

Requesting Organization :	United Nations Population Fund			
Allocation Type :	2024 1st Reserve Allocation			
Primary Cluster	Sub Cluster	Percentage		
HEALTH		100.00		
		100		
Project Title :	Addressing the Urgent Reproductive Health Needs in the Areas of Return and Vulnerable People in Drought Prone Areas			
Allocation Type Category :				
OPS Details				
Project Code :		Fund Project Code :	CBPF-AFG-24-R-UN-28161	
Cluster :		Project Budget in US\$:	590,832.87	
Planned project duration :	12 Months	Priority:		
Planned Start Date :	01/06/2024	Planned End Date :	31/05/2025	
Actual Start Date:	16/07/2024	Actual End Date:	15/07/2025	
Project Summary :	<p>This project intends to provide reproductive health supplies to health facilities to respond to the immediate lifesaving maternal reproductive health needs of people moving to areas of Return and those in areas prone to drought. This project would support UNFPA's contribution toward the Health Cluster's key priorities, specifically to "provide medical supplies, kits and equipment" (Activity 3). According to the Border Consortium, about 800,000 Afghan returnees are expected to return to Afghanistan by the end of August 2024. About 25 per cent of the returnees are estimated to be women of reproductive age whose vulnerability and need for reproductive health services will be critical. In addition, seasonal patterns of drought, exacerbated by the impacts of climate change, are increasing the vulnerability of people living in drought-prone areas. The impact of drought on women and men is severe with the most prominent of which being on women's health status (due to nutritional deficiencies) and men having to travel to neighboring provinces and countries in search of cheap daily wages. Moreover, drought could displace families which may result in an increase of Gender-Based Violence and exploitation. as well as impact women's livelihoods.</p> <p>This project intends to focus on efforts to provide support to these priority populations. About 25 percent of the population of Afghanistan do not have access to primary healthcare services. Populations in areas of Return, internally displaced persons (IDPs), remote host communities and those living in drought-prone areas are some of the most vulnerable populations and often those with least access to essential health services including lifesaving reproductive health and gender-based violence/psychosocial support.</p> <p>Insufficient lifesaving reproductive health supplies at the service delivery points that serve these vulnerable populations is a critical issue. Under this project, UNFPA intends to address the shortages of supplies of health facilities through the procurement and distribution of essential supplies to support the provision of quality emergency obstetric, reproductive, maternal, neonatal, child, and adolescent health care services. The project will focus on the provinces of Nangarhar, Kunduz, Kabul, Kandahar, Jowzjan, Baghlan, Badghis and Laghman, extending on the support provided under the AHF 1st Reserve Allocation Strategy of 2024.</p> <p>The project will benefit 64,432 individuals (49,927 women [including 5,577 pregnant women], 3,230 men, 1,937 boys, and 9,338 girls over a period of one year.</p> <p>The proposed target health facilities (1 national, 1 regional, 3 provincial, 4 district hospitals, 2 Basic Health Centers [BHCs], 17 Comprehensive Health Center [CHC] and one CHC+) have been selected as their current services are overwhelmed due to increased demand for sexual and reproductive health services and the facilities' low capacity for service delivery. In addition, the nine target provinces (Kandahar, Nangarhar, Kabul, Jowzjan, Laghman, Baghlan, Kunduz, Badghis and Balkh) are home to high concentrations of IDPs which has further overstretched the already overburdened capacity of health facilities. An excel sheet indicating type and location of the health facilities has been uploaded as Annex 1.</p>			
Direct beneficiaries :				
Men	Women	Boys	Girls	Total
3,230	49,927	1,937	9,338	64,432

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
	0	0	0	0	0
	0	0	0	0	0
	2,390	36,984	1,434	6,910	47,718
	0	0	0	0	0
	840	12,943	503	2,428	16,714

Indirect Beneficiaries :

386,580 women, men, boys, and girls will be indirectly benefited via project interventions. The 386,580 persons are family members of the direct beneficiaries.

Catchment Population:**Link with allocation strategy :**

The proposed project extends on the priorities of the AHF 2024 1st allocation:

Priority 1: Scale-up delivery of humanitarian assistance in areas of return and support community-based responses in underserved geographic areas with high rates of return.

Priority 2: Provision of life-saving assistance for drought-affected communities, minimizing risks of further displacements and focusing on geographic areas experiencing drought conditions.

The proposed project contributes towards the RA1 2024 allocation - priority 2 by maintaining access to reproductive health services through existing healthcare facilities in areas prone to drought and areas of return identified by the RA1 2024 allocation strategy.

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$

Other funding secured for the same project (to date) :

Other Funding Source	Other Funding Amount

Organization focal point :

Name	Title	Email	Phone

BACKGROUND**1. Humanitarian context analysis****2. Needs assessment**

A recent report by Health Cluster (Annex 10) revealed that healthcare system in Afghanistan is in a precarious state. It is vulnerable to significant funding deficit and potential closure of medical facilities. The report indicates that In the absence of funding, the operations of many hospitals are in danger. As a result of significant underfunding, services for reproductive health are consistently under-resourced or non-existent. Afghanistan has one of the highest maternal mortality rates in the Asia and the Pacific region (620 deaths per 100,000). In a 2018 Afghanistan Health Survey, 32 percent of women still deliver at home without the support of skilled birth attendants and 76 percent of them do not receive any postnatal care services. The situation has worsened as a result of the current humanitarian crisis with significant disruptions to existing services including unavailability of service providers and essential medical supplies and equipment. This already strained health system is under further pressure with over 470,000 Afghan citizens returning to the country between September 2023 and April 2024. An additional 261,000 expected by Dec 2024.

Drought in Afghanistan is a recurrent and significant natural hazard that poses serious challenges to the country's environment, economy, and population. Afghanistan experiences drought with varying frequency and severity across different regions of the country. Further details on the needs can be found in Annex 2.4 attached

3. Description Of Beneficiaries

4. Grant Request Justification

Reproductive health supplies play a vital role in promoting inclusive public health by preventing unintended pregnancies, reducing maternal and infant mortality rates, and preventing the spread of sexually transmitted infections (STIs), including HIV/AIDS. Investing in reproductive health supplies can lead to significant cost savings for healthcare systems by reducing the need for maternal and infant healthcare services and mitigating the long-term economic and social impacts of unintended pregnancies. Drought conditions will further challenge to the country's environment, economy, and population. Anticipated drought conditions mean that those most vulnerable are at further risk, including women of reproductive age. Preparing to meet increased need by pre-positioning reproductive health supplies will help to save lives and alleviate suffering if and when conditions deteriorate. In response to anticipated needs created by drought conditions, exacerbated by climate change, UNFPA is seeking to preposition supplies to respond to emerging needs in these settings. Both components of the proposed project are in line with the priorities of the Health Cluster, Border Consortium and the AHF's 2024 1st Allocation Strategy.

5. Complementarity

LOGICAL FRAMEWORK

Overall project objective

<p>
Provide lifesaving reproductive health supplies to facilitate provision of emergency obstetric services for Afghan returnees and communities prone to drought. </p>

HEALTH

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
2024 HRP Health CO1: Maintain and increase access to life-saving and life-sustaining coordinated health services and information for those most vulnerable and in need	SO1: Mortality and morbidity of crisis-affected people of all gender and diversities are reduced through timely, multi-sectoral, lifesaving, equitable and safe assistance.	100

Contribution to Cluster/Sector Objectives :

Outcome 1

People living in drought prone areas and Afghans in Areas of Return in need of humanitarian assistance utilized inclusive and impartial lifesaving maternal and reproductive health services.

Output 1.1

Description

Improved availability of reproductive health supplies in the target facilities to enhance access to life-saving maternal and reproductive health services for people in need of humanitarian assistance.

Assumptions & Risks

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	HEALTH	Number of IARH Kits procured	0	0	0	0	345

Means of Verification :

Indicator 1.1.2	HEALTH	Number of beneficiaries of the IARH Kits	3,230	49,927	1,937	9,338	64,432
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Means of Verification :

Indicator 1.1.3	HEALTH						345
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Means of Verification : <p>Monitoring reports, UNFPA Dashboard</p>

Indicator 1.1.4	HEALTH						75
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Means of Verification : <p>Perception Survey</p>

Indicator 1.1.5	HEALTH						65
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Means of Verification : <p>Perception Survey</p>

Indicator 1.1.6	HEALTH	<p>Number of people with disabilities benefiting from the distribution of kits</p>	483	7,925	290	821	9,519
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Means of Verification : Monitoring reports, UNFPA Dashboard

Activities

Activity 1.1.1

Standard Activity : Support delivery of primary health care services including reproductive health, MHPSS and non-communicable diseases

Procurement of IARH Kits:

UNFPA is the global supplier of IARH Kits. IARH Kit is a set of 12 sub-kits and additional complementary commodities that contain essential supplies and equipment for providing reproductive health services in humanitarian settings. The IARH Kit is intended for use during crises when the health system has been disrupted or overwhelmed. The IARH kits contribute to serving the objectives of the Minimum Initial Service Package (MISP) for Reproductive Health with the provision of essential medicines, equipment and supplies needed to respond to a context of emergency. To support delivery of reproductive health care, UNFPA will procure 345 IARH kits which are essential for the provision of reproductive health care.

UNFPA has already obtained an importing license from AFDA to import the IARH kits to Afghanistan. UNFPA Afghanistan country office with the support of its procurement service branch and in close collaboration of health cluster partners will procure IARH Kits. The procurement of kits takes time as UNFPA sources the kits internationally. UNFPA has a long term agreement (LTA) with suppliers of the kits who upon request expedite supply of the kits to Afghanistan. IARH kits will be transported to Afghanistan by Air. The kits will be temporarily pre-positioned in Kabul and delivered by implementing partner to the targeted health facilities in nine provinces. Because of limited availability of the RH kits in the market and high demand due to the increased number of emergencies globally, the availability and delivery of the kits will take approximately 8 months to Afghanistan. Details of the IARH kits can be found in IARH Kit Manual (Annex 2).

Activity 1.1.2

Standard Activity : Not Selected

Distribute IARH Kits:

Once Interagency Reproductive Health Kits are cleared by both Afghanistan Food and Drug Authority (AFDA) and UNFPA Supply Chain Management Unit's Quality Assurance team, these kits will be transferred from UNFPA-managed central warehouse to AFGA-managed central warehouse in Kabul City.

The Reproductive Health Commodity Security (RHCS) will then develop a Distribution Plan with the Humanitarian Unit based on the planned allocations reflected in the proposal. The Distribution Plan that will be shared with the Supply Chain Unit will include allocations to each regional warehouse and allocations per implementing partner for all humanitarian Service Delivery Points. Once the Distribution Plan is cleared by the budget owner, it will be forwarded to the Supply Chain Unit at the Country Office to process the request in the Shipment Tracker.

The Supply Chain Unit will then prepare a Delivery Slip that will be signed by the budget owner, head of the Supply Chain Unit and will be authorized by the Country Representative or his OIC. Once cleared at the UNFPA side, the Supply Chain Unit will then notify AFGA to pick up the supplies from UNFPA and sign the Delivery Slip once the transfer is completed.

Based on the distribution plan shared by the Reproductive Health Commodity Security (RHCS), AFGA Central warehouse team will then prepare the allocations per implementing partner and regional warehouses. The Provincial Warehouse of the implementing partners will be the one to deliver the supplies down to the last mile.

Currently, UNFPA have prepositioned supplies in the regional warehouses bringing the lifesaving drugs and kits closer to the community. The distribution of IARH Kits will be inclusive and targeting health facilities located in Areas of Return and areas prone to the drought. e community especially those that will be affected by any onset of emergency like flooding.

Activity 1.1.3

Standard Activity : Not Selected

Conduct monitoring visits:

Conducting monitoring visits is paramount to ensure that the system in place for supply delivery and utilization is up to the defined standards.

To ensure that the RH kits are properly stored, managed and purposely utilized, UNFPA and its implementing partner (AFGA) will carry out monitoring visits to health facilities where the reproductive health kits are distributed.

In conducting monitoring visits, the project will ensure that the impact of the project on those most vulnerable including people with disabilities (PwDs). Impact will be assessed and feedback will be obtained and used to adapt the project to the needs of vulnerable populations, including PwDs. UNFPA's data collections tools are already inclusive and will cater to the information needs of disability inclusive programming. UNFPA collects disaggregated data on the basis of disability, gender and age to ensure inclusive project implementation and effective monitoring and reporting.

Please refer to Annex 4, for the monitoring plan.

Activity 1.1.4

Standard Activity : Not Selected

Orientation Session for Disability Inclusion: Conduct orientation session to the health workers and management of the health facilities regarding the specific need of women and girls with disabilities. These activities will be conducted through the implementing partner.

Additional Targets :

M & R

Monitoring & Reporting plan

Once the kits arrive in the country and undergo necessary clearances from the Afghanistan Food and Drug Authority (AFDA), distribution plan, tools and checklists will be developed. Monthly reporting will help to ensure that the commodities are available in a timely manner. Consumption Report for kits will be produced and follow-up monitoring activities will be carried out by UNFPA and its implementing partners.

- UNFPA produces annual work plans for each project which are monitored using UNFPA internal mechanisms. Work plan monitoring will take stock of the management of resources and the implementation of work plan activities. The implementing partner will submit work plan progress reports and eFACE forms for each period in which activities are implemented and expenditures incurred. UNFPA will report to OCHA and Health cluster through GMS and Report Hub.

- Implementing partner will conduct monthly field visits. Further details on can be found in Annex 4 uploaded.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1:	1												
Procurement of IARH Kits:	2												
<p>UNFPA is the global supplier of IARH Kits. IARH Kit is a set of 12 sub-kits and additional complementary commodities that contain essential supplies and equipment for providing reproductive health services in humanitarian settings. The IARH Kit is intended for use during crises when the health system has been disrupted or overwhelmed. The IARH kits contribute to serving the objectives of the Minimum Initial Service Package (MISP) for Reproductive Health with the provision of essential medicines, equipment and supplies needed to respond to a context of emergency. To support delivery of reproductive health care, UNFPA will procure 345 IARH kits which are essential for the provision of reproductive health care. UNFPA has already obtained an importing license from AFDA to import the IARH kits to Afghanistan. UNFPA Afghanistan country office with the support of its procurement service branch and in close collaboration of health cluster partners will procure IARH Kits.</p> <p>The procurement of kits takes time as UNFPA sources the kits internationally. UNFPA has a long term agreement (LTA) with suppliers of the kits who upon request expedite supply of the kits to Afghanistan. IARH kits will be transported to Afghanistan by Air. The kits will be temporarily pre-positioned in Kabul and delivered by implementing partner to the targeted health facilities in nine provinces.</p> <p>Because of limited availability of the RH kits in the market and high demand due to the increased number of emergencies globally, the availability and delivery of the kits will take approximately 8 months to Afghanistan. Details of the IARH kits can be found in in IARH Kit Manual (Annex 2).</p>													

<p>Activity 1.1.2:</p> <p>Distribute IARH Kits: Once Interagency Reproductive Health Kits are cleared by both Afghanistan Food and Drug Authority (AFDA) and UNFPA Supply Chain Management Unit's Quality Assurance team, these kits will be transferred from UNFPA-managed central warehouse to AFGA-managed central warehouse in Kabul City. The Reproductive Health Commodity Security (RHCS) will then develop a Distribution Plan with the Humanitarian Unit based on the planned allocations reflected in the proposal. The Distribution Plan that will be shared with the Supply Chain Unit will include allocations to each regional warehouse and allocations per implementing partner for all humanitarian Service Delivery Points. Once the Distribution Plan is cleared by the budget owner, it will be forwarded to the Supply Chain Unit at the Country Office to process the request in the Shipment Tracker. The Supply Chain Unit will then prepare a Delivery Slip that will be signed by the budget owner, head of the Supply Chain Unit and will be authorized by the Country Representative or his OIC. Once cleared at the UNFPA side, the Supply Chain Unit will then notify AFGA to pick up the supplies from UNFPA and sign the Delivery Slip once the transfer is completed. Based on the distribution plan shared by the Reproductive Health Commodity Security (RHCS), AFGA Central warehouse team will then prepare the allocations per implementing partner and regional warehouses. The Provincial Warehouse of the implementing partners will be the one to deliver the supplies down to the last mile. Currently, UNFPA have prepositioned supplies in the regional warehouses bringing the lifesaving drugs and kits closer to th The distribution of IARH Kits will be inclusive and targeting health facilities located in Areas of Return and areas prone to the drought. e community especially those that will be affected by any onset of emergency like flooding.</p>	1																		
	2																		
<p>Activity 1.1.3:</p> <p>Conduct monitoring visits:</p> <p>Conducting monitoring visits is paramount to ensure that the system in place for supply delivery and utilization is up to the defined standards. To ensure that the RH kits are properly stored, managed and purposely utilized, UNFPA and its implementing partner (AFGA) will carry out monitoring visits to health facilities where the reproductive health kits are distributed. In conducting monitoring visits, the project will ensure that the impact of the project on those most vulnerable including people with disabilities (PwDs). Impact will be assessed and feedback will be obtained and used to adapt the project to the needs of vulnerable populations, including PwDs. UNFPA's data collections tools are already inclusive and will cater to the information needs of disability inclusive programming. UNFPA collects disaggregated data on the basis of disability, gender and age to ensure inclusive project implementation and effective monitoring and reporting. Please refer to Annex 4, for the monitoring plan.</p>	1																		
	2																		
<p>Activity 1.1.4:</p> <p>Orientation Session for Disability Inclusion: Conduct orientation session to the health workers and management of the health facilities regarding the specific need of women and girls with disabilities. These activities will be conducted through the implementing partner.</p>	1																		
	2																		

OTHER INFO

Accountability to Affected Populations

UNFPA programme methodologies are localized and informed by affected communities, especially women and girls, and those with disabilities, at all programme stages from design/planning, implementation and monitoring/evaluation/learning.
In programme planning, UNFPA seeks inputs from women and girls to build on existing insights gathered during programme implementation to strengthen the appropriateness of programmes.
At the implementation stage, UNFPA works with implementing partners to ensure that female health service providers, psychosocial counsellors, female community mobilizers and youth educators engage affected women and girls to allow them to guide and adapt the programmes accordingly.
In monitoring, UNFPA uses its twice annual Community Perception Survey to learn about perceptions from women and girls on quality of programmes and challenges they face and use their voices to course correct where necessary.

Implementation Plan

UNFPA and its implementing partners have sufficient human resources and will not recruit any staff for this project. UNFPA established three sub-offices in Herat, Nangarhar, Kandahar, and program offices in Bamyan, Balkh and Badakhshan to ensure direct access and oversight for AAP and to enhance its ability to perform day-to-day monitoring of programme activities. The area and project offices will provide monitoring and oversight in local and neighboring provinces. In combination, UNFPA will use remote monitoring, spot checks, and conduct regular checks and communications. UNFPA secures humanitarian supplies using established global Long Terms Agreements (LTAs) with international companies. Upon delivery to the country, all humanitarian supplies are stored in UNFPA's own warehouse in Kabul. UNFPA is the lead agency within the UN System for the procurement of reproductive health commodities.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
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Environment Marker Of The Project

Gender Marker Of The Project

4- Likely to contribute to gender equality, including across age groups

Justify Chosen Gender Marker Code

Protection Mainstreaming

Protection is at the center of UNFPA's humanitarian programming. UNFPA and implementing partners will include appropriate mechanisms to ensure services can be accessed in a safe, dignified and inclusive manner that supports vulnerable people's right to access reproductive health services. This project builds upon UNFPA's prior work that ensures our service provision monitors protection concerns and promotes inclusion and diversity. The project will consider the needs and perspectives of diverse stakeholders and communities that may be affected by the project and ensure that the project activities can be accessed by all without barriers. The project will also ensure that child protection is mainstreamed and that the project activities do not increase child labor, abuse, neglect, separation from family and recruitment by armed groups.

Country Specific Information

Safety and Security

Access

UNFPA began working in Afghanistan in 1976 and currently has 95 national and 32 international staff and works with 20 implementing partners in 33 out of 34 provinces of Afghanistan. UNFPA also has a strong capacity in the areas of security, humanitarian coordination, AAP, humanitarian access, and supply chain management. UNFPA has established area offices in Herat, Nangarhar, Kandahar and program offices in Bamyan, Balkh, and Badakhshan. UNFPA provides essential and lifesaving services via 435 Family Health Houses (FHHs) and 232 Mobile Health Teams (MHTs) in 23 provinces. Furthermore, UNFPA supports five Basic Health Centres (BHCs) in three provinces: Laghman (2), Nangarhar (2) and Herat (1) to provide reproductive health services in areas with a high number of returnees and IDPs. UNFPA also supports three emergency static clinics in the border areas in Nimroz, Kandahar and Nangarhar and one static clinic at the returnee transit center in Herat. Further details in Annex 17.3

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1. Staff and Other Personnel Costs							
1.1	Humanitarian Specialist (NOC, Step 9)	D	1	9,451.00	12	30.00	34,023.60
	<i>Humanitarian Specialist, based in Kabul. Grade C, Step 9 (includes basic salary and other benefits and entitlements). Responsible for day to day management of the project including, liaison with IP, supporting procurement, logistics, storage arrangements and oversight of program to ensure rationale and strategic use of resources, monitoring and evaluation following kit utilisation.</i>						
	Section Total						34,023.60

2. Supplies, Commodities, Materials							
2.1	Procurement and distribution of IARH Kits	D	345	1,356.57	1	100.00	468,016.65
	Includes cost of 12 IARH Kits as per the BOQ in Annex 8. Reference to activity 1.1.1 & 1.1.2 of the logframe.						
	Section Total						468,016.65
3. Equipment							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
4. Contractual Services							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
5. Travel							
5.1	Conduct monitoring visit	D	3	600.00	1	100.00	1,800.00
	Flights (for Hum Program Specialist) - 3 visits x \$600 (UNHAS return ticket approx. USD \$600)						
5.2	Conduct monitoring visit	D	3	600.00	1	100.00	1,800.00
	DSA (1 Hum Program Specialist) - 3 visits x \$600, (approximate DSA \$100 p/d for 6 days)						
	Section Total						3,600.00
6. Transfers and Grants to Counterparts							
6.1	Subgrant to Afghan Family Guidance Association (AFGA)	D	1	29,341.00	1	100.00	29,341.00
	The implementing partner will be responsible for facilitating customs clearance, receipt of goods, staging/storage in Kabul, logistics to Provincial warehouses, maintenance of stock, distribution to service delivery points, and reporting on last mile delivery.						
	Section Total						29,341.00
7. General Operating and Other Direct Costs							
7.1	Warehouse Storage	D	1	3,000.00	3	100.00	9,000.00
	The estimated space that these shipments will occupy in the staging warehouse of UNFPA for a period of 3 months while the kits are undergoing Customs and AFDA clearance before distributing to the regional warehouse and the last mile activity at the Service Delivery Point level. The kits may arrive by batch, hence, the three months estimation.						
7.2	General Operational Cost	D	1	18,000.00	1	45.55	8,199.00
	3% Fresh Cash Charges from UNDP for cash transfer is amounting to \$18,000. UNFPA will charge \$8,200 (45.5%) of the total amount and the remaining \$9,800 will be covered by UNFPA's regular resources						
	Section Total						17,199.00
SubTotal			355.00				552,180.25
Direct							552,180.25
Support							
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							38,652.62
Total Cost							590,832.87

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Afghanistan > Badghis > Ab Kamari	3.57000	0	0	0	0		H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Badghis > Bala Murghab	3.57000	0	0	0	0		H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Badghis > Ghormach	3.57000	0	0	0	0		H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Badghis > Muqur	3.57000	0	0	0	0		H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Baghlan > Baghlan-e-Jadid	4.97000	0	0	0	0		H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Baghlan > Pul-e-Khumri	5.00000	0	0	0	0		H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...

Afghanistan > Balkh > Chemtal	3.57000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p>
Afghanistan > Jawzjan > Khanaqa	4.12000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p>
Afghanistan > Jawzjan > Shiberghan	2.14000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p> <p>H: Activity 1.1.4:</p> <p>Orientation Session for Disabil...</p>
Afghanistan > Kabul > Bagrami	2.14000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p>
Afghanistan > Kabul > Kabul	5.00000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p>
Afghanistan > Kandahar > Daman	2.14000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p>
Afghanistan > Kandahar > Kandahar	4.97000	0	0	0	0	0	<p>H: Activity 1.1.1:</p> <p>Procurement of IAH: Activity 1.1.2:</p> <p>Distribute IARH Kits: <...</p> <p>H: Activity 1.1.3:</p> <p>Conduct monitoring visits:&nbsp;...</p>

Afghanistan > Kunduz > Ali Abad	3.58000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Kunduz > Chahar Darah	7.89000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Kunduz > Dasht-e-Archi	4.97000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Kunduz > Imam Sahib	4.10000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Kunduz > Qala-e-Zal	3.57000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Laghman > Alingar	4.32000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Laghman > Qarghayi	4.31000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...

Afghanistan > Nangarhar > Behsud	2.07000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Nangarhar > Dara-e-Nur	2.07000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Nangarhar > Goshta	3.57000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Nangarhar > Jalalabad	4.97000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Nangarhar > Kama	2.07000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Nangarhar > Kot	2.07000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...
Afghanistan > Nangarhar > Rodat	2.11000	0	0	0	0	0	H: Activity 1.1.1: Procurement of IAH: Activity 1.1.2: Distribute IARH Kits: <... H: Activity 1.1.3: Conduct monitoring visits:&nbsp;...

Documents	
Category Name	Document Description
Sub Grant Budget	We could not delete this file from GMS
Project Supporting Documents	PSEA Endorsement.pdf
Project Supporting Documents	AAP Endorsement.pdf
Project Supporting Documents	Disability Working Group Endorsment.pdf
Sub Grant Budget	Annex 6 - IP Budget.xlsx
Revision related Documents	Annex 1 - Project Location and Facilities.xlsx
Revision related Documents	Annex 2 - IARH-Kits-6th-Edition_Manual.pdf
Revision related Documents	Annex 3 - Work_Plan_AHF - 2024.xlsx
Revision related Documents	Annex 4 - Monitoring plan.docx
Project Supporting Documents	This file is uploaded as Annex 5 Could not be deleted from here
Sub Grant Budget	Annex 7 - BOQ for IP.xlsx
Project Supporting Documents	Endorsement of the Proposal - GiHA WG.pdf
Project Supporting Documents	Protection Cluster - Endorsment.pdf
Revision related Documents	Annex 5 - Risk Register.xlsx
Revision related Documents	Annex 10 - Impact Paper_ Saving Hospitals from Imminent Collapse.pdf
Revision related Documents	Annex 1 - Project Location and Facilities (1).xlsx
Revision related Documents	Annex 2.4 - Further details on section 2.4 - Specific Needs Assessment (1) (1).docx
Budget Documents	Annex 8 - IARH Kits BoQ.xlsx
Revision related Documents	Annex 13.11 - .docx
Revision related Documents	Annex 13.1 - Further details on Access.docx
Budget Documents	Annex 9 - Project Budget.xlsx
Revision related Documents	Annex 6 - IP Budget (revised) (1).xlsx
Revision related Documents	Annex 7 - BOQ for IP (1).xlsx
Project Supporting Documents	Annex 1 - Project Location and Facilities.xlsx
Project Supporting Documents	Annex 2 - IARH-Kits-6th-Edition_Manual.pdf
Project Supporting Documents	Annex 5 - Risk Register.xlsx
Project Supporting Documents	Annex 3 - Work_Plan_AHF - 2024.xlsx
Project Supporting Documents	Annex 4 - Further details on project monitoring.docx
Project Supporting Documents	Annex 10 - Impact Paper_ Saving Hospitals from Imminent Collapse.pdf
Project Supporting Documents	Annex 1 - Project Location and Facilities (1).xlsx
Project Supporting Documents	Annex 2.4 - Further details on section 2.4 - Specific Needs Assessment (1) (1).docx
Project Supporting Documents	Annex 13.11 - .docx
Project Supporting Documents	Annex 6 - IP Budget (revised) (1).xlsx
Project Supporting Documents	Annex 7 - BOQ for IP (1).xlsx
Project Supporting Documents	Annex 13.1 - Further details on Access.docx
Project Supporting Documents	Annex 1 - Revised Project Location and Facilities.xlsx

Project Supporting Documents	Annex 3 - Revised Work Plan_AHF - 2024.xlsx
Budget Documents	Annex 6 - IP Budget (revised) - 9Jul24.xlsx
Budget Documents	Annex 7 - BOQ for IP - 9Jul24.xlsx
Budget Documents	Annex 6 - IP Budget (revised) - 10Jul2024.xlsx
Revision related Documents	Herat Warehouse Contract.pdf
Revision related Documents	Balkh Warehouse Contract.pdf
Revision related Documents	Kandahar Warehous 1.pdf
Revision related Documents	Kandahar Warehouse 2.pdf
Budget Documents	Annex 7 - BOQ for IP - 10Jul2024.xlsx
Sub Grant Budget	Annex 6 - IP Budget (revised) - 10Jul2024.xlsx
Sub Grant Budget	Annex 7 - BOQ for IP - 10Jul2024.xlsx
Grant Agreement	CBPF-AFG-24-R-UN-28161 - UNFPA-AL-HC Signed.pdf
Grant Agreement	CBPF-AFG-24-R-UN-28161 - HC and UNFPA signed.pdf