements where the majority of KIs reported about the population with very limited access to water for drinking and cooking as reported by the KI in the communities	HSM	District	Nobody or almost nobody (around 0%)	a few (around 1 in 4 people or 25%)	About half (around 2 in 4 people or 50%)	Most (around 3 in 4 people or 75%)	All or almost all (around 4 in 4 people or 100%)
10	WSH / FSC	% of settlement by main source of drinking water for most people	HSM	District	Water comes from an improved source (Protected from outside contamination (improved water source), for example: piped water/tap, covered dug well, pumped well/borehole, tanker truck/carts with	No criteria	Water comes from an unimproved source (Not-protected from outside contamination (for example: unprotected well, traditional dug well, unprotected natural spring, etc)	No criteria	Surface water, for example: river, dam, lake, pond, stream, canal, irrigation system, etc.

					tank/store, bottled water, water bags, protected rainwater, etc.)				
11	WSH	% settlements where KIs reporting the average time to the main water source	HSM	District	Less than 5 minutes Between 5 and 30 minutes	No criteria	Between 30 minutes and 1 hour	More than 1 hour	No criteria
12	WSH	% of settlements where KIs report the majority of households have access to a functional and improved sanitation facility	HSM	District	Everyone or almost everyone (around 100%)	Most (around 3 in 4 people or 75%)	About half (around 2 in 4 people or 50%)	A few (around 1 in 4 people or 25%)	Nobody or almost nobody (around 0%)
13	HEA	% settlements where KIs reporting on access to trauma care within 24 hours	HSM	Area	>=90%	80-89%	70-79%	60-69%	<=59%
14	PRO	% of settlements where KIs reporting on prevalence of child labour among households	HSM	District	None	Domestic chores; Animal care	Agriculture	Markets / street; Construction	Mining
15	PRO	% of settlements where KIs reporting on presence of explosive ordnance contamination affecting the [community]	HSM	District	No major impact	Fear / psychological distress	Restricted movement; Limited access to water or services	Limited access to farmland; Displacement or relocation	Injuries or deaths
16	FSC	% of settlements where KIs reporting on the perceived level of hunger among the households	HSM	District	No hunger	Little hunger	Moderate hunger	Severe hunger	Extreme hunger

17	FSC	% settlements where KIs reporting a sudden drop in the number of livestock in the past 30 days	HSM	District	Number of livestock is normal or almost normal for this time of the year	Number of livestock reduced by less than half	Number of livestock is about half of what's normal for this time of the year	Number of livestock reduced by more than half	All livestock were lost
18	FSC	% settlements where KIs report that, for the majority of people in the settlement, crop yield from the last harvest decreased compared with the previous harvest of the same crops	HSM	District	Much more than previous harvest OR A bit more	About the same OR A bit less	Much less than previous harvest	No criteria	No harvest at all / all harvest were lost
19	NUT / HEA	Prevalence of Global Acute Malnutrition among nutrition and health community malnutrition screening data	SMART	District	<5%	5% - 9.9%	10% - 14.9%	≥15	No criteria

20	PRO	% of Households with a vulnerable Head of Household (elderly (>65) or HoH with a disability)	WoAA		0%	1%-4%	5%-9%%	10% and above	No criteria
21	HEA	Measles Coverage (< 2 years old)	DHIS2	District	>95%	80% - 94.9%	65% - 79.9%	50% - 64.9%	0-49.9%
22	HEA	PENTA3 Coverage in <1 year old)	DHIS2	District	>95%	80% - 94.9%	65% - 79.9%	50% - 64.9%	0-49.9%
23	NUT / HEA	Under-five Death/Mortality Rate (deaths/ 10,000 children U5/ day)	DHIS2	District		<1	1-1.9	2-3.9	≥4
24	EDU	% of settlements where KIs report the types of schools attended by the majority of school-age children.	HSM	District	Government/public school Or Private schools	Community-based education (CBE) / Community learning center	Madrassa . religious school Or informal or vocational education center	Home-based learning Or Online/distance learning	None – school-age children are not currently attending any type of school
25	PRO	% of settlements where KIs reporting on access to civil documentation among households in the [community]	HSM	District	Everyone or almost everyone (around 100%)	Most (around 3 in 4 people or 75%)	About half (around 2 in 4 people or 50%)	A few (around 1 in 4 people or 25%)	Nobody or almost nobody (around 0%)
26	PRO	% of settlements where KIs reporting on Women lacking	HSM	District	Everyone or almost everyone	Most (around 3 in	About half (around 2 in 4 people or 50%)	A few (around 1 in 4 people or 25%)	Nobody or almost nobody (around 0%)

		civil documentation in the [community]			(around 100%)	4 people or 75%)			
27	FCS/WASH	% of settlements where the majority of KIs reported their settlements do not have access to sufficient quantity of water for drinking, cooking, bathing, washing or other domestic use	HSM	District	Yes, water has been sufficient	Rarely (1-2 days)	Sometimes (3-10 days)	Often (11-20 days)	Always (more than 20 days)
28	PRO	% of settlements where KIs reporting on Availability of protection support services in the [community]	HSM	District	Yes, support from government; Yes, support from an International NGO; Yes, support from local NGO; Yes, from an active health center	Yes, support from local doctor or nurse; Yes, support from a community or religious leader	Yes, support from religious group; Yes, but not sure which one	No, not aware of any accessible services in this area	No criteria
29	PRO	% of settlements where KIs reporting on availability of soap in the market	HSM	District	Yes – soap is generally available	No criteria	Limited access to soap	No access to soap	No criteria
30	EDU	% of settlements where KI reporting the education of school aged boys/girls disrupted by type of events	HSM	District	No barriers	No criteria	1 or more barriers identified	No criteria	No criteria
31	PRO	% of settlements where KIs reporting on Availability of mental health and psychosocial support	HSM	District	Yes, support from government; Yes, support from an	Yes, support from local doctor or nurse; Yes, support from	Yes, support from religious group; Yes, but not sure which one	No, not aware of any accessible services in this area	No criteria

		(MHPSS) services in the [community]			International NGO; Yes, support from local NGO; Yes, from an active health center	a community or religious leader			
32	PRO	% settlements where KIs report main safety or protection concern	HSM	District	No safety concerns	Insult - verbal aggression Presence of wild animals (e.g., snakes, wolves)	Physical violence, Looting, Forced eviction, Denial of access to basic services due to cultural or any reasons	Family separation	Aduction

7. Data Management Plan

Data protection risk assessment					
Have you completed the Indicators Risk Assessment table below?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	No, no information that potentially allows identification of individuals is to be collected.	
[Please complete the first 4 columns in the Indicators Risk Assessment table below]					
Risk indicator	Type of identification risk	Disclosure implications	Benefits	Class	Required mitigation
<i>[Specify indicator, e.g. KI_phone number]</i>	<i>[Specify identification risk, e.g. Direct contact/identification of KI]</i>	<i>[Specify implications, e.g. loss of privacy/potential target of armed actors]</i>	<i>[Specify benefits, e.g. follow up for data cleaning]</i>	<i>[To be completed by IMPACT HQ]</i>	<i>[To be specified by IMPACT HQ]</i>
<i>[Add relevant number of rows for risk indicators]</i>					

8. Monitoring & Evaluation Plan

IMPACT Objective	External M&E Indicator	Internal M&E Indicator	Focal point	Tool	Will indicator be tracked?
Humanitarian stakeholders are accessing IMPACT products	Number of humanitarian organisations accessing IMPACT services/products Number of individuals accessing IMPACT services/products	# of downloads of x product from Resource Center	Country request to HQ	User_log	<input type="checkbox"/> Yes
		# of downloads of x product from Relief Web	Country request to HQ		<input type="checkbox"/> Yes
		# of downloads of x product from Country level platforms	Country team		<input type="checkbox"/> Yes
		# of page clicks on x product from REACH global newsletter	Country request to HQ		<input type="checkbox"/> Yes
		# of page clicks on x product from country newsletter, sendingBlue, bit.ly	Country team		<input type="checkbox"/> Yes
		# of visits to x webmap/x dashboard	Country request to HQ		<input checked="" type="checkbox"/> Yes
IMPACT activities contribute to better program implementation and coordination of the humanitarian response	Number of humanitarian organisations utilizing IMPACT services/products	# references in HPC documents (HNO, SRP, Flash appeals, Cluster/sector strategies)	Country team	Reference_log	<i>HNO, quarterly prioritization exercises (AAWG), cluster and ICCT strategies.</i> [QFSM – primarily food cluster / WFP]
		# references in single agency documents			

Humanitarian stakeholders are using IMPACT products	Humanitarian actors use IMPACT evidence/products as a basis for decision making, aid planning and delivery	Perceived relevance of IMPACT country-programs	Country team	Usage_Feedback and Usage_Survey template	<i>Usage will be iteratively monitored through feedback via the AAWG and the ICCT.</i>	
		Perceived usefulness and influence of IMPACT outputs				
		Recommendations to strengthen IMPACT programs				
		Perceived capacity of IMPACT staff				
		Perceived quality of outputs/programs				
Humanitarian stakeholders are engaged in IMPACT programs throughout the research cycle	Number of humanitarian documents (HNO, HRP, cluster/agency strategic plans, etc.) directly informed by IMPACT products	Recommendations to strengthen IMPACT programs	Country team	Engagement_log	<input type="checkbox"/> Yes X Yes X Yes	
		Number and/or percentage of humanitarian organizations directly contributing to IMPACT programs (<i>providing resources, participating to presentations, etc.</i>)				# of organisations providing resources (i.e.staff, vehicles, meeting space, budget, etc.) for activity implementation
		# of organisations/clusters inputting in research design and joint analysis				# of organisations/clusters attending briefings on findings;

ANNEX

ANNEX 1: QUARTERLY FOOD SECURITY MONITORING METHODOLOGY NOTE

ANNEX 2: NEEDS MONITORING FRAMEWORK DAP