

Research Terms of Reference

NEEDS MONITORING FRAMEWORK

AFG2404

Afghanistan

May 2024

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 (6 th): 01/02/2024 - 01/03/2024 Ongoing on a quarterly basis		
Research Timeframe <i>Add planned deadlines (for first cycle if more than 1)</i>	1. Start data consolidation: 01/03/2024	4. Data/Analysis sent for analysis: 02/04/2024	
	2. Data collected: 28/03/2024	5. Outputs (dashboard) sent for validation: 10/05/2024	
	3. Data analysed: 30/03/2024	6. Outputs published: 30/05/2024	
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 type="checkbox"/> Donor plan/strategy	Quarterly	
	<input 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. 	

	<ul style="list-style-type: none"> 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"> What is the current severity of multi-sectoral and sectoral needs at the district level? What are the trends in the severity of these needs over time? 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 			
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"/>	Profile #: _ _	<input type="checkbox"/>	

	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 and BHA					
	Coordination Framework: Assessment and Analysis Working Group (AAWG)					
	Partners: AAWG					

2. Rationale

2.1 Background

In 2022, Afghanistan encountered a series of challenges including heightened conflict, political instability, economic crisis, natural disasters, and the ongoing COVID-19 pandemic. According to the [2023 Humanitarian Response Plan](#), these factors led to a significant rise in the number of people requiring life-saving assistance, increasing from 18.4 million in 2021 to 24.4 million in 2022, and further to 28.3 million in 2023, with 23.7 million individuals targeted for multi-sector assistance. Localized disasters like earthquakes and flash floods exacerbated the already alarming levels of multi-sectoral needs, overwhelming existing humanitarian assessments. To address this, a mid-year iteration of REACH's [Whole of Afghanistan Assessment](#) (WoAA) was conducted in Spring 2022 to guide adjustments in humanitarian programming. However, the current nationwide needs analysis may not fully capture the localized impact of such shocks. In response, the Inter-Cluster Coordination Team (ICCT) initiated quarterly prioritization exercises to identify the most in-need districts for each season, though challenges remain, including outdated data sources and a lack of a unified framework for needs analysis.

These evolving circumstances have necessitated a shift in the approach to humanitarian planning and response, underscoring the limitations of the annual Humanitarian Planning Cycle (HPC) which relies on provincial-level assessments. To bridge this gap, the Assessment and Analysis Working Group (AAWG) has introduced the Needs Monitoring Framework (NMF), a strategic initiative aimed at providing quarterly, district-level insights into multisectoral needs using existing data sources. This framework is designed to complement the annual Joint Intersectoral Assessment Framework (JIAF), enhancing the ability of humanitarian organizations to respond to the nuanced and shifting landscape of needs within Afghanistan.

Efforts to improve coordination and data sharing among humanitarian actors through the Analysis and Assessment Working Group (AAWG) have been made. However, policy-related barriers hinder the ability to conduct effective assessments despite increased operational space following reduced conflict in August 2021. Given this dynamic landscape and operational constraints, leveraging existing assessments and monitoring systems is crucial to ensure regular and comprehensive monitoring of humanitarian needs across Afghanistan.

Collective action and coordination among stakeholders are essential to address challenges and enhance the effectiveness of humanitarian response efforts.

Building on the success of pilot findings and the roll-out of JIAF 2.0, the NMF will be relaunched as of 2024, with the concurrent reanimation of the AAWG. Although delayed due to capacity constraints, the information gaps within the humanitarian architecture remain largely comparable and, as such, the NMF still has the capacity to fill urgent analytical needs.

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 districts¹.

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 repositioning 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.

¹ For more detailed information, refer to the QFSM methodology note in the annex.

- **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.

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 Monitor – which focuses on food security and its pillars².

The intersectoral severity levels are calculated in the same way as the preliminary intersectoral severity outlined in the [JIAF 2 technical manual](#). This methodology combines severity scores from multiple sectors to provide an aggregated intersectoral severity level for each district. This method ensures consistency with global standards and comparability with the Afghanistan HNRP to identify areas with the highest severity of humanitarian need across multiple sectors, informing targeted interventions and effective resource allocation.

The intersectoral severity is assigned according to the rules in Figure 1 below.

Figure 1: Preliminary Intersectoral Severity Classification in the JIAF 2 Technical Manual

Phase 1: Less than 4 sectors in stressed or worse
Phase 2: At least 4 sectors in Phase 2 or worse
Phase 3: At least 4 sectors in Phase 3 or worse
Phase 4: At least 4 sectors in Phase 4 or worse
Phase 5: At least 2 sectors in Phase 5 and at least 2 other sectors in Phase 4 or worse

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

² See methodology note (Annex 1)

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 disaggregated at the district level, the final severity of indicators is assessed based on the 25% rule³.

The final aggregation of data adheres to the [JIAF methodology and framework](#). This involves assessing the severity of individual indicators based on the 25% of the population experiencing the highest severity, applicable to household or settlement-based indicators. The overall severity score is then calculated as the rounded average of the 50% most severe indicators, ensuring a comprehensive and nuanced understanding of the situation across different regions.

Following the publication of the JIAF 2.0, indicators and thresholds were revised in Dec 2023 to ensure continued operability with the framework.

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 of 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.

³ 25% was selected after testing thresholds of 10%, 15%, 20%, 25% and 30% on 10,000 simulated datasets with different distributions (uniform distributions, normal distributions and Poisson distributions). The 25% threshold was most likely to yield the same final result (overall area-level severity class) as the ones obtained from the scenario A aggregation method (same in 83% of the 10,000 comparisons). This demonstrates that scenario B proposed aggregation method is able to estimate the co-occurrence of needs to some extent. When using IPC/CH, there could be a discrepancy between the severity class derived using the JIAF 25% rule and the one derived from the IPC/ CH rule (20%). However, this will be addressed either in Step 4 (critical indicators' severity overrides JIAF one) or by entering IPC information as Magnitude-based indicator.

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.

By the end of Q2 2024, the intention is to also provide an NMF layer to the existing SMI dashboard. The dashboard will be submitted for approval on piloting. By having both elements layered, the intention is to provide a foundation for a comprehensive real-time monitoring system.

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 NMF have different data collection methodologies. For example, HSM indicators are based on non-randomly and purposively sampled settlements. This non-randomly sampling limits their comparability to actual JIAF indicators, which are based on representative household data. The use of settlement-level data from Kis for some indicators introduces additional variability and potential biases, as these methods do not provide the same level of statistical rigor as HH 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-	N/A	No primary data collection

traumatising for research participants (both respondents and data collectors)?		
... 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
<i>Research design</i>	AO	SAO		
<i>Supervising data collection</i>	N/A			
<i>Data processing (checking, cleaning)</i>	DBO	AO	SAO / Data specialist	
<i>Data analysis</i>	DBO	AO	SAO / Data specialist	
<i>Output production</i>	AO	SAO	SAO	
<i>Dissemination</i>	AO	SAO		
<i>Monitoring & Evaluation</i>	AO	SAO	SAO	
<i>Lessons learned</i>	AO	SAO	SAO	

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	CROSS	% of settlements by proportion of households that currently have debt ⁴	HSM	District	No households (0%) OR few households (1% - 25%) currently have debt	Some households (26 - 50%) currently have debt	Many households (51 - 75%) currently have debt	Almost all / all households (76 - 100%) currently have debt	No criteria
2	CROSS	% of settlements where most households are without access to essential services (including health, education, markets, and improved water sources)	HSM	District	Most households have access to all essential services	Most households do not have access to at least one essential service	Most households do not have access to at least 2 essential services	Most households do not have access to at least 3 essential services	Most households do not have access to at all 4 essential services
3	EDU	% of settlements by proportion of school-aged children attending formal schooling at least 4 days a week in the past six months	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%)
4	CROSS	% of settlements by proportion of households with school-aged boys and girls engaging in employment outside of their home	HSM	District	No households (0%), few households (1 - 25%) OR Some households (25% - 50%)	No criteria	Some households (26 - 50%) or Many households (51 - 75%) OR Almost all / all households (75 - 100%)	No criteria	No criteria
5	PRO	% of settlements where early marriage was reported	HSM	District	0%	No criteria	1 - 25%	26 - 50%	51 - 100%
6	FSC	% of settlements by proportion of households with sufficient access to food to meet minimum daily needs	HSM	District	Almost all / all households (76 - 100%)	Many households (51 - 75%)	Some households (26 - 50%)	Few households (1 - 25%)	No households (0%)

⁴ “% of settlements” refers specifically to the percentage of settlement that were assessed, rather than percentage of all existing settlements in the assessed areas.

7	FSC	% of settlements by type of livelihood coping strategies used	HSM	District	Not adopting coping strategies	Stress coping strategies	Crisis coping strategies	Emergency coping strategies	No criteria
8	FSC	% of settlements where KIs report an increase in staple food prices	HSM	District	No change or decreased	Increased a little	Moderately increased	Increased a lot	No criteria
9	HEA	% of settlements with functional health facilities	HSM	District	Most households have access to a health center with no or limited systemic issues	No criteria	Most households have access to a health center with significant systemic issues	Most households do not have access to a health center	No criteria
10	HEA	% of settlements by location where most women give birth	HSM	District	In a hospital, public clinic/health facility, private clinic or using Mobile Health Team services	In a local midwife home	At home	No criteria	No criteria
11	HEA	% of settlements by reported distance to the nearest health facility for most households	HSM	District	<30 minutes	< 1 hour	< 3 hours	More than 3 hours	No criteria
12	PRO	% of settlements with one or more households experiencing a protection incident in the last 3 months	HSM	District	<20%	21%-30%	31%- 40%	41%-50%	> 50%
13	PRO	% of settlements where the most common tenancy agreements reported among households is owning or renting a shelter or being hosted for free or squatting a shelter	HSM	District	Ownership or rented or hosted for free	No criteria	No occupancy agreement (squatting)	No Criteria	No criteria
14	PRO	% of household members have valid civil documentation (tazkira, etc.)	HSM	District	Almost all/all households (76 - 100%)	Many households (51 - 75%)	Some households (26 - 50%)	No households (0%), or Few	No criteria

								households (1 - 25%)	
15	SHL	% of settlements where the majority of households have access to a safe and healthy housing enclosure unit (combination of type of shelter and shelter defects) - <i>Shelter issue and type classifications developed from Global Shelter Cluster guidance.</i>	HSM	District	Minimal	Stress	Severe	Extreme	Catastrophic
16	SHL	% of settlements by proportion of shelters that have been reportedly severely damaged or fully destroyed, and % of settlements where the shelter leaks during light or heavy rain is among the top 3 shelter concerns for most households	HSM	District	No damaged shelter	No damaged shelter AND Leaks during heavy or light rain	Few shelters (1 - 25%) or Some shelters (26 - 50%)	Many shelters (51 - 75%)	Almost all / all shelters (76 - 100%)
17	SHL	% of settlements where households are reported in need of NFIs (Refer to number of items most households in settlement have access to)	HSM	District	Most households with all 5 NFIs	Most households with 4 out of 5 NFIs	Most households with 3 out of 5 NFIs	Most households with 2 out of 5 NFIs	Most households with 0 to 1 NFIs
18	WSH	% of settlements by reported proportion of households with access to functioning hand-washing facilities with water and soap	HSM	District	Almost all / all households (75 - 100%)	Many households (51 - 75%)	Some households (26 - 50%)	Few households (1 - 25%)	No households (0%)

19	WSH / HEA / FSC	% of settlements where the majority of households reportedly do not have access to a sufficient quality and quantity of water for drinking, cooking, bathing, washing or other domestic use AND % of settlement by main source of drinking water for most people	HSM	District	Water comes from an improved source of acceptable Sphere standards quality AND most households have enough water for all uses	No criteria	Water comes from an improved source of acceptable Sphere standards quality AND most households do NOT have enough water for all uses	Water comes from an unimproved water source	Water comes directly from rivers, lakes, ponds
20	WSH / HEA	% of settlements where the majority of households reportedly have access to a functional and improved sanitation facility AND % of settlements where most households have official permission to build and/or settle (formal settlement)	HSM	District	The majority of households use an improved sanitation facility	No criteria	The majority of households DOES NOT use an improved sanitation facility and settlement IS NOT an informal settlement	The majority of households DOES NOT use an improved sanitation facility and settlement IS an informal settlement	The majority of households practice open defecation
21	PRO	% of settlements reported with areas that women and girls avoid because they feel unsafe	HSM	District	Women and girls do not avoid areas	Women and girls feel unsafe in one area	Women and girls feel unsafe in two areas	Women and girls feel unsafe in three areas	Women and girls feel unsafe in four or more areas
22	WSH	% of settlements where the water points or sanitation facilities are avoided by women for safety reasons	HSM	District	<10%	10-15%	15-20%	20-25%	>25%
23	HEA / GBV	% of settlements where most households have access to trauma care within 24 hours of an emergency/injury	HSM	District	>=90%	80-89%	70-79%	60-69%	<=59%

24	EDU	% of settlements reporting barriers to a learn in acceptable conditions, per barrier type	HSM	District	No barrier: if nothing is identified as a barrier	No criteria	1 or more barriers: if any barrier is identified, it is severe	No criteria	No criteria
25	PRO	% of settlements were the presence of ANY explosive hazards (mines, ERWs, PPIEDs) is reported in or near (<5km) of settlement	HSM	District	<5%	5 - 12%	13 - 24%	25 - 49%	50 - 100%
26	FSC	% of settlements by reported hunger levels for most households	HSM	District	No hunger or almost no hunger - the majority of households had access to food everyday over the last 30 days	Hunger is minor - most households have only RARELY no access to food (during the last 30 days, most households had no access to food during a maximum of 2 days in total)	Hunger is moderate - most households have SOMETIMES no access to food (during the last 30 days, most households had no access to food during 3 to 10 days in total)	Hunger is severe - most households have OFTEN no access to food (during the last 30 days, most households had no access to food during more than 10 days in total)	No Criteria
27	FSC	% of settlements with households involuntarily moving due to lack of food	HSM	District	No household involuntarily moved from the settlement	Few households (1-25%) involuntarily moved from the settlement	Some households (26-50%) or many households (51 - 75%) involuntarily moved from the settlement for not related to lack of food	Some households (26-50%) or many households (51 - 75%) involuntarily moved from the settlement due to lack of food	Almost all / all households (76 - 100%) involuntarily moved from the settlement

28	FSC	% of settlements with households engaging in negative behaviors due to a lack of food	HSM	District	Not engaging in negative behaviors	Engaging in first-level negative behaviors: <ul style="list-style-type: none"> - Rely on less preferred and less expensive foods, and/or - Limit portion size at meal times, and/or - Reduce number of meals eaten in a day 	Engaging in second-level negative behaviors: <ul style="list-style-type: none"> - Restrict consumption by adults in order for small children to eat 	Engaging in third-level negative behaviors: <ul style="list-style-type: none"> - Skip entire days without eating 	No Criteria
29	CROSS / HEA	% of households with at least one member with a disability	WoAA	District	Less than 5%	5-10%	10-15%	15-20%	20%+

30	PRO	% of households with a vulnerable Head of Household (elderly (>65) or HoHH with a disability)	WoAA	District	0%	1%-4%	5%-9%%	10% and above	No criteria
31	HEA	Measles Coverage (< 2 years old)	DHIS2	District	100% +	80% - 99.9%	70% - 79.9%	50% - 69.9%	0-49.9%
32	HEA	PENTA3 Coverage in <1 year old	DHIS2	District	100% +	80% - 99.9%	70% - 79.9%	50% - 69.9%	0-49.9%
33	NUT	Under-five Death/Mortality Rate (deaths/ 10,000 children U5/ day)	SMART	District			>2	>4	>10
34	NUT / HEA	Prevalence of Global Acute Malnutrition among nutrition and health facility malnutrition screening data	SMART	District	<5%	5 - 9.9%	10 – 14.9%	15 – 29.9%	>30%
35	PRO	# of civilian casualties from mines, including VOIEDs and ERWs, in 2020 and 2021	DMAC	District	Below 25	25-49	50-99	100-199	200-400
36	WSH	% of children under 5 reported to experience AWD in the past two weeks	WoAA	District	0-9%	10-19%	20-39%	39-55%	>55%
37	NUT / HEA	% of Children 6-23 months with minimum acceptable diet	WoAA	District	≥70%	40-70%	20-40%	10-20%	<10%

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 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 1: QUARTERLY FOOD SECURITY MONITORING METHODOLOGY NOTE