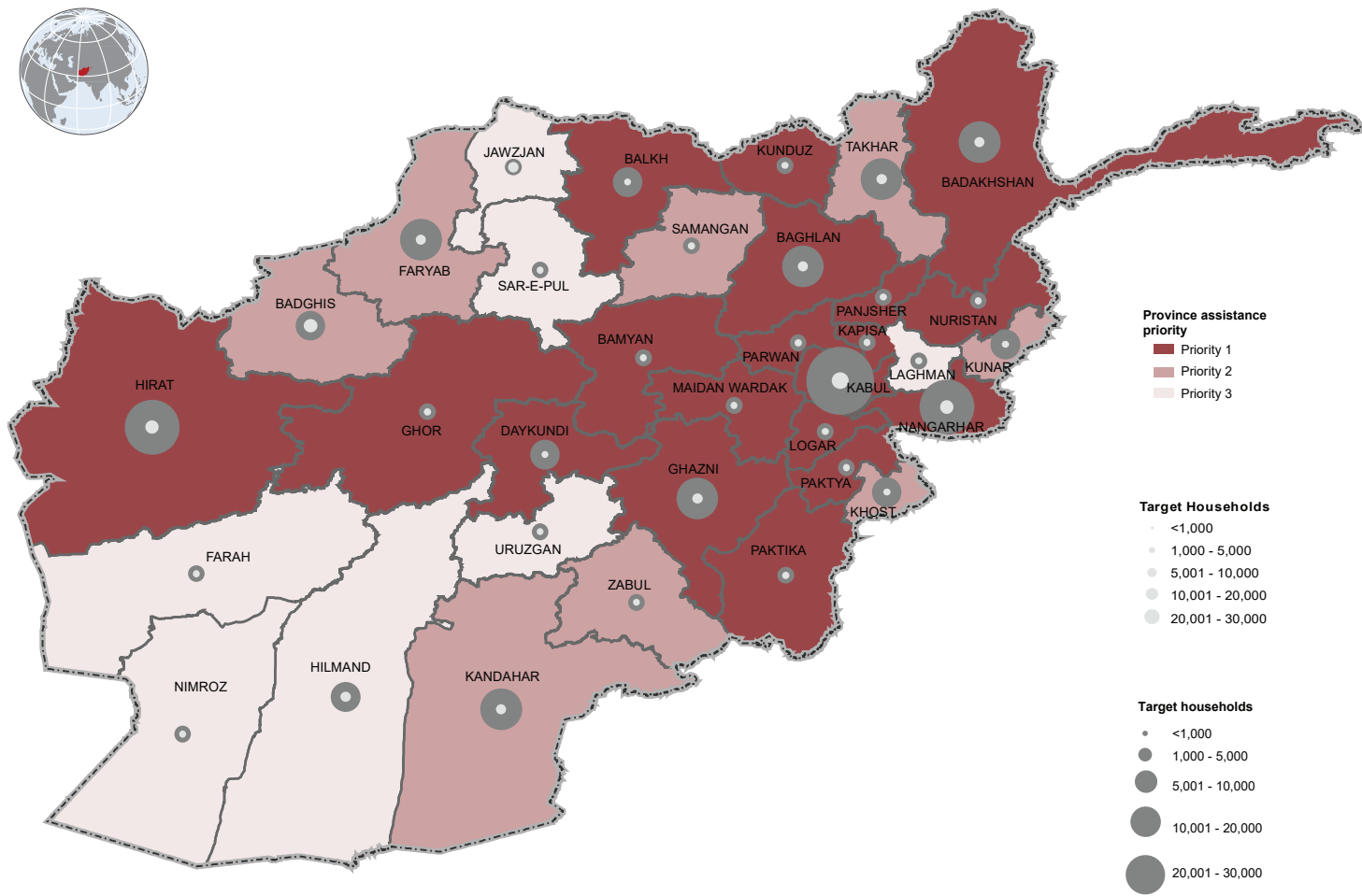


AFGHANISTAN: 2020/21 INTER-CLUSTER WINTERIZATION STRATEGY

NOVEMBER 2020

OVERVIEW

Afghanistan is facing a grim winter ahead as people struggle to keep themselves warm amid soaring poverty driven by the economic shock of COVID-19. With a signs of a second wave of the pandemic peaking, 16.9 million people (42 per cent of the population) entering crisis or emergency levels of food insecurity and almost 1 in 2 children under-five facing acute malnutrition requiring specialised treatment services to survive, life-saving support during the winter period is critical to avert a catastrophe. This includes a range of life-saving support including cash and in-kind heating assistance for households and classrooms, warm clothes, seasonal food support, nutrition treatment, and health services for winter sickness.



AFFECTED POPULATION



4.8M

people in need of winterisation response



2.5M

people to be reached with the winterisation response



FUNDING STATUS*

\$137.6M

Required

\$63.6M

Available

\$74.0M

Gap

KEY MESSAGES

1. Winterization provides **life-saving support** to the most vulnerable individuals, protecting them from harsh weather conditions and preventing mortalities, especially for children and the elderly.
2. This strategy utilises an **integrated approach** and **enhanced coordination** between clusters to address cross-cutting needs brought on by the harsh winter season.
3. **Early identification of funds** will enable partners to plan ahead, procure and preposition winter items. This is crucial in light of possible delays due to COVID-19.
4. A **timely winterization response** will alleviate the adoption of negative coping mechanisms, lessen the occurrence of respiratory infections, U-5 mortalities, hypothermia and in some cases even death, especially among the elderly, women and children.

 EDUCATION IN EMERGENCIES WORKING GROUP

 **\$4.8M**
Required

\$2.2M
Available

\$2.6M
Gap

Planned Reach (individuals): **300,000**
Current Capacity to Reach (individuals): **102,892**

Response package: Heating for classrooms, winter clothes for school-aged children.

Risk and Vulnerabilities: The pandemic had forced temporary school closures, leaving 10 million children out of school for most of the year and the vast majority with catch-up learning needs. COVID-19 has affected the cold climate provinces and districts considering that schools start in March and finishes in December in those locations. Therefore, in order to enable children to continue their studies during winter to catch-up the wasted learning period, complete their grade/class and become eligible to transition into public schools, there is an crucial need for winter kits to children which includes coat, shoes, socks and hat as well as heaters and fuel support for CBE classes.

 EMERGENCY SHELTER/ NON-FOOD ITEMS CLUSTER

 **\$57.5M**
Required

\$17.4M
Available

\$40.1M
Gap

Planned Reach (individuals): **1,359,792**
Current Capacity to Reach (individuals): **397,908**

Response package: Blankets, heaters and fuelsupport, winter clothes. As equired: Shelter repair/upgrade, rental assistance, emergency shelter winterisation kit.

Risk and Vulnerabilities: The lack of warm clothing, insulation, heating heightens the risk of respiratory infections, hypothermia and preventable mortality among children and the elderly. Household Air Pollution (HAP) is particularly acute; during the winter with over 28 per cent of IDPs using waste (paper, plastic, carton board, etc.), as their primary source of energy for heating. Women and children are at particular riskof exposure as they stay at home more than men. Similarly, a staggering 61 per cent of IDPs reportpossession of less than one blanket per member and 55 percent displaced households report having no winter clothes for all children.

 NUTRITION CLUSTER*

 **\$4.0M**
Required

\$4.0M
Available

\$0M
Gap

Planned Reach (individuals): **167,797**
Current Capacity to Reach (individuals): **167,797**

Response package: Treatment of SAM and MAM cases, winter clothing for Pregnant and Lactating Women (PLWs).

 FOOD SECURITY CLUSTER

 **\$54.5M**
Required

\$37.5M
Available

\$17.0M
Gap

Planned Reach (individuals): **1,694,456**
Current Capacity to Reach (individuals): **1,148,832**

Response package: 4 months food assistance, livestock protection assistance.

Risk and Vulnerabilities: **Risk and Vulnerabilities:** Hunger has spiked amid the economic down-turn, with food insecurity now on par with the 2018-19 drought. An estimated 16.9 million people, 42 per cent of the population, will be crisis or emergency levels of food insecurity (IPC 3+) - the fifth highest proportion in the world. Millions will require food assistance over the winter season to survive. The continuous increase in food prices has caused the most vulnerable to adopt negative coping strategies as their purchasing power decreased even ahead of the winter lean season. Vulnerable households with limited savings and cereal stocks are forced to rely on borrowing orsale of assets to cover their urgent food intake needs. Ensuring access to lifesaving food assistance during the winter months will allow Afghan households to weather the worst of the winter and establish a baseline for early-recovery interventions in the spring.

 HEALTH CLUSTER

 **\$6M**
Required

\$1.5M
Available

\$4.5M
Gap

Planned Reach (individuals): **2,500,000**
Current Capacity to Reach (individuals): **600,000**

Response package: Emergency health services through mobile and static health clinics. As required: IEKH supplementary kits, respiratory infection medicines.

Risk and Vulnerabilities: The likelihood of a second wave of COVID-19 over the winter presents an unprecedented challenge to Afghanistan's health care system, already overburdened by mass casualty incidents and recurrent outbreaks of communicable diseases, especially among IDPs. Auxiliary costs associated with attaining health care means that many of the most vulnerable households are unable to afford access to critical health services. Fear of contracting the virus has also resulted in reduced care seeking behavior with many health conditions remaining untreated. Ensuring expanded access to health services, including through mobile-community approaches, is crucial to maintain the well-being of millions.

 PROTECTION CLUSTER

 **\$6.9M**
Required

\$1M
Available

\$5.9M
Gap

Planned Reach (individuals): **402,564**
Current Capacity to Reach (individuals): **35,000**

Response package: Referral of protection cases, Safe referral of GBV survivors and women and girls at risk, dignity kit distribution, identification of children with specific needs (PSN), winterization kit for children with specific needs. Scaling up of support for unaccompanied and separated children.

Risk and Vulnerabilities: High indebtedness, eroded livelihoods, continued conflict and repeated psychosocial trauma have exacerbated protection needs. Women are facing both an increased burden of care and increased GBV risks du to COVID-19. Disability and mental health remain critical vulnerabilities with 17 per cent of displaced household reporting at least on member with signs of disability and 63 per cent of displaced households reporting mental stress. Protection assistance is also needed for children who are increasingly required to work outside of home and are at heightened risk of early marriage, exploitation or recruitment into armed groups.

 WASH CLUSTER

 **\$3.9M**
Required

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Available

\$3.9M
Gap

Planned Reach (individuals): **100,000**
Current Capacity to Reach (individuals): **0**

Response package: WASH package, WASH NFI, family hygiene kit. As required: Safe drinking water through trucking or water treatment kits, emergency latrines and bathing spaces.

Risk and Vulnerabilities: Despite the heavy demand for WASH services in light of COVID-19, most of the population in rural areas ack access to safe drinking water, sanitation and hygiene services. Availability of water and sanitation facilities and adherence to hygiene practices is important in the fight against COVID-19 and mitigating other communicable diseases which may contribute to existing vulnerabilities and drive excess mortality.

* Due to increased level of malnutrition across the country, the Nutrition Cluster has revised its planned reach and funding needs provided in joint winterization strategy from 63,603 individuals to 167,797 individuals and from USD 3.4m to USD 4.0m respectively.