rganization	WHO (World Health Organizati	ion)						
oject Title	Effective emergency health re	esponse in high risk prov	inces including provision	n of children and wo	omen's special needs	.		
/ IF Code	AFG-14/S1/H/UN/236				•			
mary Cluster	HEALTH		Secondary Cluster	None				
#F Allocation	1st Round Standard Allocation	1	Allocation Category Type					
oject Budget	3,713,951.28	3,951.28		12 months				
nned Start Date	01/06/2014		Planned End Date	31/05/2015				
S Details	OPS Code		OPS Budget	0.00				
	OPS Project Ranking		OPS Gender Marker					
	for vulnerable pop to emergen the reduction in children<5 mo functionality (this will validate trauma care through training s cadre provincial blood banks of subcontracted such as Traum injuries due to conflict WH-0 w 5 Blood Banks located in 5 Hig support them technically and I field. Respond to public health new pertussis, typhoid, bruce provincial offices plus PHD an Paktika, Farah, kandahar. Prov support to communicable dise health cadre in the area of wa investigation kits for specimen cholera outbreak control kits for	urbidity and mortality. 4-Lu or negate the MoPH HM tateff on trauma care, first on standard operating prana and Triage and First A ill procure 10 trauma kits the risk provinces as a phogistically to develop the threats 1- WHO and Mo ellosis, anthrax case mar d NGOs) targeting affectinces. Health messages ase outbreak investigatic alter quality control, health to collection and transport	inder the same objective S and different GCMU r A rid, Triage, and gende ocedures and safe bloc id, while WHO will imple and will distribute to te ase 1 of a larger projec ir MCM plans. this will b PH will train health staff agement guidelines. 2-li ted communities on han developed will be targe on mission, these mission care w aste managem ation and PPEs for Com	e WHO w ill undertak eports and monitorir ir Based violence. A d transfusions will te ement t5he GBV and n high risk province: t that includes at lea e done during an inc capacity those w or mplement aw arenes d w ashing and hygi eted tow ards key gras usually include V ent in Nangarhar, Granuicable disease co	e HFF survey to iden g mechanisms) Undu dditionally since it was be undertaken. some if MoPH the BB trainin s. 3-Additionally to si st 20 high risk provini- luction meeting in Kal king from all provinc- s campaigns (this was ene promotion target poups (females/ males MHO and MoPH and Nazni, Paktika, Farah, pazni, Paktika, Farah,	tify the closed facilities of Objective 2 1- What as identified as a material of the mentioned transport MCM WHO will wood out and later there were at PHC level on C ill be done through Ving women and child in John School Staff (All prov Kandahar 5. Provision of Control of C	ies and the level of Ow ill support acc joir gap training of I iainings will be mers to respond to ill support the equip rk with 9 provinces ill be follow up trip utbreak response, VHO regional and fren in Nangarhar, "echnical and logist inces). 4. Training ion of outbreak	
roject Beneficiaries		-	Men	Women	Boys	Girls	Total	
	Beneficiary Summary		88324 9		72263	75213	327,727	
	Total beneficiaries include	de the following:						
	Children under 5		0	0	31879	33181	65060	
	Trainers, Promoters, Caretak members, etc.	ers, committee	404	150	0 5		559	
	Internally Displaced People		7680	7994	6284	6540	28498	
direct Beneficiaries	Indirect pop reached by this 400 This includes the families supported with 3 NGO con patients 561,600 Indirect beneficiaries: the fithese patients supported via 312,000 Indirect beneficiaries for chidisinfectant kits 50,000 Indirect beneficiaries for fa patients supported with dni 1,066,800	living in areas tracts with these amilies living with with BB services nolera outbreak	Catchment Population	Catchment beneficiaries by this project is 2 357 894 Catchment pop is those living in the targeted provinces with N contracts 920 000 Catchment pop for BB is 838 550 Catchment pop for Health awareness campaigns 472 800 Catchment pop for MCM 126,544				
nk w ith the Allocation Strategy	This proposal will respond to the response to natural disasters to 2012 while more recent info	(floods, public health co	ncerns) Earlier the he	alth cluster has reco	orded around 77% in			

This proposal will respond to the most acute needs through life saving interventions enhance access to emergency health and critical services. It also support response to natural disasters (floods, public health concerns...) Earlier the health cluster has recorded around 77% increase in civilian w ounded in 2013 compared to 2012 while more recent information (analysis for the first 2 months of 2014 from emergency) shows: 36% increase in war related admissions compared with 2013 (528 vs 388) and 90% increase compared to the same period in 2012 and bullets remains the major cause of injury (257 in these two months) while around 30% of the war related patients were children and 13% women. Hence, support for Mass casualty management in this proposal will build the capacity of staff working at provincial hospitals to stabilize the patients and refer. Support mass casualty entails support for blood banks which is part of this proposal. Additionally the provision of supplies and kits will counteract the challenges the health sector faces during winter and floods and the risk of disease outbreaks (In 2013 around "264 outbreaks have been investigated and responded to with 48-72 hours). The disruption of health services which is also documented in the CHAP has severely compromised access to essential preventive and curative services which will probably affect women and children more than others since vaccination coverage is already low and disease outbreaks will result in high fatality rate in children <5 years of age. The potential for a large scale outbreak of vaccine

preventable diseases remains high particularly among pop affected by draught, winter and floods or displacement. Hence, this proposal, addresses SRP 1, 2, and

	preventable diseases r	errains nign par	licularly among	pop arrected by draught,	winter and noods or displacer	nent. Herice, triis proposal, addresses SRP 1 ,2, and 4
Implementing Partners	Partner	Partner Type	Budget	Other funding Secured For the Same	Source	US\$
		- 1		Project (to date)	USAID	2,000,000.00
	AKDN	National NGO	150,000.00		ECHO	1,470,000.00
	AHDS	National NGO	150,000.00			3,470,000.00
	ARC		150,000.00			
			450,000.00			
Organization primary focal point	Name: Ghulam Haidar	Rafiqi Title: N	lational profes	sional officer		
contact details	Telephone: 07822003	78 E-mail: ra	afiqig@afg.emr	o.w ho.int		
Organization secondary focal point contact details						

BACKGROUND INFORMATION

1. Humanitarian context.

Humanitarian context: Give a specific description of the humanitarian situation in the target region based on new est data available (indicate source) (Maximum of 1500 characters)

In spite of massive international aid efforts and investments over the past 14 years Afghanistan remains a protracted complex emergency. More than three decade long conflict in Afghanistan has severely hampered poverty reduction and developmental process and depleted local communities coping mechanisms. Over the dispute for territorial control, the attacks of the armed non-state actors increased by more than 40% in 2013 as compared with 2012, and insecurity expanded beyond southern and eastern regions. Consequently the scale of humanitarian needs is increasing, and acute situations are found mainly amongst communities living in contested conflict zones. It was estimated in the CHAP that more than 5 million pop will need access to health services including trauma care. The security transition planned to end in December 2014 creates conditions for more fights for territorial control and is also compounded by the suspension of military spending on development and basic services (including health) with negative impact on livelihood and employments and further increase of humanitarian needs. The closure of ISAF airfields and the logistic implications pose additional challenges especially on the public health sector related to the evacuation of civilians wo unded from conflict zones. Insecurity and conflict not only contributed to clinics closure and/or long-term suspension of activities, but also resulted in substantial deterioration of

the quality of provided services. Especially in rural areas of southern and eastern provinces, between 20 to 30% of existing health facilities function only partially due to the lack of qualified medical staff willing to work in conflict affected districts. For example, in rural Kandahar, ten out of 32 functioning public health facilities are severely understaffed, with only 13 male doctors and not one female doctor. Additionally, the interruption of outreach and mobile health services due to insecure roads, intimidation and harassment of medical teams and again, unavailability of qualified staff has severely compromised the access to essential curative and preventive health services, situation that disproportionately affects women and children. Routine vaccination coverage remains dangerously low in high risk districts (Annex 1 -Risk and vulnerability analysis) and the prevention and control of outbreaks mostly relies on reactive local and national emergency vaccination campaigns (mainly affecting children under 5). As compared with 2012, in 2013 Afghanistan has experienced an almost 60% increase in reported cases of w eapon-related injuries. These incidents are concentrated in conflict-affected zones where the health system is most constrained by issues of access, staff availability, population mobility, and logistics. Generally, the health system is seriously under prepared to deal with trauma and mass casualty events; except for the specialized hospitals run by emergency NGOs and ICRC in Kabul, Helmand, Kandahar, and Panjsher, All provincial and district hospitals lack intensive care services. An assessment conducted by WHO show ed that provincial and regional blood banks in high risk provinces have substandard equipment and there is acute shortage of supplies. In most of the district hospitals the blood banks or transfusion facilities are non or partially functioning. This situation hampers and delays the management of w ar trauma cases and obstetrical emergencies, with sometimes fatal consequences. Essent

2. Grant Request Justification

This proposal developed based on a careful geographical and programmatic prioritization as well as the identification and ranking of the most significant risks the country may face over the next 12 months. The proposed actions also takes into account, complement and are synergic with other stakeholders humanitarian plans, the decision of health cluster members regarding task distribution, mandates and responsibilities, and ensure the linkages with, and the consolidation of the past and ongoing interventions. The expected increase of conflict will result in increased number of people having difficult access to essential health services, civilian casualties, collateral damage and attacks on health infrastructure, assets and personnel and violation of human rights, and population displacement with its health consequences. Diseases outbreaks constitute one of the most serious health impacts of disasters. WHO has the institutional knowledge and the expertise to run this project efficiently,, additionally due to its proximity to MoPH can facilitate the implementation engagement and commitment of local health authorities. WHO has field offices through its national and regional offices in Kabul, Jalalabad, Gardez, Faizabad, Kunduz, Mazari Sharif, Bamyan, Kandahar and Herat and its extensive polio officers network all over the country.

3. Description Of Beneficiaries

This project will directly support 327727 1- through provision of kits and medicines will ensure access of around 77322 w omen and 80,478 men to emergency and trauma services. 2- Miscellaneous drugs will provide access to 20,000 pop 3- around 559 staff will receive formal education . 4- 3 NGOs will be subcontracted and will provide service to around 50 patient per day for 26 days a months for 12 months based on 2013 estimates around 93,600pop will receive basic health services 5-Five Blood Banks will be supported and based on last year's estimates Nangarhar provided units to 2000 persons Kunar 1000 Paktika 500 Paktia 450 Nuristan 400 unit per month; hence on average and during the 12 months this Blood bank will provide service to around 52,000 patients 6- Five Aw areness Campaigns will directly support 1250 pop 7- the outbreak investigation kits will collect 2500 samples from 2500 patients 8- 18 persons from 9 provinces will be trained on MCM planning w orkshop

4. Needs assessment. Describe the capacities in place, then identify the gaps (previous and new). Explain the specific needs of your target group(s) in detail. State how the needs assessment was conducted (w ho consulted w hom, how and w hen?). List any baseline data

The vulnerability needs assessment included information on the impact of conflicts and insecurity on health services delivery. Insecurity and conflict not only contributed to clinics closure and/or long-term suspension of activities, but also resulted in substantial deterioration of the quality of provided services. In the 5 provinces that WHO will subcontract NGO the high risk pop that don't have access to emergency services is around 3 million (1.53 women and 1.35 children <18) Shortage of, medicines have been reported by many partners and MoPH, which is one of the reasons for morbidity and mortality among vulnerable groups especially children under 5 and elderly who are more vulnerable than others hence. It is estimated in the CHAP that around 2.3 million pop are affected by conflict and around 200,000 (40,000 child<5) by natural disasters. Kits and supplies are needed to respond to these emergencies As compared with 2012, in 2013 Afghanistan has experienced an almost 60% increase in reported cases of weapon-related injuries. While in the first few months in 2014 it was reported by emergency that there is a 36% increase in war related admissions compared with 2013 (528 vs 388) and 90% increase compared to the same period in 2012 30% of the war related patients were children and 13% women. These incidents are concentrated in conflict-affected zones where the health system is most constrained by issues of access, staff (F/M) availability, population mobility displacement, and logistics. Generally, the health system is seriously under prepared to deal with trauma and mass casualty events; except for the specialized hospitals run by emergency NGOS and ICRC in Kabul, Helmand, Kandahar, and Panjsher, All provincial and district hospitals lack intensive care services. An assessment conducted by WHO show ed that provincial and regional blood banks in high risk provinces have substandard equipment and there is acute shortage of supplies. In most of the district hospitals the blood banks or transfusion facilities are none or partially functioning. This situation hampers and delays the management of war trauma cases and obstetrical emergencies, with sometimes fatal consequences. Essential equipment and supplies as well as the staff capacity and skill to triage and stabilize conflict-related casualties are insufficient. Insecure roads, shortages of equipped ambulances and the high cost of transportation impede and delay referral of casualties and emergencies. Currently the DEWS system is working well, around 94% of the outbreaks in 2013 have been detected and responded to within 48-72 hours still there is a need to maintain this system function and to ensure that age and gender segregated data will be collected. In spite the impact of the national measles vaccination campaign continues into 2014, the potential for large scale outbreaks of other vaccine preventable diseases however remains high due to the lack of progress in routine vaccination, particularly among populations affected by drought, floods, harsh winter, or displacement.

 Activities. List and describe the activities that your organization is currently implementing to address these needs Objective 1 1. WHO procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country CP and for the temporary HF established, to address humanitarian needs. Kits will be distributed to NGOs and PHD (Annex 1 2013 distribution list attached supported access of around 765,600 people to emergency services). 2. Subcontract 3 NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by PH risks and conflict, AHDS in Kandahar (conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh weather and scattered population) These NGOs are national NGOs 2 are BPHS and EPHS implementers while ARC is accepted as a service provider in all conflict areas and which will enable them to access areas otherwise not accessible to other partners. WHO has been working with these NGOs previously, and by providing direct supervision and monitoring can ensure efficient and proper implementation of needed activities. 3. Undertake the HFF survey in 14 high-risk provinces (Annex 2 List attached). This will be contracted to the "Asian Disaster preparedness Centre" and the funding requested

w hich will cover the survey team cost only additional funding will be needed. WHO will use other sources of funding to cover the gap, this survey should start in May and the expected outcome is a confirmation on number of facilities open or closed and level of functionality and level of service delivered. This assessment should be used as a validation tool for the HMIS reports and the GCMU reports. 4. To reduce < 5 mortality and morbidity WHO will train 50 health cadre in the area of Integrated management of new born and childhood illness and the community management of neonatal childhood illness. Trained staff will be selected from paktia, nuristan districts These training will be done by WHO. Objective 2 1. Train 234 staff working in the high risk provinces (Annex 3) in the area of trauma care triage, GBV and training of blood bank staff and first aid training. MCM and Triage will be done through Emergency NGO and MoPH (Triage), while GBV by WHO, and training of blood bank staff will be done WHO/MOPH (see Annex 4 and Annex 5) 2.WHO procure and distribute 10 trauma kits, to health partners located in high risk districts/provinces based on last year experience (Annex 1) in provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand . 3. WHO technical and logistical support for 5 blood banks in Nouristan, Kunar, Nangarhar, Paktia, Paktika (part of the phased approach (attached Annex 6) initiated in 2013 and supported by ECHO 4. Technical and logistical support to the development and implementation of MCM plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan) (see Annex3) Objective 3 1. WHO to train 75 medical staff of MoPH and NGOs from all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, and anthrax case management guidelines. 2. Implement 5 aw areness campaigns (through WHO regional and provincial offices targeting families and pregnant women and children through mass media and mass meeting orientation and training with PHD and NGOs) targeting women and children in affected communities on hand washing and hygiene promotion in Nangarhar, Ghazni, Paktika, Farah, kandahar. Health messages developed will be targeted tow ards key groups (females/ males/ IDPs). 3. Undertake CD outbreak investigation mission, (WHO and MoPH staff) to all provinces. 4. Training of 100 staff on water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, and Kandahar 5.. Provision of outbreak investigation kits and PPEs for rumor investigation and response for the 23 provinces 6. Provisions of Cholera outbreak control kits

LOGICAL FRAMEWORK

Overall project objective

The overall objective is to reduce avoidable morbidity, mortality and disability amongst the populations affected by humanitarian situations in Afghanistan. This project will ensure that specific vulnerabilities of female IDPs and are addressed especially in the area of emergency health care Specifically, this entails ensuring that all needs assessments, monitoring and evaluation exercises are conducted with sufficient gender-disaggregated data, that interventions are designed with adequate consideration for the differential impacts of conflict transition on men and women; that activities are implemented with adequate target-setting for female beneficiaries. Additionally this project aims at building national capacities in being able to respond efficiently to emergencies especially during mass casualties taking into consideration that many of the casualties are usually women and children. Additionally, this project will support response to public health threats which initially is an international concern as per International health regulation, while nationally its also a concern since usually those affected are the most vulnerable segments of the population those that have no access due to insecurity displacement, or difficult geographical terrain, or those that don't have a nearby facility it is well known that the routine vaccination coverage is quite low, with this identified challenges the possibility of disease outbreak (vaccine related) is high.

Logical Framework details for HEALTH

Cluster objectives	Strategic objectives (SRP)	Percentage of activities
Objective 1. People affected by conflict and insecurity have equitable access to effective, safe, and quality essential health services	Providing emergency health care and prioritizing access to critical services	40
Objective 2. People in provinces and districts identified at high risk due to conflict have timely access to effective trauma care to prevent avoidable morbidity, mortality and disability	Providing emergency health care and prioritizing access to critical services	40
Objective 3. People have access to information and services designed to prevent and control communicable diseases that contribute most significantly to excess morbidity and mortality	4. Responding to natural disasters	20

Outcome 1	Age and sex-disaggregated percentage of population having access to primary and emergency health services,					
Code	Description	Assumptions & Risks				
Output 1.1	Ensure availability of targeted (age, gender and diversity approach applied in the planning and delivery of assistance) emergency health services in collaboration with health partners working in that area.	Disasters, Insecurity, accessibility and UN operations				

Indicators

Code	Cluster	Indicator					Mid- Cycle	End Cy	nd Cycle Beneficiaries			End- Cycle	
			Men	Women	Boys	Girls	Target	Men	Women	Women Boys Girls		Target	
Indicator 1.1.1	HEALTH	Population covered by emergency PHC and referral services					45000					93600	
Mean	s of Verification:	Monthly report from the implementing partners											
Indicator 1.1.2	HEALTH	Requested kits procured and distributed the targets are in %					50					100	
Mean	s of Verification:	WHO records and partners' reports											
Indicator 1.1.3	HEALTH	Health facility functionality survey conducted targets below are in percentages					70					100	
Mean	s of Verification:	WHOP records and availability of report											
Indicator 1.1.4	HEALTH	Health professionals have improved skills in the area of IMNCI, CIMNCI					25					50	
Mean	s of Verification:	WHO, MOPH records											

Activities

Activity 1.1.1	Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh weather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks.
Activity 1.1.2	Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).
Activity 1.1.3	Under this objective WHO will also train 50 health cadre in the area of IMNCI, CIMNCI. To be trained health staff will be selected from Paktia and Nuristan
Activity 1.1.4	WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap.

Outcome 2	People living in insecure conflict affected districts have timely access to critical trauma care and referral services						
Code	Description	Assumptions & Risks					
Output 2.1	Support provision of trauma care and mass casualty management to population affected by conflict taking into consideration gender and diversity approach in planning and implementation	Insecurity, Partner capacity, Supplies and equipment, Logistic					

Indicators

Code	Cluster	Indicator	Mid Cy	cle Benefic	ciaries		Mid- Cycle	End Cycle Beneficiaries				End- Cycle
			Men	Women	Boys	Girls	Target	Men	Women	Boys	Girls	Target
Indicator 2.1.1	HEALTH	Health professionals (targeted districts and provinces) have improved skills in stabilisation and management of war trauma					100					234
Mean	s of Verification:	WHO reports , MoPH report										
Indicator 2.1.2	HEALTH	Number of MCM plans developed and implemented					5					9
Mean	s of Verification:	Mass casualty events managed										
Indicator 2.1.3	HEALTH	Number of blood banks fully functional					2					5
Mean	s of Verification:	Monthly blood bank activity report										
Indicator 2.1.4	HEALTH	10 trauma kits procured and distributed					5					10
Mean	s of Verification:											
Indicator 2.1.5	HEALTH	Two persons from each of the targeted 9 province trained on developing MCM plan					8					18
Mean	s of Verification:	WHO reports, MoPH records										-

Activities

Activity 2.1.1	WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop-two persons from each province will be trained on MCM planning.
Activity 2.1.2	Building the capacity of 234 staff w orking in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding.
Activity 2.1.3	Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and will be pre-positioned in the following provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand
Activity 2.1.4	Based on the assessment conducted in 2013 all the gaps in 21 provinces blood banks (attached study). A phased approach was initiated in 2013 to cover these gaps. This includes funding received from ECHO in 2013 which supported the 21 BB with consumables and 2 banks with equipment. Currently and under this proposal WHO is proposing support to 5 Blood banks Nouristans (Arans), Kunar PH, the regional hospital of Jalalabad, PH of Paktia and Paktika which receives the highest level of trauma cases. Support includes equipment and reagents (attached list) all procurement and distribution will be done by WHO. Attached is a phased plan to cover BB gaps from different funding sources.

Outcome 3	Decrease in morbidity and mortality (age and sex specific data collected) due to detected epidemiological data collected and sex specific data collected and sex specific data collected are detected epidemiological data.	ogical events with severe public health implications.
Code	Description	Assumptions & Risks
Output 3.1	Respond to public health threats (taking into consideration the different needs of women and men) in high risk provinces in time through a better public health awareness, surveillance and response system	Insecurity, Health system functionality,

Indicators

Code	Cluster	Indicator	Mid Cy	cle Benefic	ciaries		Mid- Cycle	End Cycle Beneficiaries				End- Cycle
			Men	Women	Boys	Girls	Target	Men	Women	Boys	Girls	Target
Indicator 3.1.1	HEALTH	100% of the alarms are investigated within 48 hours from notification					100					100
Mean	s of Verification:	Outbreak investigation reports										
Indicator 3.1.2	HEALTH	Case fatality rate remains w ithin agreed international standards					1					1
		Cholera CFR< 1%										
Mean	s of Verification:	DEWS reports and MoPH reports										
Indicator 3.1.3	HEALTH	Number of awareness campaign conducted					3					5
Mean	s of Verification:	WHO records and MoPH/PHD reports										
Indicator 3.1.4	HEALTH	Kits procured and distributed - all kits will be procured beginning of the project and the mid year target and end year target is 100%					50					100
Mean	s of Verification:											
Indicator 3.1.5	HEALTH	Health professionals skills improved in the area of communicable disease outbreak identification, investigation and response					75					175

Means of Verification:		WHO reports and MoPH and NGOs records										
Indicator 3.1.6	HEALTH	Training health cadre on water quality monitoring and health care waste management					50					50
Mear	ns of Verification:	MoPH and WHO records and NGOs reports										

Activities

Activity 3.1.1	Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO.
Activity 3.1.2	Implement 5 aw areness campaigns (this will be done through WHO regional and provincial offices plus PHD and NGOs) targeting affected communities on hand washing and hygiene promotion targeting women and children as the most affected by Diarrhea and water bore diseases in Nangarhar, Ghazni, Paktika, Farah, kandahar. Provinces. Health messages developed will be targeted towards key groups (females/ males/ IDPs).
Activity 3.1.3	Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).
Activity 3.1.4	Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar
Activity 3.1.5	Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster
Activity 3.1.6	Provision and distribution of cholera outbreak control kits for the 5 targeted provinces Nangarhar, Ghazni, Paktika, Farah, kandahar.

WORK PLAN

Project w orkplan for activities defined in the Logical framew ork

Activity Description (Month)	1	2	3	4	5	6	7	8	9	10	11	1
Activity 1.1.1 Subcontract three NGOs to provide temporary health facilities established to address numanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan deprived mountainous area, harsh weather and scattered population) based on 2013 estimates each partner			х	х	х	х	х	х	х	Х	х	
supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at east 10 moths in areas affected by emergency and public health risks.												
Activity 1.1.2 Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address numanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, 2013 distribution list attached supported access of around 765,600 people to emergency services).		Х	х			х	х	х		X		
Activity 1.1.3 Under this objective WHO will also train 50 health cadre in the area of IMNCI, CIMNCI. To be rained health staff will be selected from Paktia and Nuristan						Х			х			
Activity 1.1.4 WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high- risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the " Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 JSD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap.	X	х	х	х	х	х						
Activity 2.1.1 WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, paghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency nealth response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning.		X		X	X	X						
Activity 2.1.2 Building the capacity of 234 staff w orking in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage),GBV WHO, and training of blood bank staff will be done by WHO/MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) while in 2014 ECHO will support he training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and raining of blood banks staff using CHF, ECHO funding.		X	x		x	x	X		X	X	х	
Activity 2.1.3 Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas dentified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and will be pre-positioned in the following provincial hopistals Kunar, aghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand		X	Х		х		X		X		X	
Activity 2.1.4 Based on the assessment conducted in 2013 all the gaps in 21 provinces blood banks(attached study). A phased approach was initiated in 2013 to cover these gaps. This includes funding received from ECHO in 2013 which supported the 21 BB with consumables and 2 banks with equipment. Currently and under his proposal WHO is proposing support to 5 Blood banks Nouristans (Arans), Kunar PH, the regional hospital of lalalabad, PH of Paktia and Paktika which receives the highest level of trauma cases. Support includes equipment and reagents (attached list) all procurement and distribution will be done by WHO. Attached is a phased plan to cover BB gaps from different funding sources.		X	X	х	х	х	X					
Activity 3.1.1 Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO.		X	Х		х	X		x				
						Х	Х	Х	Х	х		

offices plus PHD and NGOs) targeting affected communities on hand washing and hygiene promotion targeting women and children as the most affected by Diarrhea and water bore diseases in Nangarhar, Ghazni, Paktika, Farah, kandahar. Provinces. Health messages developed will be targeted towards key groups (females/males/IDPs).												
Activity 3.1.3 Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					Х		Х		х	х		Х
Activity 3.1.4 Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		Х	Х		Х	Х			х	х		
Activity 3.1.5 Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster	X	X		X	х		X	x		х	x	
Activity 3.1.6 Provision and distribution of cholera outbreak control kits for the 5 targeted provinces Nangarhar, Ghazni, Paktika, Farah, kandahar.	Х	х		Х	Х		х	X				

M & EDETAILS

Implementation: Describe for each activity how you plan to implement it and who is carrying out what.

. WHO works in close collaboration with the Ministry of Public Health and emergency NGOs, other UN agencies, bilateral agencies and Civil Society Organizations (CSO), providing technical, financial, and material assistance through its country and sub-offices. Through cluster coordination meetings and proximity to MoPH and strong w orking relation w ith health partners WHO is committed to avoid duplication and synergize the resources. WHO also w ill capitalize on the 3Ws tool w hich provides detailed information on who is doing what and where. This information will be verified by WHO regional and provincial offices with their partners on the ground. • WHO is not a service delivery agency, hence, WHO capitalizes on IP to fill gaps in service delivery. These IP usually provide monthly update on a set of indicators. They also report to WHO and MoPH any alarming public health issue that could lead to an increase in mortality and morbidity. • Supervision is usually done through WHO regional and provincial offices in the field. But a monitoring plan (which will also be aligned with the accountability framework) will be developed. WHO will continue to support disease surveillance. DEWS reports are usually reported through sentinel sites/focal points from health facilities run by NGOs and BPHS implementer. DEWS system is a joint WHO/MOPH WHO have been trained by WHO earlier. DEWS report for any outbreak is shared with WHO and MOPH to take actions for investigate and respond to this outbreak will include the province local authorities and the partner in the field. • WHO will be directly involved in all trainings indicated in this proposal. Some of the trainings will be conducted in Kabul but mostly will be done at regional level. At regional level WHO regional staff will take part w hile in Kabul staff from main office will be responsible for all trainings conducted. Modules used will be those approved and endorsed by MoPH, a care team of trainers will be developed who can eventually conduct all training activities in the remaining provinces. Successful implementation of 2014 humanitarian plan will result in better response capacity of health sector and community towards critical situations. Multiple approaches will be used to ensure access of humanitarian actors in conflict areas not covered by public health services, these mechanisms will depend on the needs of targeted population and the challenges that the health system faces in ensuring delivery of care. • For kits they will be procured through WHO HQ and these kits are usually delivered top Kabul main warehouse. WHO usually transfers these kits to the provinces and are usually pre-positioned at the PH w arehouse and WHO w arehouses w henever available. • The subcontracting of NGOs is done from WHO Kabul main office w hile the monitoring is done from the regional offices as for the HFF survey this will be subcontracted to ADPC who has previous experience in Afghanistan, under close supervision of MoPH and WHO several NGOs will be contracted to do the data collection while the data cleaning and report w riting will be done by ADPC with WHO and MoPH. • WASH activities will be done by the international WASH expert, he will travel to the field train staff on WQC and HCWM (supplies to separate w aste will be provided from another source of funding). as for the hygiene awareness campaigns that will be implemented by the WHO staff in the field together with MoPH under the direct supervision of the WASH expert • Communicable diseases and disease control will be implemented and supervised by the Public Health expert in kabul and the WHO staff in the regions

Monitoring: Describe how you will monitor the implementation of each activity. Describe the tools you plan to use (checklist, photo, questionnaires, interviews, suggestion box etc.) in order to collect data and how you will store data. Explain the frequency type and protocol of reporting (how often do you report about what to whom?). State if, when and how you plan to evaluate your project.

• This proposal will be directly managed by WHO emergency unit in Kabul. Monitoring and reporting will be done from provincial level by WHO technical officers or the local health authorities. Monthly reporting of contracted NGO to a set of indicators reported and shared with PHCC and WHO (through email) see Annex 13. • Trends will be identified especially using the DEWS weekly information which will report any increase in PH risks which will trigger an immediate action to investigate and respond. • WHO from Kabul and at regional level monitoring visits could be a source of verification and in some instances Subcontract a partner to undertake monitoring visits in far outreach areas. WHO focal points wherever they are available to support and strengthen provincial / regional health cluster coordination • Procurement, distribution to all partners across the country, and monitoring of effective use of supplies will be done by WHO regional offices in collaboration with PHD. The feedback reports will be used to estimate number of population served and efficiently that was done. • Capacity building activities will be monitored by WHO and evaluated using appropriate reviews and feedback tools. Additionally future impact of trainings will also be assessed at a later stage. • Feedback from Partners, evaluation of output data, timeliness and completeness will be used to validate the project implementation. • Collect provincial health coordination committee, HMIS, EPR, EPI, and pharmaceutical subcommittees' meetings notes.

OTHER INFORMATION

Coordination with	other Organizations
in project area	

Organization	Activity
1. AKDN	to provide emergency services in Bamyan
2. AHDS	to provide emergency services in Kandahar
3. ARCS	To provide health services in Ghazni/ Faryab/ Wardak
4. Ministry of public health	Implemnttaion of DEWS, HMIS data collection reports, identification and response to public health risks, co-chairing Health cluster meetings
5. Provincial health director	Conduct provincial health meetings and plan response to emergencies.
6. Health cluster	Participate and contribute technically to the health cluster meeting
7. Nutrition cluster	Coordinate activities with nutrition cluster
8. Wash cluster	Coordinate activities with WASH cluster

Outline how the project supports the gender theme

This project focus on ensuring access to health services focusing on the needs of different groups (men/women/children). gender balance will be sought in all training activities. all data collected will be segregated by age and sex. Gender balance will be sought fr4om planning to implementation of this proposal. The different needs of women/girls and men/boys have been analyzed and integrated well in the activities and outcomes.

Select (tick) activities that supports the gender theme

Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month w hile for a fixed center its around 4200 USD per month . hence it is expected that w ith 150,000 USD tw o facilities can be running for at least 10 moths in areas affected by emergency and public health risks.

- Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).
- Activity 1.1.3: Under this objective WHO will also train 50 health cadre in the area of IMNCI, CIMNCI. To be trained health staff will be selected from Paktia and Nuristan
- Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken

			in 14 high-risk provinces which also falls among the high contracted to the "Asian Disaster preparedness Centr cover the entire survey, additional funding will be need	re" ADPC and the for	unding request	ed under this prop	iosal (around 300,000 USD) is not	
		✓	Activity 2.1.1: WHO will provide technical and logistic (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, sar those to be finalized under other source of funding (to WHO intends to finalize before the end of 2014 using o planning.	ripul, kunduz, bagh otal around 24) w ill	lan). These pla contribute to the	ns include all heal ne development of	th cluster members and PHDs . The a national emergency health response	ese plans plus onse plan, w hich
		•	Activity 2.1.2: Building the capacity of 234 staff w ork staff. MCM and Triage will be done through Emergency WHO /MoPH see attached sheet for locations and train MCM, 192 staff w orking in BB transfusion facilities) w trained in the area of MCM and Triage and training of bl	y NGO in addition to nees numbers per d hile in 2014 ECHO	MoPH for (Tria donor. This con will support the	age),GBV WHO , a apliments w hat EC e training of 290 in	and training of blood bank staff will HO supported in 2013 (210 trained	be done by d on triage and
			Activity 2.1.3: Procure and distribute 10 trauma kits, to last year experience but these kits can also be distribu interventions (attached distribution list based on 2013 e Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilm	uted to new evolvin estimates) and will	ig areas as nee	ed arises. Kits pro	cured should enable access to 10	0 surgical
			Activity 2.1.4: Based on the assessment conducted in 2013 to cover these gaps. This includes funding receiv Currently and under this proposal WHO is proposing su and Paktika w hich receives the highest level of trauma be	ved from ECHO in 2 upport to 5 Blood b a cases. Support in	2013 w hich sup anks Nouristan cludes equipme	pported the 21 BB s (Arans) , Kunar ent and reagents (w ith consumables and 2 banks w PH, the regional hospital of Jalalab	ith equipment. oad, PH of Paktia
		•	Activity 3.1.1: Training of 75 health staff working in a case management guidelines. All training will be done by		Elevel on Outbr	eak response, 10	O on new pertussis, typhoid, bruce	ellosis, anthrax
		•	Activity 3.1.2: Implement 5 aw areness campaigns (th communities on hand w ashing and hygiene promotion t Nangarhar, Ghazni, Paktika, Farah, kandahar. Province	targeting women a	nd children as	the most affected	by Diarrhea and water bore disea	ses in
			Activity 3.1.3: Technical and logistical support to com NGOs staff. (All provinces).	nmunicable disease	outbreak inve	stigation mission, t	hese missions usually include WH	O and MoPH and
		•	Activity 3.1.4: Training of 100 health cadre in the area kandahar	a of water quality of	control, health	care w aste manag	ement in Nangarhar, Ghazni, Pakti	ka, Farah,
			Activity 3.1.5: Provision of outbreak investigation kits rumors of infectious diseases. these supplies are usua Nutrition cluster					
			Activity 3.1.6: Provision and distribution of cholera ou	utbreak control kits	for the 5 targe	ted provinces Nan	garhar, Ghazni, Paktika, Farah, kal	ndahar.
Cross Cutti	ng Issues	feedt trainii envir asse	and sex-disaggregated data of IDPs and returnees havir nack sessions by affected communities (female/male/bo, ng and aw areness-raising programs on protection princ commental safety, Health care w aste management in a cu ssments especially w hen undertaking HFF survey. Geno adequate provision for the safe collection and disposal	bys and girls) Numb ciples including GB\ ulturally sensitive mader and diversity a	per of participar V, HIV/AIDS Av manner. Include pproach applie	nts (balanced num rareness campaig sex and age disa d in the planning a	ber of female/male) attending capa ins and trainings will address HIV/ ggregated data in baseline, need a nd delivery phase Medical Waste l	acity-building, AIDS, nd resource Management:
Gender Ma	rker of the Project	The p	roject is designed to contribute significantly to gender e	equality				
	nt Marker of the Project	A+: N	leutral Impact on environment with mitigation or enhance	ement				
Environme		Many	of the areas that this project will target are insecure an		Il under public I	nealth international	regulation IHR safety of pop and r	
Safety and	Security	coun	ries have to be addressed during any disease outbreak otable risks when warranted, and to use creative appro		ze the opportur			
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BUDGET 1 Staff an Code 1.1	d Other Personnel Cost Budget Line Descripti International public healtl International officer at Pactivities, Capacity buildi International WASH experies provide technical support per UN salary scale. Bathational public health office National NOC public health National Project assistantices.	coun acce This itechrican feath regime common feath regime f	ortable risks when warranted, and to use creative appropriate of the proposal is being implemented in areas affected by conficial, financial, and material assistance through its national and Herat. Hence, this proposal can be implemented in ships which are crucial at both the local and strategic e, although some accidents might occur but in general Vunities and their leaders is essential to build a positive posistance and developing a contextually tailored program additional means will be adopted for M&E (mentioned in National means will be adopted for M&E (mentioned in National staffs on project related activities. Balance will be blish water and sanitation system in the communities and libe paid from other funding sources	paches to reduce riflict or displacemen nal and regional offed due to WHO pro: level. For example WHO is being perception. Commune design. In case M&E section). Province of the community of th	ze the opporturist. It. WHO is wor ices in Kabul, with the incomplete in Kabul, with the ices in Kabul, with ices in Kabul, with the ices in Kabul, with the ices in Kabul, w	king in close collal alalabad, Gardez, und National health is being implemental and independent and and independent and indepe	the security management policies to the security management policies poration with the Ministry of Public Faizabad, Kunduz, Mazari Sharif, authority, historical know ledge are ted by areas supported by Taliban dent agency. Communication with arean interest in identifying the penal means is considered too problementing partner for project implementing partner for project implementing the field. This includes public health which is included public health which is a capacity of P4 level internations. The security of P4 level internations are some sources.	Health providing Banyan, id impartial or the current Afghan expele most in need ematic, other Total Cost 63,000.00 related 72,000.00 at related 13,500.00 18,000.00

)14	AFG-14/S1/H/// Support the project via collecting data related to the project activities maintaining trackin salary scale used		•	or the activities and dis	seminate them to the relevant	actors WHO SSA
1.6	National training officer	1	800	12	40%	3,840.00
	Follow up, monitor and manage all the trainings and workshops related activities of the scale used					
1.7	logistic/ IT officers	1	3000	12	50%	18,000.00
	Support the logistic and IT related activities of the project in central and regional offices funding sources (UN salary scale used)	Work at NOC level	, 6 months sala	ary and allow ances wi	ll be paid, balance will be paid	from the other
1.8	Program monitoring and reporting	1	213193	1	100%	213,193.00
	WHO HQ and RO office staff costs (based on time spent for the project);Finance 30%,	Procurement 30%,	Communication	n specialist 30%		
	Section Total					417,133.00
2 Supplie	es, Commodities, Materials (please itemize direct and indirect costs of consumal	oles to be purcha	sed under th	e project, including a	□ associated transportation, f	freight, storage
and distr	ibution costs)	· ·				
Code	Budget Line Description	Quantity	Unit Cost	Duration Recurrence		Total Cost
2.1	Pneumonia kits	100	450		50%	22,500.00
	The kits are WHO recommended standrad kits (composition is annexed) will be purcha-	sed through WHO r				,,,,,,,,,
2.2	Inter agency Diarrhoeal disease kits	36	5640		50%	101,520.00
2.2	The kits are WHO recommended standrad kits (composition is annexed) will be purchas					101,320.00
2.3	, , ,		22950	`	50%	220 500 00
2.3	The Interagency Emergency Health Kit 2011, complete	20				229,500.00
	The kits are WHO recommended standrad kits (composition is annexed)will be purchas			· ·		040.000.00
2.4	Italian Emergency Kit A, Traumatological profile A+B	20	21000		50%	210,000.00
	The kits are WHO recommended standrad kits (composition is annexed)will be purchas				0 , ,	
2.5	Inter Agency Emergency Health Ki Basic Unit	100	450	1	50%	22,500.00
	The kits are WHO recommended standrad kits (composition is annexed)will be purchas	ed through WHO p	rocurement sy	stem .(WHO standard o	catalogue prices)	
2.6	Miscellaneus drugs and supplies	1	100000	1	100%	100,000.00
	Essential drugs and supplies recommended for emergency case management that are festimates	requenly short in s	upply will be p	urchased and preposit	ioned (list attached) cost bas	sed on 2013
2.7	Cholera beds and matresses	200	25	1	100%	5,000.00
	Recommende standard designed beds will be purchased locally from qualified suppliers	.(WHO standard ca	atalogue prices	3)		
2.8	Tents 42 sq.meter	20	600	1	100%	12,000.00
	Standard tents used for emergency patient care will be puchased locally from qualified	suppliers .(WHO st	andard catalog	gue prices)		
2.9	Procuremnet of carry Blairs for sample transportation	10	430	1	50%	2,150.00
	Carry bairs will be purchased from international suppliers .(WHO standard catalogue pr swab for 23 provinces hence 5 boxes, these swabs are need for outbreak investigation					n province is 100
2.10	Procurement of trans-isolate media	5000	2.3	1	50%	5,750.00
	The need is 100 per province while the cost of one vial of trans isolate media is 2.3 USI suppliers .(WHO standard catalogue prices)) the need to cove	r 23 provinces	is 2500 vials and swa	bs , this will be purchased fro	om international
2.11	Procure Cholera outbreak disinfection kit	25	2690	1	25%	16,812.50
	To be used for infection control in a health facility or cholera treatment center (attach th standard catalogue prices) each province one kit Nangarhar, Ghazni, Paktika, Farah, ka		VHO recomme	nded will be procured t	hrough WHO procurement sys	stem (WHO
2.12	Procure Tarpoulin sheets for floor of temporary cholera treatment centers	100	20	1	100%	2,000.00
	Items with necessary specifications (48 sq. meter) will be locally purchased from qualif	ied suppliers based	d on 2013 loca	l cost estimates		
	Section Total					729,732.50
3 Equipm	nent (please itemize costs of non-consumables to be purchased under the projec	t)				
Code	Budget Line Description	Quantity	Unit Cost	Duration Recurrence		Total Cost
3.1	Provision of Equipments and supplies for 5 blood banks	20	80000	1	25%	400,000.00
	Selected essential supplies for blood bank will be purchased from qualified local supplie reagents see Annex 6 the total estimated cost is based on 2013 estimates, and the funwill compliment this action with funding from ECHO attached is the list of equipment to be	ding requested will	not cover the	w hole needs of these		
3.2	Procurement of personal protective equipment sets for outbreak investigation teams	36	650	1	50%	11,700.00
	Recommended personal protective equipment sets will be purchased from qualified sugardis, Kabul, kandahar, Herat, barnyan, mazar, kunduz and badakshan in the 9 regional				stributed to WHO 9 regional of	fices Jalaabad,
	Section Total			,		411,700.00
4 Contra	ctual Services (please list works and services to be contracted under the project)					, , , 00.00
Code	Budget Line Description	Quantity	Unit Cost	Duration Recurrence		Total Cost
4.1	Training of staff on IMNCI and CIMNCI, Emergency obstetric care	150	1200		33%	59,400.00
	this is a twelve days training course, estimated average cost to train a national staff pe 124 districts indicated as high risk districts by health and nutrition cluster, this training v	er day is 100 USD (Including venu	e, transportation, meals		
4.2	Train health personel (doctors w orking at DH) on truama care	120	2500		35%	105,000.00
1 7.2	riam nealth personer (doctors w orang at Dr) on truana care				0070	105,000.00

	see Annex 4 - three doctors from each province at DH level this is an 16 days training im USD (Including venue, transportation, meals printing material materials), cost of facilitator and practical training for surgeon on war trauma hence the unit cost is quite high.					
4.3	Training of 42Health staff mainly head of nursing departments from CHC on Triage	120	1500	1	35%	63,000.00
	see Annex 4 - 3 from each province at RH, PH,DH and CHC level this is a five days training meals and materials), cost for an International and national facilitator will be 200 USD per training will be conducted by Emergency NGO					
4.4	Training of staff on guidelines developed for Pertussis, Typhoid , Brucellosis and Anthrax	300	400	1	34%	40,800.00
	This is a 4 days training Estimated average cost to train a national staff per day is 100 US MoPH staff as facilitators	SD (Including venue	e, transportati	on, meals and material	s), , this training will be conducted	cted by WHO and
4.5	Training of health cadre in the area of water quality control, health care waste management and vector control.	300	500	1	34%	51,000.00
	This is a 5 days training with one facilitator from MoPH and one from WHO Estimated aver meals and materials)	age cost to condu	uct w orkshop	for national staff per d	ay is 100 USD (Including venu	e, transportation,
4.6	Training of staff w orking in blood banks, nurses and lab staff on Blood banking standard practice training	180	500	1	33%	29,700.00
	this is a five days training for staff w orking at provincial and district blood transfusion factis 100 USD (Including venue, transportation, meals and materials and facilitation), this train MoPH attached is the locations targeted					
4.7	Conduct training on gender in emergency	20	500	1	100%	10,000.00
	This is a 5 days days training for public health managers, Provincial Public Health office si day is 100 USD (Including venue, transportation, meals and materials), the facilitation will				st to conduct w orkshop for na	itional staff per
4.8	Training for EPR at provincial level in the 23 provinces on on communicable diseases rumor verification and outbreak response	150	200	1	50%	15,000.00
	This is a two day training targeting public health officers working at PHD, CHC, BPHS Estitransportation, meals and materials)	mated average co	st to conduct	w orkshop for national	staff per day is 100 USD (Incl	uding venue,
4.9	Review meeting with MoPH and Partners for Brucellosis, pertussis and Anthrax guidelines	1	1500	1	100%	1,500.00
	This is a one day meeting in Kabul for around 30 participants Estimated average cost to comaterials)	onduct w orkshop	for national st	aff per day is 50 USD	(Including venue, transportation	on, meals and
4.10	Consultancy fees to undertake the HF functionality survey and develop the national emergency response plan	1	600000	1	50%	300,000.00
	International consultancy for ADPC. this cost will only cover the deployment of teams ($\operatorname{\sf ea}$ not yet covered	ach team 2 person	s) to around 1	000 Health facilities in	14 provinces. The institutional	I cost for ADPC is
4.11	Training of Community Health workers in the area of Fisr aid.	500	150	1	70%	52,500.00
	This is a 5 days training, Estimated average cost to conduct workshop for national staff p	per day is 30 USD	(Including ven	ue, transportation, me	als and materials)	
4.12	Health awareness campaigns in high risk provinces	34	15000	1	15%	76,500.00
	Including media announcements meetings and community based activities this includes me 10 USD perdiem+venue) . orientation meeting for medical staff 50 persons each meeting				around 200 people each meet	ting 3000 USD (
4.13	Develop and print IEC material and guidelines	10000	3	1	50%	15,000.00
	Posters and pamphlets, public health messages printed , case management guidelines an	d protocols. each	case manage	ment guideline 10 USD	Pamphlet 1 copy 5 USD Poste	rs each 5 USD
4.14	Respond to public health outbreaks	25	5000	1	20%	25,000.00
	Including allow ances and transportation costs for national investigation teams (each tear person for 3-5 days The cost should also include transport for two cars for three to five		rs) it includes	WHO and MoPH and N	IGO. This cost includes perdie	m 30 USD per
4.15	Workshops for developing, review and update MCM plans at provincial level	100	500	1	50%	25,000.00
	This is a three day workshop in Kabul for 50 persons (5 from each province in this proportion USD (Including venue, transportation, meals and materials)	osal 9 provinces ta	argeted) Estim	ated average cost to c	onduct w orkshop for national	staff per day is
	Section Total					869,400.00
	lease itemize travel costs of staff, consultants and other personnel for project imp	, , , , , , , , , , , , , , , , , , ,				
Code	Budget Line Description	Quantity	Unit Cost	Duration Recurrence		Total Cost
6 Transfer	Section Total	lamantina nartr	10.00			0.00
Code	s and Grants to Counterparts (please list transfers and sub-grants to project imp Budget Line Description	Quantity	Unit Cost	Duration Recurrence		Total Cost
6.1	Contracting for emergency health service provision	3	150000		100%	450,000.00
	AKDN 2 clinics in Bamyan (Shibar, yakaw lang) , AHDS in Kandahar (arghandab, shaw lik andar, Naw ar and qarabagh) to be subcontracted the cost of establishment and running running a temporary and static health unit is around 4200 USD					
	Section Total					450,000.00

Code	Budget Line Descript	tion			Quantity	Unit Cost	Duratio	\m	Total Cost
Code	Budget Line Descript	lion			Quantity	Unit Cost	Recurr		Total Cost
7.1	Transportation cost for project	drugs and suppl	ies for kits and suppl	lies procured under this	1	113017	1	100%	113,017.00
	Transport to south, sou handling, temporary sto			hich is usually 10% of the	e cost of the drugs	for international	and interr	nal transportation cost plus Opera	ational cost (clearance,
7.2	WHO field operatoional	cost			1	2000000	1	14%	280,000.00
	15% operations, 15% lo the needs through this p		curity cost, 30% renta	al of offices in UNOCA ar	nd regions, 10% co	mmunication the	total amo	unt needed is around 2000,000 ar	nd we are coving 14% of
7.3	Renting medicnes and s	supplies emergen	ncy w arehouse in jala	al abad and kandahar	2	100000	1	100%	200,000.00
	The second is to establish	9 Marchauges	one in each region c	urrently we are arrangin	a for one warehous	e in Ramyan and	d the gan	is 7 . w e are requesting CHF sup	
	w arehouses one in Jala			unently we are arranging	y for one warehous	oc in barriyan and	a tile gap	is 7. We are requesting OHF sup	oport to cover the cost of 2
				unentry we are arranging	y for one warehous	oc in barryan and	a trie gap	is 7. we are requesting one sup	593,017.00
Sub Tota	w arehouses one in Jala			urrenuy we are arrangin	g for one warehous	o in banyan and	a trie gap	is 7. we are requesting One sup	593,017.00
	w arehouses one in Jala Section Total	alabad and the se	econd in Kandahar			e ii bailyali alik	a tile gap	is 7. we are requesting One sup	593,017.00 3,470,982.50
ndirect	w arehouses one in Jala Section Total I Direct Cost	alabad and the se	econd in Kandahar			C III Daniyari and	и ше дар	is 7. we are requesting One sup	•
ndirect	warehouses one in Jala Section Total I Direct Cost Programme Support Cost (For NGO, in percent)	alabad and the se	econd in Kandahar			C III Saniyari an	a tile gap	is 7. we are requesting One sup	593,017.00 3,470,982.50 7%
ndirect Audit Co	warehouses one in Jala Section Total I Direct Cost Programme Support Cost (For NGO, in percent)	alabad and the se	econd in Kandahar	ot to exceed 7 per cen		e iii banyar an	Total	is 7. we are requesting One sup	593,017.00 3,470,982.50 7%
ndirect Audit Co	warehouses one in Jale Section Total I Direct Cost Programme Support Co st (For NGO, in percent) ount	alabad and the se	econd in Kandahar	ot to exceed 7 per cen	2015			is 7. we are requesting One sup	593,017.00 3,470,982.50
ndirect Audit Co	warehouses one in Jale Section Total I Direct Cost Programme Support Co st (For NGO, in percent) ount	st PSC rate (in	sert percentage, no	ot to exceed 7 per cen	2015 Q1			is 7. we are requesting One sup	593,017.00 3,470,982.50 7%

LOCATIONS

Location	Activity	Beneficiary Men	Women	Boy	Girl	Total	Percenta
Kabul		7388	7690	6045	6292	27415	5
Kabul -> Kabul	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know nipublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning.					0	
	Activity 2.1.2: Building the capacity of 234 staff w orking in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 w e will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						
(abul -> Dehsabz	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Shakardara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Paghman	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Chaharasyab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line					0	

	Al G-14/31/11/01/1/230-230-1 Toposai						
	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Kabul -> Musayi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know in public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Bagrami	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Qarabagh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Kalakan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Mirbachakot	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Guldara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Khak-e- Jabbar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Surobi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Estalef	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kabul -> Farza	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Bamyan		3840	3997	3142	3270	14249	1
Bamyan -> Bamyan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these					0	

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	Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						
Bamyan -> Sayghan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Bamyan -> Yakaw lang	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month . hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Bamyan -> Panjab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Bamyan -> Shibar	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Bamyan -> Kahmard	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Bamyan -> Waras	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghazni		10222	10640	8364	8705	37931	5
Ghazni -> Ghazni	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (0	
	210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) w hile in 2014 ECHO will support the training of 290 in and in the end of 2014 w e w ill have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO w ill focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and w ill be pre-positioned in the following provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand						

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	offices plus PHD and NGOs) targeting affected communities on hand washing and hygiene promotion targeting women and children as the most affected by Diarrhea and water bore diseases in Nangarhar, Ghazni, Paktika, Farah, kandahar. Provinces. Health messages developed will be targeted towards key groups (females/males/IDPs).			
	Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			
	Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster Activity 3.1.6: Provision and distribution of cholera outbreak control kits for the 5 targeted provinces Nangarhar, Ghazni, Paktika, Farah, kandahar.			
Ghazni -> Khw ajaumari	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management		0	
Ghazni -> Walimuhammad-e- Shahid	In Nangarhar, Ghazni, Paktika, Farah, kandahar Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Waghaz	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Andar	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these miss		0	
Ghazni -> Dehyak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the		0	

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Ghazni -> Zanakhan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Rashidan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the highrisk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Jaghatu	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Qarabagh	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4 : WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4 : Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Giro	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Ghazni -> Naw ur	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-		0	

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Ghazni -> Gelan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Ghazni -> Naw a	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh weather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missi					0	
Paktya		3494	3714	2940	3060	13208	3
Paktya -> Gardez	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage),GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainess numbers per donor. This compliments what ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 200 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new					0	
	provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						

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Paktya -> Ahmadaba	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Paktya -> Zurmat	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHID working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which afels among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Paktya -> Shaw ak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Paktya -> Zadran	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Paktya -> Lija Ahmad Khel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Paktya -> Alikhel (Jaji)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Paktya -> Janikhel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the		0	

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Paktya -> Chamkani	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Paktya -> Dand w a Patan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar		2876	2994	2353	2450	10673	6
Kunar -> Asadabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and will be pre-positioned in the following provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand Activity 2.1.4: Based on the assessment conducted in 2013 all the gaps in 21 provinces blood banks (attached study). A phased approach w as initiated in 2013 to cover these gaps. This includes funding received from ECHO in 2013 w hich supported the 21 BB with consumables and 2 banks with equipment. Currently and under this proposal WHO is proposing support to 5 Blood banks Nouristans (Arans), Kunar PH, th					0	
Kunar -> Watapur	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the highrisk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar -> Narang	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar -> Sarkani	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line					0	
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	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).			
Kunar -> Maraw ara	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4 : WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Kunar -> Shigal Wa sheltan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Kunar -> Dara-e-Pech	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Kunar -> Chaw kay	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Kunar -> Khaskunar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Kunar -> Dangam	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	

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Kunar -> Barkunar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar -> Ghaziabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar -> Chapadara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar -> Nurgal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunar -> Nari	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know in public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Nuristan	, , ,	941	979	770	801	3491	2
Nuristan -> Poruns	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the highrisk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage),GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.4: Based on the assessment conducted in 2013 all the gaps in 21 provinces blood banks (attached study). A phased approach was initiated in 2013 to cover these gaps. This includes funding received from ECHO in 2013 whi					0	

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	phased plan to cover BB gaps from different funding sources. Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster			
Nuristan -> Mandol	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4 : WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5 : Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster		0	
Nuristan -> Duab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which afollas among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Nuristan -> Nurgeram	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Nuristan -> Wama	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know nipublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Nuristan -> Waygal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Nuristan -> Kamdesh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Nuristan -> Barg-e-	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line		0	
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Matal	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Badakhshan		1741	1812	1424	1482	6459	7
Badakhshan -> Fayzabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) w ill contribute to the development of a national emergency health response plan, w hich WHO intends to finalize before the end of 2014 using other sources. during the w orkshop- two persons from each province w ill be trained on MCM planning.					0	
	Activity 2.1.2: Building the capacity of 234 staff w orking in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage w ill be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) w hile in 2014 ECHO w ill support the training of 290 in and in the end of 2014 w e w ill have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training w ill be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - w ill be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						
Badakhshan -> Yaftal-e- Sufla	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Argo	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Arghanjkhw a	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Kohestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Raghestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Yaw an	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Shahr-e- Buzorg	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	

Badakhshan -> Teshkan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Darayem	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Khash	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Baharak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Shuhada	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Darw az- e-Balla	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Kofab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Khw ahan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Keshem	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badakhshan -> Tagab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Takhar		1778	1851	1455	1514	6598	1
Takhar -> Taloqan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Takhar -> Hazarsumuch	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).					0	

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	Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).			
Takhar -> Baharak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Bangi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Chal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Namakab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Farkhar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Kalafgan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Rostaq	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Chahab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Yangi Qala	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Khw ajabahaw uddin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Dasht-e- Qala	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know in public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Takhar -> Khw ajaghar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	

Takhar -> Eshkashem	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Takhar -> Warsaj	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Takhar -> Darqad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunduz		1831	1905	1498	1559	6793	2
Kunduz -> Kunduz	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainess numbers per donor. This compliments what ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.1: Training of 75 health staff working					0	
Kunduz -> Emamsaheb	protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).					0	
	Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Kunduz -> Qala-e-Zal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunduz -> Chardarah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunduz -> Aliabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunduz -> Khanabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kunduz -> Dasht-e- Archi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for					0	

	winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Balkh		2329	2424	1906	1983	8642	1
Balkh -> Mazar-e-Sharif	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1 : Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5 : Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Balkh -> Nahr-e- Shahi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Shortepa	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Daw latabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Balkh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Dehdadi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Charkent	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Marmul	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Khulm	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Kaldar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Sharak-e- Hayratan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these					0	

	missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Balkh -> Charbulak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Chemtal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Sholgareh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Keshendeh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Balkh -> Zari	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Samangan		710	739	581	604	2634	3
Samangan -> Aybak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Samangan -> Hazrat-e- Sultan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Samangan -> Feroznakhchir	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Samangan -> Dara-e- Suf-e- Payin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Samangan -> Dara-e Suf-e-Bala	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Samangan -> Khuram Wa Sarbagh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Samangan -> Ruy-e- Duab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for					0	

	w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Kapisa		810	843	662	689	3004	4
Kapisa -> Mahmud-e- Raqi	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1 : WHO w ill provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs . These plans plus those to be finalized under other source of funding (total around 24) w ill contribute to the development of a national emergency health response plan, w hich WHO intends to finalize before the end of 2014 using other sources . during the workshop- two persons from each province w ill be trained on MCM planning.					0	
	Activity 2.1.2: Building the capacity of 234 staff w orking in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w nat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) w hile in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						
Kapisa -> Nejrab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kapisa -> Kohband	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kapisa -> Hisa-e- Duw um-e- Kohestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kapisa -> Tagab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kapisa -> Alasay	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kapisa -> Hisa-e- Aw al- e- Kohestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Sar-e-Pul		1001	1041	819	852	3713	3
Sar-e-Pul -> Sar-e-Pul	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) w ill contribute to the development of a national emergency health response plan, w hich WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province w ill be trained on MCM planning.					0	
	Activity 2.1.2 : Building the capacity of 234 staff working in the high risk provinces see in the area of trauma						

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	care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments what ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 wew ill have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						
Sar-e-Pul -> Sayad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Sar-e-Pul -> Kohestanat	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Sar-e-Pul -> Sozmaqala	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Sar-e-Pul -> Gosfandi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Sar-e-Pul -> Balkhab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Sar-e-Pul -> Sancharak(sangchark)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor		1230	1280	1006	1047	4563	2
Ghor -> Chaghcharan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Ghor -> Charsadra	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> DoLayna	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> Daw latyar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).					0	

	Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Ghor -> Shahrak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> Tayw arah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> Pasaband	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> Lal Wa Sarjangal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> Tolak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Ghor -> Saghar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi		820	854	671	699	3044	3
Daykundi -> Nili	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know nipublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Daykundi -> Ashtarlay	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi -> Khadir	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi -> kiti	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi -> Gizab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for					0	

	missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Daykundi -> Shahrestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi -> Sang-e- Takht	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi -> Kajran	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Daykundi -> Miramor	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Uruzgan		645	672	528	549	2394	2
Uruzgan -> Tirinkot	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be					0	
Uruzgan -> Chora	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Uruzgan -> Shahid-e- Hassas	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Uruzgan -> Dehraw ud	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000					0	

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	USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Uruzgan -> Khasuruzgan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know nipublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul		562	585	460	478	2085	6
Zabul -> Qalat	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Zabul -> Arghandab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Mizan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Tarnak Wa Jaldak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Shinkay	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Shahjoy	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Kakar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Daychopan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Zabul -> Atghar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	

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	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Zabul -> Naw bahar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Paktika		2870	2988	2349	2444	10651	4
Paktika -> Sharan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments what ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new ev					0	
Paktika -> Matakhan	Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster Activity 3.1.6: Provision and distribution of cholera outbreak control kits for the 5 targeted provinces Nangarhar, Ghazni, Paktika, Farah, kandahar. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 to 100).					0	
	USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar						
Paktika -> Yosufkhel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Paktika -> Sarraw zah(Sarhaw zah)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats,					0	

20	17	Al G-14/6 I/1/010/250-250-1 Toposai				
		(2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar				
	Paktika -> Zarghunshahr	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Paktika -> Yahyakhel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Paktika -> Omna	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Paktika -> Gomal	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Paktika -> Sarobi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Paktika -> Urgun	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).			0	

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	Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			
Paktika -> Naka	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4 : WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4 : Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Paktika -> Janikhel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Paktika -> Wazakhah	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4 : WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4 : Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Paktika -> Wormamay	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Paktika -> Bermel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Paktika -> Gyan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).		0	

	Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility						
	Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high- risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
	Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar						
Paktika -> Ziruk	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Paktika -> Dila	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Paktika -> Turw o (Tarw e)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Khost		1081	1125	884	920	4010	4
Khost -> Khost(Matun)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainese numbers per donor. This compliments what ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new					0	
	provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						

w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765.600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 4 high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparetiense Centre". ADPC and the funding requested under this proposal care to 100.000. USD) is not adequate to cover the entre survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MOHa and NGOs staff. (All provinces). Khost -> Musakhel Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHO working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution ist attached supported to NGOs and PHO working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution ist attached supported to NGOs and PHO emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 4 high-risk provinces which also falsa among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparations executed and logistical s
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Khost -> Terezayi Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).
Khost -> Qalandar Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address

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Khost -> Spera	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Khost -> Bak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Khost -> Jajimaydan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan		962	1002	787	820	3571	1
Jaw zjan -> Shiberghan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Jaw zjan -> Mingajik	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Khw ajadukoh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these					0	

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	missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Jaw zjan -> Qushtepa	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Fayzabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Khanaqa	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Aqcha	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Mardyan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Qarqin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Khamyab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Jaw zjan -> Darzab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Faryab		8161	8495	6678	6950	30284	3
Faryab -> Maymana	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, w hich WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning.					0	
	Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and will be pre-positioned in the following provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response. 100 on						
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Faryab -> Khw ajasabzposh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats,					0	

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	(2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).			
Faryab -> Pashtunkot	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month . hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Shirintagab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Almar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Qaysar	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Kohestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Garziw an	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Bilcheragh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157.800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Daw latabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Andkhoy	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Faryab -> Qaramqol	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these		0	

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	missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Faryab -> Khan-e-Char Bagh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Faryab -> Qorghan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badghis		909	947	744	774	3374	2
Badghis -> Qala-e-Naw	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Badghis -> Muqur	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badghis -> Abkamari	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badghis -> Qadis	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badghis -> Jaw and	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badghis -> Balamurghab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Badghis -> Ghormach	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an		1181	1229	966	1006	4382	1
Parw an -> Charikar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Parw an -> Jabalussaraj	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for					0	

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	winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Parw an -> Shinw ari	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Bagram	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Saydkhel	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Salang	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Ghorband	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Koh-e- Safi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Shekhali	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Parw an -> Surkh-e- Parsa	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Hirat		3386	3524	2770	2883	12563	2
Hirat -> Herat	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Hirat -> Injil	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Hirat -> Kushk	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	

Hirat -> Zindajan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Guzara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Pashtunzarghun	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Karukh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Gulran	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Ghoryan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Adraskan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Farsi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Obe	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Kushk-e-Kohna	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Kohsan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Shindand	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hirat -> Chisht-e-Sharif	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line		0	

•	humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
Farah		1002	1043	820	853	3718	2
Farah -> Farah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.2: Implement 5 aw areness campaigns (this will be done through WHO regional and provincial offices plus PHD and NGOs) targeting affected communities on hand w ashing and hygiene promotion targeting w omen and children as the most affected by Diarrhea and w ater bore diseases in Nangarhar, Ghazni, Paktika, Farah, kandahar. Provinces. Health messages developed will be targeted tow ards key groups (females/ males/ IDPs).					0	
	Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of w ater quality control, health care w aste management in Nangarhar, Ghazni, Paktika, Farah, kandahar Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster Activity 3.1.6: Provision and distribution of cholera outbreak control kits for the 5 targeted provinces Nangarhar, Ghazni, Paktika, Farah, kandahar.						
Farah -> Bakw a	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Farah -> Balabuluk	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Farah -> Khak-e-Safed	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Farah -> Pushtrod	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources					0	

	of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			
Farah -> Qala-e-Kah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Farah -> Shibkoh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Farah -> Lash-e- Juw ayn	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Farah -> Gulestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Farah -> Purchaman	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Farah -> Anardara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap.		0	

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		Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar						
	Hilmand		1713	1783	1402	1459	6357	2
	Hilmand -> Lashkargah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff w orking in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage),GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff w orking in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to					0	
		Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster						
	Hilmand -> Nahr-e-Saraj	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
	Hilmand -> Nad-e-Ali	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
	Hilmand -> Naw a-e- Barakzaiy	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the highrisk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
	Hilmand -> Sangin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
	Hilmand -> Musaqalah	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line					0	
,,	wadaqalari	Activity 1.1.2. Frocure and distribute energency fredicties and supplies to cover around 137,000 people in line					•	40

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	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).			
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Hilmand -> Washer	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hilmand -> Garmser	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hilmand -> Kajaki	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hilmand -> Baghran	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Hilmand -> Reg	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	

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Hilmand -> Deh-e-shu	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Kandahar		10215	10632	8357	8699	37903	5
Kandahar -> Kandahar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.2: Implement 5 aw areness campaigns (this will be done through WHO regional and provincial offices plus PHD and NGOs) targeting affected communities on hand washing and hygiene promotion targeting women and children as the most affected by Diarrhea and water bore diseases in Nangarhar, Ghazni, Paktika, Farah, kandahar. Provinces: Health messages developed will be targeted towards key groups (females/ males/ IDPs). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and	10215	10032	0337	0099	0	3
Kandahar -> Arghandab	Activity 3.1.6: Provision and distribution of cholera outbreak control kits for the 5 targeted provinces Nangarhar, Ghazni, Paktika, Farah, kandahar. Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHOS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh weather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other s					0	
Kandahar -> Zheray	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Kandahar -> Panjw ayi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the highrisk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000).					0	

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		USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar				
	Kandahar -> Daman	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Kandahar -> Shahw alikot	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh weather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these mission			0	
	Kandahar -> Khakrez	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Kandahar -> Mayw and	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Kandahar -> Reg	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar			0	
	Kandahar -> Shorabak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address	104:		0	

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	Kandahar -> Spinboldak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
	Kandahar -> Arghestan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
	Kandahar -> Miyanshin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
	Kandahar -> Nesh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
	Kandahar -> Ghorak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
	Kandahar -> Maruf	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for		0	

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Nimroz		297	309	243	253	1102	2
Nimroz -> Zaranj	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases. these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Nimroz -> Kang	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Nimroz -> Charburjak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Nimroz -> Chakhansur	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Nimroz -> Khashrod	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Wardak		1089	1133	891	927	4040	6
Wardak -> Maydanshahr	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.3: Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and will be pre-positioned in the following provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
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Wardak -> Jalrez	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh weather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services. the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month while for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).					0	

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Wardak -> Nerkh	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month w hile for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap.		0	
Wardak -> Hesa-e- Aw al-e- Behsud	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Wardak -> Daymirdad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the enter survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Wardak -> Chak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Wardak -> Saydabad	Activity 1.1.1: Subcontract three NGOs to provide temporary health facilities established to address humanitarian needs in areas affected by Public health risks and conflict; AHDS in Kandahar (area of conflict), ARC Mob Teams Ghazni/ Faryab/ Wardak areas of conflict and PH risk difficult area to access, AKDN Bamyan (deprived mountainous area, harsh w eather and scattered population) based on 2013 estimates each partner supported access of 50 patient per day for 26 days a month to services, the cost of establishing one temporary emergency mobile health unit or treatment center is around 6700 USD per month w hile for a fixed center its around 4200 USD per month. hence it is expected that with 150,000 USD two facilities can be running for at least 10 moths in areas affected by emergency and public health risks. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these mi		0	
Wardak -> Markaz-e-	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line		0	

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	Behsud	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).						
	Wardak -> Jaghatu	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
	Logar		750	781	614	639	2784	1
	Logar -> Pul-e- Alam	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached					0	
	Logar -> Khoshi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
	Logar -> Mohammadagha	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
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Logar -> Barakibarak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Logar -> Charkh	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Logar -> Kharw ar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Logar -> Azra	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Nangarhar		9624	10016	7874	8195	35709	4
Nangarhar -> Jalalabad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage), GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainess numbers per donor. This compliments what ECHO supported the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 2.1.4: Based on the assessment conducted in 2013 all the gaps in 21 provinces blood banks (attached study). A phased approach was initiated in 2013 to cover these gaps. This includes funding received from ECHO in 2013 which supported the 21 BB with consumables and 2 banks with equipment. Currently and under this proposal WHO is proposing					0	
	women and children as the most affected by Diarrhea and water bore diseases in Nangarhar, Ghazni, Paktika, Farah, kandahar. Provinces. Health messages developed will be targeted towards key groups (females/ males/ IDPs). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar						

	Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - will be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster Activity 3.1.6: Provision and distribution of cholera outbreak control kits for the 5 targeted provinces			
Nangarhar -> Behsud	Nangarhar, Ghazni, Paktika, Farah, kandahar. Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Surkhrod	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Khogyani	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Chaparhar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157.800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Rodat	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Kama	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000).		0	

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Nangarhar -> Kuzkunar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Dara-e- Nur	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Hesarak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Sherzad	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Pachieragam	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Dehbala	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources		0	

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Nangarhar -> Kot	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces w hich also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Batikot	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Goshta	Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Achin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know in public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Shinw ar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar		0	
Nangarhar -> Muhmand Dara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management		0	

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	with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar						
Nangarhar -> Nazyan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Nangarhar -> Durbaba	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.4: Training of 100 health cadre in the area of water quality control, health care waste management in Nangarhar, Ghazni, Paktika, Farah, kandahar					0	
Laghman		842	876	689	717	3124	2
Laghman -> Mehtarlam	Activity 1.1.2 : Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4 : WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 2.1.3 : Procure and distribute 10 trauma kits, to health partners. Initially WHO will focus on areas identified as high risk districts/provinces based on last year experience but these kits can also be distributed to new evolving areas as need arises. Kits procured should enable access to 100 surgical interventions (attached distribution list based on 2013 estimates) and will be pre-positioned in the following provincial hopistals Kunar, Laghman, Paktia, Paktika, Khost, Ghazni, Logar, Wardak, Faryab and Hilmand Activity 3.1.1 : Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new perfussis, typhoid, brucellosis, anthrax case management guidelines. All training will be done by WHO. Activity 3.1.3 : Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Acti					0	
Laghman -> Alishang	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Laghman -> Qarghayi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services).					0	

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Laghman -> Alingar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Laghman -> Daw latshah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 1.1.4: WHO will provide technical and logistical support to the undertaking of the Health Facility Functionality survey. This survey will be undertaken in 14 high-risk provinces which also falls among the high-risk provinces identified by the nutrition and health cluster (List attached). This survey will be contracted to the "Asian Disaster preparedness Centre" ADPC and the funding requested under this proposal (around 300,000 USD) is not adequate to cover the entire survey, additional funding will be needed. WHO will use other sources of funding to cover the gap. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Panjsher		274	286	224	234	1018	1
Panjsher -> Bazarak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.1: Training of 75 health staff w orking in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training w ill be done by WHO. Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces). Activity 3.1.5: Provision of outbreak investigation kits for specimen collection and transportation and personal protective equipment for teams investigating rumors of infectious diseases, these supplies are usually at the provincial labs - w ill be sent top the 23 labs in the 23 provinces targeted by Health and Nutrition cluster					0	
Panjsher -> Shutul	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Panjsher -> Rukha	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Panjsher -> Dara	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Panjsher -> Khenj (Hes- e- Aw al)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Panjsher -> Onaba(Anaw a)	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Panjsher -> Paryan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).					0	
Baghlan		1649	1717	1349	1405	6120	2

Baghlan -> Pul-e- khumri	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 2.1.1: WHO will provide technical and logistical support to the development of 9 Mass casualty management plans in 9 high-risk provinces (Badakshan, logar, faryab, kapisa, uruzgan, Kabul, saripul, kunduz, baghlan). These plans include all health cluster members and PHDs. These plans plus those to be finalized under other source of funding (total around 24) will contribute to the development of a national emergency health response plan, which WHO intends to finalize before the end of 2014 using other sources. during the workshop- two persons from each province will be trained on MCM planning. Activity 2.1.2: Building the capacity of 234 staff working in the high risk provinces see in the area of trauma care triage, GBV and training of blood bank staff. MCM and Triage will be done through Emergency NGO in addition to MoPH for (Triage),GBV WHO, and training of blood bank staff will be done by WHO /MoPH see attached sheet for locations and trainees numbers per donor. This compliments w hat ECHO supported in 2013 (210 trained on triage and MCM, 192 staff working in BB transfusion facilities) while in 2014 ECHO will support the training of 290 in and in the end of 2014 we will have around 926 trained in the area of MCM and Triage and training of blood banks staff using CHF, ECHO funding. Activity 3.1.1: Training of 75 health staff working in all provinces at PHC level on Outbreak response, 100 on new pertussis, typhoid, brucellosis, anthrax case management guidelines. All training wi		0	
Baghlan -> Baghlan-e- Jadid	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Dahana-e- Ghori	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Doshi	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Nahrin	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Tala Wa barfak	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Khenjan	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Andarab	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Khw ajahejran	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known nublic health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).		0	
Baghlan -> Burka	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with whole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD working during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these		0	60/6

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	missions usually include WHO and MoPH and NGOs staff. (All provinces).		
Baghlan -> Pul-e-Hesar	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).	0	
Baghlan -> Dehsalah	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).	0	
Baghlan -> Khost Wa Fereng	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for w interization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).	0	
Baghlan -> Guzargah-e- Nur	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to known public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).	0	
Baghlan -> Fereng Wa Gharu	Activity 1.1.2: Procure and distribute emergency medicines and supplies to cover around 157,800 people in line with w hole country contingency plans and for the temporary health facilities established, to address humanitarian needs. These kits procured will be distributed to NGOs and PHD w orking during preparation for winterization, seasonal floods and disease outbreaks to enable them to respond to know n public health threats, (2013 distribution list attached supported access of around 765,600 people to emergency services). Activity 3.1.3: Technical and logistical support to communicable disease outbreak investigation mission, these missions usually include WHO and MoPH and NGOs staff. (All provinces).	0	

Project Locations (first admin location where CHF activities will be implemented. If the project is covering more than one State please indicate percentage per State)

DOCUMENTS

Document Description

- 1. Copy of List of items in standard WHO kits (2).xls
- 2. RANK data sheet only (2).xlsx
- 3. Copy of Contingency Plan for Floods and AWD-2014.xlsx
- 4. Copy of Winterizaiton plan 2013 2014 Health Cluster with NGOs inputs 5 NOV 2013.xlsx
- 5. TORs of the Task force for implementation of strengthen mass casualty management capacity in Afghanistan.doc
- 6. Annex 1 Emergency Stock Distribution Afghanistan 2013 (3).xlsx
- 7. Annex 2 HFF survey provinces.docx
- 8. Annex 3 WHO activities per location for 2014.xlsx
- 9. Annex 4 number of people trained per donor.xlsx
- 10. Annex 5 BB training participants estimation 14 Jan 2014.xlsx
- 11. Annex 6 Blood bank equipment.xlsx
- 12. Annex 8 WHO standard kits.xls
- 13. Annex 9 training plan.xlsx
- 14. Annex 10 miscellaneous drugs.xlsx
- 15. PPE Module PPE B Heavy Duty.pdf
- 16. Support Supply Kit for Cholera Outbreak, C98-002.pdf
- 17. Annex 13 Monthly NGO monitoring Report from Jan 2014.xlsx
- 18. Annex 7 Beneficiaries.docx