Integration of the Acute Needs Framework (ANF) into the Needs Monitoring Framework

Methodology Note

Background

In addition to the Needs Monitoring Framework (NMF), the Acute Needs Framework (ANF) aims to provide deeper granularity in the identifications of areas of concern in Afghanistan, by identifying factors that could potentially drive acute needs and by implementing a settlement-based aggregation method.

The Acute Needs Conceptual Framework (ANF), introduced by Prof. Daniel Maxwell and Peter Hailey, adds a further lens to this approach, by helping to identify acute life-threatening needs and specific areas of concern. The ANF outlines how immediate factors such as morbidity and malnutrition interact with underlying drivers such as shocks and vulnerabilities to cause preventable mortality. This makes it particularly well-suited for pinpointing where these critical hotspots arise in complex emergencies such as Afghanistan's.

Health status Health outcomes Water Exposure to disease Immediate Reproductive number of disease Disease-specific risk factors (biological a Quantity & qualit usehold food Household water Household income Living conditions Direct security
Availability
Accessibility
Utilisation contributing Coping capacities Income generating assets Protection from Contributing Shocks and hazards
e.g., natural hazards, conflict & insecurity, financial shocks, displacement, disease outbreaks,
assistance coverage changes, vulnerabilities and Governance, policies, Cultural beliefs, practices, underlying drivers

Figure 1: Acute Needs Conceptual Framework

This note describes the integration of the ANF into the HSM within the Needs Monitoring Framework (NMF) allowing ongoing tracking of evolving needs, supporting seasonal prioritization efforts by the Inter-Cluster Coordination Team (ICCT), and enhancing real-time analysis of humanitarian conditions across Afghanistan's districts.

Key Objective

The goal is to develop a framework of analysis that incorporates the ANF into the HSM, facilitating quarterly monitoring of acute needs within districts. This method aims to identify areas of interdependent severity, by using existing data sources to enable targeted humanitarian prioritization and response.

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Methodology Overview

This approach is enhanced with the HSM settlement/district-level data as the primary source of information. This methodology follows a five-step process inspired by the ANF step-by-step guide but adapted to the crisis context in Afghanistan.

The ANF relies on a set of indicators from the HSM, assigning severity thresholds ranging from the least concerning (1. None/Minimal) to the highest level (4+. Emergency). Indicators are selected based on their relevance to the Afghanistan context, using the NMF as a basis. Discussions will be held with relevant stakeholders to further enhance its utilization in the response.

In contrast to the NMF, which serves as a framework to monitor the needs of the entire population of Afghanistan throughout the year and supports OCHA's HNRP, the ANF is designed to provide greater granularity. It does so by selecting indicators that highlight populations excluded from the majority within a settlement and by aggregating data at lower administrative levels (settlement level).

Steps for Integration

- 1. **Data Source Selection**: Leverage HSM's quarterly KI data for community-level contributing factors (e.g., % of settlements with access to water)
- 2. **Contextualization**: Identify Afghanistan-specific risk factors (e.g., seasonal floods, economic collapse) through consultations with AAWG and ICCT, ensuring relevance to local shocks and vulnerabilities. Selecting relevant indicators to measure selected factors
- 3. Selecting relevant indicators to measure selected factors:
 - Once we have selected the key factors that we can (based on the operational context and available data collection methods) and should (based on context) focus on, it is possible to start mapping relevant indicators for each factor.
- 4. Selecting relevant indicators and thresholds of severity Once we have made sure to have indicators to measure all relevant factors of the ANF, we can build a reference table to establish severity. This process should be guided by different approaches like standard reference table, global guidelines, or contextual knowledge. However we use the standard reference table method (AOK severity Index Framework).

Aggregation Methodology

- Data Preparation:
- Each indicator, within the provided framework, is classified into 5 severities (1 to 4+), depending on the answer options given by each respondent. Every data point (corresponding to a single interview) triggers a number of flags based on the number of indicators that were classified in severity 4 or 4+.

Aggregation methodology

The severity index is simply the sum of all indicators flagged above severity 4 per settlement (HSM provides collects data from 1 key informant per settlement). If the level of granularity required by

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stakeholders is bigger than a settlement, the result will be the average of flags of that administrative level (e.g BSU).

Mapping:

The ANF aims to use mainly hexagon maps with 15km-diamater, where the number of flags are summed for each settlement and then averaged by the number of settlements falling within that hexagon. The hexagon aims to show granular hotspots of needs, triggering responses at those levels.

Data Sources

• **Primary**: HSM (quarterly KI interviews covering districts nationwide).

Key Indicators (Sample)

#	Categor y	Indicator	Source	Granularity	Minimal	Severe	Stress (3)	Extreme (4)	Catastrophic (4+)
1	Direct contributi ng factors	% settlements with sufficient food access	HSM	District	Almost all / all househol ds (76 - 100%)	Many household s (51 - 75%)	Some household s (26 - 50%)	Few household s (1 - 25%)	No household s (0%)
2	Contributi ng factor	% settlements with Access to health facilities	HSM	District	Most househol ds have access to a health center with no or limited systemic issues	No criteria	Most household s have access to a health center with significant systemic issues	Most household s do not have access to a health center	No criteria

Intended Impact

By embedding the ANF into HSM, this framework enhances the NMF's ability to detect districts at risk of acute deterioration, supporting ICCT's quarterly prioritization and resource allocation. It complements broader real-time monitoring efforts, such as the Quarterly Food Security Monitoring, and provides a scalable model for other crisis contexts.

As a complementary methodology to the NMF, the 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.

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