Research Terms of Reference

NEEDS MONITORING FRAMEWORK

AFG2404

Afghanistan

March 2025
V1

1. Executive Summary

Country of intervention	Afghanistan					
Type of Emergency	x	Natural disaster	□	Conflict	□	Other *(specify)*
Type of Crisis	x	Sudden onset	□	Slow onset	□	Protracted
Mandating Body/ Agency	*OCHA - Inter-Cluster Coordination Team / WFP*					
IMPACT Project Code	*AFG2404*					
Overall Research Timeframe *(from research design to final outputs / M&E)*	Pilot: 01/11/2022 - 15/12/2022 This Round (7th): 16/02/2025 - 16/03/2025 Ongoing on a quarterly basis					
Research Timeframe *Add planned deadlines (for first cycle if more than 1)*	1. Start data consolidation: 16/02/2025			4. Data/Analysis sent for analysis: 15/03/2025		
	2. Data collected: 16/02/2025			5. Outputs (dashboard) sent for validation: 21/03/2025		
	3. Data analysed: 17/03/2025			6. Outputs published: 25/03/2025		
Number of assessments	□	Single assessment (one cycle)				
	x	Multi assessment (more than one cycle) One cycle per quarterly prioritization exercised				
Humanitarian milestones *Specify **what** will the assessment inform and **when** e.g. The shelter cluster will use this data to draft its Revised Flash Appeal;*	**Milestone**			**Deadline**		
	□	Donor plan/strategy		Quarterly		
	□	Inter-cluster plan/strategy		Quarterly searsonal re-prioritisation for HPC and IPPC		
	□	Cluster plan/strategy		_ _/_ _/_ _ _ _		
	□	NGO platform plan/strategy		WFP - Quarterly		
	□	Other (Specify):		_ _/_ _/_ _ _ _		

Audience Type & Dissemination *Specify **who** will the assessment inform and **how** you will disseminate to inform the audience*	**Audience type** x Strategic x Programmatic □ Operational □ [Other, Specify]	**Dissemination** x General Product Mailing (e.g. mail to NGO consortium; HCT participants; Donors) x Cluster Mailing and presentation of findings at next cluster meeting x Presentation of findings (e.g. at AAWG and ICCT meetings) □ Website Dissemination (Relief Web & REACH Resource Centre) □ [Other, Specify]
Detailed dissemination plan required	□ Yes	x No
General Objective	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.
Specific Objective(s)	• 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	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	• 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) *Select all that apply*	X	IDPs in camp	X	IDPs in informal sites	
	X	IDPs in host communities	□	IDPs [Other, Specify]	
	X	Refugees in camp	X	Refugees in informal sites	
	X	Refugees in host communities	□	Refugees [Other, Specify]	
	X	Host communities	□	[Other, Specify]	
Data collection tool(s)	X	Structured (Quantitative)	□	Semi-structured (Qualitative)	
	Sampling method		**Data collection method**		
Structured data collection tool # 1 *Select sampling and data collection method and specify target # interviews*	□ Purposive □ Probability / Simple random □ Probability / Stratified simple random □ Probability / Cluster sampling □ Probability / Stratified cluster sampling X No primary data collection		□ Key informant interview (Target #):_ □ Group discussion (Target #):_ _ _ _ _ □ Household interview (Target #):_ _ _ □ Individual interview (Target #):_ _ _ □ Direct observations (Target #):_ _ _ X No primary data collection		
Data management platform(s)	X	IMPACT	□	UNHCR	
	□	[Other, Specify]			
Expected ouput type(s)	□	Situation overview #: _ _	□	Report #: _ _	□ Profile #: _ _

	X	Presentation (Preliminary findings) #: _ _	□	Presentation (Final) #: _ _	□	Factsheet #: _ _
	X	Interactive dashboard #: Intended 06/2024	□	Webmap #: _ _	X	Map
	□	[Other, Specify] #: _ _				
Access	x	Public (available on REACH resource center and other humanitarian platforms)				
	□	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

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 nation-wide 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 2025, 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 districts[1]. Additionally, the Acute Needs Framework (ANF) will be integrated into the Humanitarian Situation Monitoring (HSM) to facilitate quarterly monitoring of acute needs within districts. This approach will help identify areas of interdependent severity by leveraging existing data sources to enable targeted humanitarian prioritization and response, while also allowing for the regular identification of granular hot spots where specific factors contribute to severe life-threatening outcomes.[2]

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. In addition to QFSM, the Acute Needs Framework (ANF) aims to capture, with greater granularity, hotspots of concern that may trigger a response scale-up in affected settlements and nearby areas. It focuses on identifying factors that could potentially drive life-threatening outcomes, leading to excess mortality. The QFSM methodology note is published separately and the ANF analytical framework is annexed to this ToR. The ANF was developed in consultation with the Assessment and Analysis Working Group (AAWG) and directly feeds into the AAWG's trigger mechanism (available on request).

[1] For more detailed information, refer to the QFSM methodology note in the annex.
[2] For more detailed information, refer to the ANF methodology note in the annex.

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.

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 pillars[3].

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.

[3] See methodology note (Annex 1)

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% rule[4].

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.

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.

[4] 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.

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 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:

The proposed research design…	***Yes/ No***	***Details if no (including mitigation)***
… Has been coordinated with relevant stakeholders to **avoid unnecessary duplication** of data collection efforts?	Yes	
… **Respects respondents, their rights and dignity** (*specifically by: seeking informed consent, designing length of survey/ discussion while being considerate of participants' time, ensuring accurate reporting of information provided*)?	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*	*SAO*		
Supervising data collection	N/A			
Data processing (checking, cleaning)	DBO	AO	*SAO* / Data specialist	
Data analysis	DBO	AO	*SAO* / Data specialist	
Output production	AO	*SAO*	SAO	
Dissemination	AO	*SAO*		
Monitoring & Evaluation	AO	SAO	SAO	
Lessons learned	*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	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	PRO	% of settlements where early marriage was reported as a coping mechanism within 3 months of data collection	HSM	District	0%	No criteria	1 - 25%	26 - 50%	51 - 100%
3	FSC	% settlements where KIs reporting on food insufficiency in the settlement in the past 30 days	HSM	District	Nobody or almost noboby (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	% settlements where KIs reporting the proportion of households doing unusual things to obtain food in the past 30 days	HSM	District	Nobody or almost noboby (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%)
5	FSC	% of settlements where KIs report an sudden increase in food item prices	HSM	District	No change or decreased	Increased a little	Increased a lot	No criteria	No critera
6	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%

7	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
8	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
9	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) Harassement or intimidation	Physical violence Looting Forced eviction Discrimination (including denial of access to basic services due to any reason)	Sexual and gender-based violence Family separation	Abduction Forced recruitment
10	PRO/ SHL	% of settlements where the most common tenancy agreements among households is owning or renting a shelter or being hosted for free or squatting a shelter	HSM	District	Ownership with document Rented (written document)	Ownership without document Rented (verbal)	Hosted for free	No occupancy agreement (squatting)	No criteria
11	PRO	% settlements where KIs reporting the proportion of households with at least one member have valid civil documentation	HSM	Area	Almost all/all households (76 - 100%)	Many households (51 - 75%)	Nobody or almost nobody (around 0%) A few (around 1 in 4 people or 25%)	No criteria	No criteria
12	SHL	% settlements where KIs reporting the type of shelter that the majority of people live in	HSM	District	Permanent shelter (Fired/Burnt Brick or Stone or Concrete masonry walling with cement-sand mortar)	Transitional shelter (with Pakhsa, sun-dried breaks Transitional shelter	Unfinished / non-enclosed building Collective shelter	Collective shelter, Tent	Makeshift shelter OR None (sleeping in open)

					Permanent shelter (with sun-dried breaks and mud walls) Permanent apartment (high-rise))	(Stone, fired/burnt break)			
13	SHL	Which of the following responses best describes the current level of building damage or destruction in the settlement?	HSM	District	No damage	Moderate (some buildings are unusable)	Severe (many buildings are unusable)	Extreme (almost all buildings are unusable)	No criteria
14	SHL	% of settlements where households are in need of NFIs (Refer to number of items most households in settlement have access to)	HSM	District	Most households with 5 out of 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
15	WSH/ FSC	% of settlements where the majority of Kis reported their settlements do not have access to suffcient 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)
16	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	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.

					truck/carts with tank/store, bottled water, water bags, protected rainwater, etc.)				
17	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
18	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%)
19	WSH	% settlements where KIs reporting women are not allowed to access water sources alone	HSM	Area	<10%	10-15%	15-20%	20-25%	>25%
20	HEA	% settlements where KIs reporting on access to trauma care within 24 hours	HSM	Area	>=90%	80-89%	70-79%	60-69%	<=59%
21	PRO	% of settlements where KI reporting the education of school aged boys/girls disrupted by type of events	HSM	District	No barriers identified	No criteria	1 or more barriers identified	No criteria	No criteria
22	PRO	% of KIs aware of the presence of ANY explosive hazards (mines, ERWs, PPIEDs) in or near (<5km) of their settlement	HSM	District	<5%	5 - 24%	25-49%	50-79%	80 - 100%

23	FSC	% settlements where KIs reporting on the hunger level of 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
24	FSC	% of settlements where Kis reporting a shock event (natural disaster, suspension of humanitarian assistance, economic shock, disease outbreak, sudden onset shock) driving limited access to food	HSM	District	< 30%	30-50%	50-70%	70-90%	>90%
25	CROSS / HEA	% settlements where KIs reporting the proportion of displaced people in the settlement	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
26	PRO	% settlements where KIs reporting a sudden drop in the number of livestock in the past 30 days	HSM	District	Not applicable - people do not currently raise animals in this community, Number of livestock is normal or almost normal for this time of the year	No criteria	Number of livestock is about half of what's normal for this time of the year	Number of livestock reduced by more than half	No criteria

27	NUT	% settlements where KIs compare the last crop yield harvest to the previous harvest of the same crops	HSM	District	Not applicable - people do not currently cultivate crops in this community, Much more than usual, A bit more than usual, Usual crop yield	A bit less than usual	Much less than usual	No criteria	No harvest at all / all harvest were lost
28	FSC	% settlements where KIs reporting on coping strategies adopted by HHs due to lack of food or money to buy food in the past 30 days	HSM	District	No food-related coping strategies use: None of the above	Engaging in first-level actions due to lack of food or money to buy food: - Sharing of food between relatives - Asking neighbors for food or money	Engaging in second-level actions due to lack of food or money to buy food: - Eating wild food that is not eaten during normal times when there is enough food - Children working to support families - Eating seeds meant for next planting season	Engaging in third-level actions due to lack of food or money to buy food: -begging for food or money	No criteria
29	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

30	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
31	HEA	Measles Coverage (< 2 years old)	DHIS2	District	>95%	80% - 94.9%	65% - 79.9%	50% - 64.9%	0-49.9%
32	HEA	PENTA3 Coverage in <1 year old)	DHIS2	District	>95%	80% - 94.9%	65% - 79.9%	50% - 64.9%	0-49.9%
33	HEA	% of children under 5 reported to experience AWD in the past month	DHIS2	District	0-4%	5-9%	10-14%	~~15~~ 19%	>20%
34	HEA	% of children under 5 reported to experience ARI (Acute Respiratory Infection) in the past month	DHIS2	District	0-9%	10-14%	15-19%	20-24%	>25%
35	PRO	# of civilian casualties from mines, including VOIEDs and ERWs, in 2023 and 2024	ACLED	District	Below 25	25-49	50-99	100-199	200-400
36	NUT / HEA	Under-five Death/Mortality Rate (deaths/ 10,000 children U5/ day)	DHIS2	District		<1	1-1.9	2-3.9	≥4

7. Data Management Plan

Data protection risk assessment				
Have you completed the Indicators Risk Assessment table below?	☐	Yes	X	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**
[Specify indicator, e.g. KI_phone number]	*[Specify identification risk, e.g. Direct contact/identification of KI]*	*[Specify implications, e.g. loss of privacy/potential target of armed actors]*	*[Specify benefits, e.g. follow up for data cleaning]*	*[To be completed by IMPACT HQ]*	*[To be specified by IMPACT HQ]*
[Add relevant number of rows for risk indicators]					

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	□ Yes
		# of downloads of x product from Relief Web	Country request to HQ		□ Yes
		# of downloads of x product from Country level platforms	Country team		□ Yes
		# of page clicks on x product from REACH global newsletter	Country request to HQ		□ Yes
		# of page clicks on x product from country newsletter, sendingBlue, bit.ly	Country team		□ Yes
		# of visits to x webmap/x dashboard	Country request to HQ		X 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	*HNO, quarterly prioritization exercises (AAWG), cluster and ICCT strategies.* [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 Number of humanitarian documents (HNO, HRP, cluster/agency strategic plans, etc.) directly informed by IMPACT products	Perceived relevance of IMPACT country-programs	Country team	Usage_Feedback *and* Usage_Survey template	*Usage will be iteratively monitored through feedback via the AAWG and the ICCT.*
		Perceived usefulness and influence of IMPACT outputs			
		Recommendations to strengthen IMPACT programs			
		Perceived capacity of IMPACT staff			
		Perceived quality of outputs/programs			
		Recommendations to strengthen IMPACT programs			
Humanitarian stakeholders are engaged in IMPACT programs throughout the research cycle	Number and/or percentage of humanitarian organizations directly contributing to IMPACT programs *(providing resources, participating to presentations, etc.)*	# of organisations providing resources (i.e.staff, vehicles, meeting space, budget, etc.) for activity implementation	Country team	Engagement_log	□ Yes
		# of organisations/clusters inputting in research design and joint analysis			X Yes
		# of organisations/clusters attending briefings on findings;			X Yes

ANNEX 1: QUARTERLY FOOD SECURITY MONITORING METHODOLOGY NOTE

ANNEX 2: ACUTE NEEDS FRAMEWORK METHODOLOGY