



ARCS staff assessing flood-affected people. (Photo: ARCS)

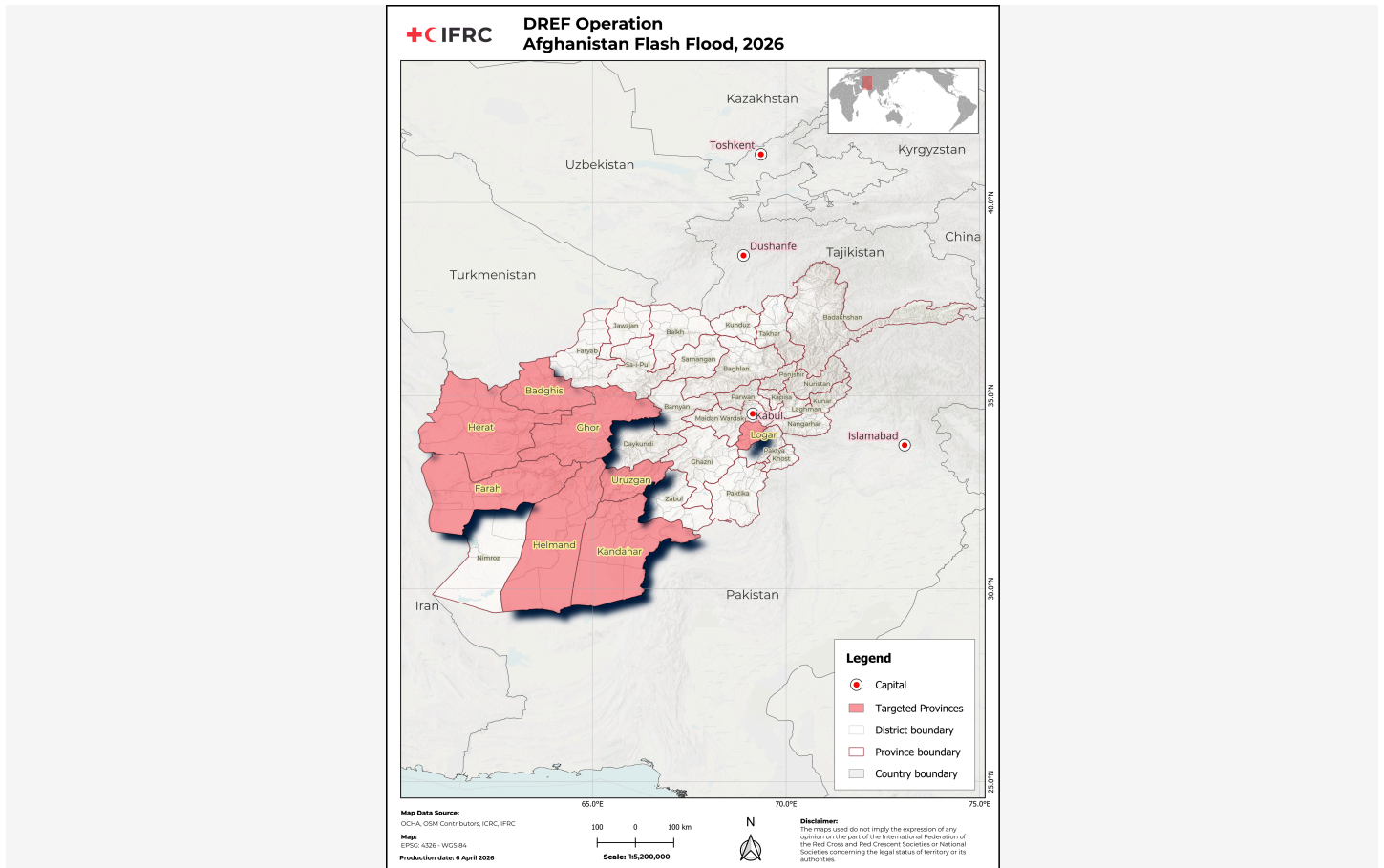
Appeal: MDRAF021	Hazard: Flood	Country: Afghanistan	Type of DREF: Response
Crisis Category: Yellow	Event Onset: Sudden	DREF Allocation: CHF 500,000	
Glide Number: FF-2026-000043-AFG	People Affected: 18,438 people	People Targeted: 12,000 people	
Operation Start Date: 05-04-2026	Operation Timeframe: 6 months	Operation End Date: 31-10-2026	DREF Published: 10-04-2026

Targeted Regions: **Badghis, Farah, Ghor, Helmand, Herat, Kandahar, Logar, Uruzgan**

Description of the Event

Date of event

30-03-2026



Map of targeted areas (Source: IFRC IM)

What happened, where and when?

Beginning on 26 March 2026, heavy and sustained rainfall triggered devastating flash floods across multiple regions of Afghanistan. The flooding continued through early April 2026, with meteorological forecasts indicating persistent rainfall patterns throughout the period. These weather conditions followed an already challenging winter and coincided with the spring thaw season, when snowmelt from mountainous areas compounded rainfall-driven flooding in low-lying regions, creating particularly hazardous conditions for riverine and valley communities.

The floods affected communities across 22 provinces spanning all major regions of the country, including Kabul, Parwan, Kapisa, and Logar in the central region; Daikundi in the central highlands; Laghman and Nangarhar in the east; Balkh, Faryab, Jowzjan, Samangan, Saripol, and Takhar in the north; Baghlan in the northeast; Helmand and Uruzgan in the south; Nimroz in the southwest; Badghis, Ghor, and Herat in the west; and Ghazni and Paktika in the southeast. The nationwide scale of the disaster stretched ARCS response capacity across all 34 provincial branches simultaneously and significantly complicated coordination efforts.

It was against this rapidly evolving situation that 30 March 2026 was identified as the trigger date for this DREF, based on three converging factors: ARCS field reports confirming a sharp and sustained increase in the number of affected families as previously inaccessible communities began reporting damage; ARCS formally requesting international support after exhausting initial response capacity; and meteorological forecasts confirming that continued rainfall and snowmelt would further compound flood risks, making clear the situation was likely to deteriorate rather than stabilize.

Scope and Scale

The flash floods have produced severe negative impacts across four interconnected dimensions, lives, livelihoods, well-being, and infrastructure, with preliminary figures almost certainly understating the true scale of impact given that ongoing rainfall and infrastructure damage continue to restrict access to many affected communities. Preliminary figures compiled by ARCS as of 4 April 2026 record 51 deaths, 114 injuries, and 5 missing persons, with 2,634 families, approximately 18,438 people, directly affected. These numbers are expected to rise significantly as assessments reach more remote areas in the coming days and weeks.

Shelter losses have been catastrophic, with 2,634 houses completely or partially destroyed, leaving families without adequate protection during a period of continued rainfall. The impact on livelihoods is equally severe: 1,730 livestock killed, representing critical productive assets for pastoral and farming households, and approximately 26,841 jeribs (roughly 5,368 hectares) of agricultural land damaged, including standing crops, prepared fields, and irrigation infrastructure, at the worst possible moment. The timing during the spring planting season means crop failure will translate directly into food insecurity in the months ahead. Damage to roads, bridges, and irrigation systems has further isolated communities, restricted humanitarian access, and undermined the foundations of agricultural recovery.

The humanitarian impact is significantly compounded by prevailing economic and market conditions. According to the WFP Countrywide Weekly Market Report for the fourth week of March 2026, the closure of Pakistan border crossings has disrupted trade flows and driven severe year-on-year food price increases: rice up 27–52 per cent, wheat grain up 18 per cent, and cooking oil up 11 per cent. These increases directly undermine the ability of flood-affected households to meet their food needs, even where cash assistance is available. Reduced labour availability, documented at 1.7 days per week, a 19 per cent decrease on the previous year, further limits income opportunities for households that have already lost agricultural livelihoods. As documented in the OCHA Regional Snapshot for 17–30 March 2026, the Middle East energy crisis has also disrupted fertilizer supply chains, with urea prices up 23 per cent and DAP up 14 per cent year-on-year, alongside a 6 per cent rise in diesel prices, creating compounding barriers to agricultural recovery that extend well beyond the immediate physical destruction.

Within affected communities, women and girls face increased protection risks in displacement settings; children are particularly vulnerable to waterborne disease, malnutrition, and disrupted care; and elderly people and persons with disabilities faced compounded challenges during the sudden onset of the disaster, including reduced capacity to evacuate and more limited access to emergency services in damaged areas. Pre-existing vulnerability was already acute before the floods. An estimated 21.9 million people, nearly half of Afghanistan's population, were already in need of humanitarian assistance, driven by years of conflict, economic collapse, and repeated climate shocks. The floods have struck communities with deeply limited capacity to absorb further loss or recover independently.

Given the nationwide scale of the disaster and the depletion of ARCS preparedness stocks and financial reserves through responses to multiple recent emergencies, the National Society's locally mobilized resources, including 130 staff and 182 volunteers across 34 provincial branches, are insufficient to meet the full scope of identified needs. This DREF operation is therefore essential to enable ARCS to deliver timely assistance to the most vulnerable flood-affected households while preserving capacity to respond to potential further emergencies in the weeks ahead.

Source Name	Source Link
1. Afghanistan: Humanitarian Needs and Response Plan 2026 Summary	https://www.unocha.org/publications/report/afghanistan/afghanistan-humanitarian-needs-and-response-plan-2026-summary
2. ACAPS Anticipatory Report: Afghanistan - The key risks Afghans face between 2024–2030 that are driven or compounded by climate change (31 July 2024)	https://reliefweb.int/report/afghanistan/acaps-anticipatory-report-afghanistan-key-risks-afghans-face-between-2024-2030-are-driven-or-compounded-climate-change-31-july-2024
3. IPC ACUTE FOOD INSECURITY ANALYSIS SEPTEMBER 2025 – SEPTEMBER 2026	https://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC_Afghanistan_Acute_Food_Insecurity_Sept2025_Sept2026_Report.pdf
4. Afghanistan: Weekly Market Report: Issue 289: Week 4 – March 2026	https://reliefweb.int/report/afghanistan/afghanistan-weekly-market-report-issue-289-week-4-march-2026

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	Yes
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Did it affect the same population group?	Yes
Did the National Society respond?	Yes
Did the National Society request funding form DREF for that event(s)	Yes
If yes, please specify which operation	MDRAF015

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

While Afghanistan has experienced similar flood events in recent years, to which ARCS responded using locally mobilized resources, the country is currently facing one of the world's worst humanitarian crises, fueled by deteriorating economic conditions, climatic shocks, and pre-existing needs. Climate change has exacerbated Afghanistan's susceptibility to extreme weather events, and the country's precarious position is further underscored by its very high ranking on the climate risk index.

With an estimated 21.9 million people nationwide, representing almost half of the country's population, needing assistance in 2026 according to OCHA Humanitarian Overview, the humanitarian situation is dire. These types of flooding incidents have increased, with previously unaffected regions now experiencing flash floods. This break from past weather patterns presents new challenges for impacted areas and worsens the pre-existing humanitarian situation. Droughts, heatwaves, flooding, and desertification are among the additional climate-related hazards that Afghanistan faces.

The country is experiencing increasingly frequent and intense climate hazards, which severely affect livelihoods and limit access to basic needs and essential services (ACAPS, 2024). Desertification, land degradation, and water contamination cause irreversible damage to agricultural land and water resources (ACAPS, 2024). As of September–October 2025, approximately 13.8 million people, 28 per cent of the population, were classified in IPC Phase 3 or above (Crisis or worse), with food insecurity driven by climatic shocks including severe drought (IPC, 2025).

Lessons learned:

Multipurpose cash assistance has proven highly effective in enabling affected households to address their diverse and immediate needs with dignity and choice. ARCS will continue to prioritize cash modality where markets are functional and Financial Service Providers are available. Accordingly, MPCA is the primary modality for this operation, with 1,000 households receiving a one-time transfer of AFN 10,500 (approximately CHF 133) through a contracted FSP, aligned to the Cash and Voucher Working Group minimum expenditure basket.

Community-based targeting with transparent criteria reduces tensions and ensures that the most vulnerable households are reached. Beneficiary selection involving community leaders, local authorities, and village committees provides local validation and builds trust, particularly for isolated or marginalised households who might otherwise be overlooked. In this operation, ARCS provincial volunteers will conduct household registration using defined vulnerability criteria, with beneficiary lists validated through community and local authority consultation prior to each distribution. Selection criteria will be communicated in full to both recipients and non-recipients at every distribution point, and all volunteers will be equipped with a Q&A sheet to ensure consistent and accurate community information sharing.

Extending distribution periods and increasing distribution days accommodates absentees and late arrivals, ensuring that as many eligible households as possible are reached. Distribution points are established in locations close to affected populations to reduce travel time and physical barriers for the most vulnerable groups. This operation will apply multi-day distribution schedules across all priority provinces. Post-distribution monitoring will specifically track whether households unable to attend on the initial distribution date were subsequently reached, with corrective action taken where coverage gaps are identified.

Distribution schedules that consider local culture, gender dynamics, and daily routines reduce wait times and ensure that diverse groups (including women, elderly persons, and people with disabilities) can access assistance safely and conveniently. In this operation, schedules will be planned in consultation with community leaders to reflect local norms, prayer times, and mobility constraints. Dedicated time slots will be allocated for female-headed households, elderly persons, and people with disabilities.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?	Yes
What was the risk level for Child Safeguarding Risk Analysis?:	High



Current National Society Actions

Start date of National Society actions

28-03-2026

Shelter, Housing And Settlements	<p>ARCS assisted with search and rescue efforts following structural collapses caused by heavy rains. The National Society provided immediate relief in five affected provinces through the provision of tents, kitchen sets, jerrycans, tarpaulins, and blankets for 9 affected households, and undertook joint distributions with authorities.</p> <p>Through this DREF operation, ARCS will scale up its response to cover additional hard-hit provinces with essential relief items and support recovery of the most affected populations.</p>
Multi Purpose Cash	<p>As part of its initial response, ARCS distributed MPCA (multipurpose cash assistance) to 14 affected households who lost family members or sustained injuries in the floods. This immediate assistance provided critical support to the most severely impacted households during the emergency phase. However, this initial response remains well below the required level to meet needs, with the majority of flood-affected families yet to receive any livelihood or cash support. The DREF operation will enable ARCS to scale up MPCA provision to reach 1000 affected households across the 8 most affected provinces.</p>
Health	<p>ARCS has deployed 10 existing Mobile Health Teams (MHTs) across the most affected areas in 10 provinces, providing primary health care services, nutrition services, and health awareness sessions. ARCS mobilized 10 volunteers per province in the six provinces with the highest level of destruction to provide first aid and support rescue activities. MHTs previously deployed for earthquake, IDP, and returnee support remain on standby to respond if sudden health needs arise.</p>
Protection, Gender And Inclusion	<p>Protection, gender, and inclusion considerations are being streamlined throughout the provided relief assistance.</p>
Coordination	<p>At the field level, ARCS branches collaborate with local authorities and agencies through committees established for emergency coordination. The Afghan National Disaster Management Authority (ANDMA) serves as the secretariat for disaster coordination, of which ARCS is a part.</p>
National Society Readiness	<p>ARCS is a primary national partner for responding to crises across Afghanistan and facilitates disaster preparedness activities through its 34 provincial branches. ARCS's presence and local networks are exceptionally well established, enabling the National Society to reach vulnerable populations in highly remote and hard-to-reach areas where other humanitarian actors cannot operate.</p> <p>ARCS has a five-year Strategic Plan (2026) with a strategic goal of "Communities with strengthened life-saving resources and capacities to respond to and recover from natural disasters, health emergencies, and conflict-generated shocks." The National Society has 3,000 staff (20 per cent female) and 24,600 active volunteers (27 per cent female) from the community level.</p> <p>ARCS branches are at the frontline of responses. Upon receiving reports about the flash floods, ARCS branches deployed trained staff and volunteers to conduct rapid assessments and support search and rescue efforts. Branch capacity is augmented by Disaster Relief Units (DRUs) at the regional level that coordinate operations as required.</p>
Assessment	<p>ARCS deployed Branch Disaster Response Teams (BDRTs), accompanied by Mobile Health Teams (MHTs), to conduct rapid assessments of damages and impacts.</p>



	<p>Assessments are ongoing given the number of provinces impacted and the geographic scale of the event. With continued rainfall and difficult conditions on the ground, the full scale of the impact is still being determined.</p> <p>The findings of initial assessments and secondary sources have informed the design of this operation. Assessments revealed that the greatest and most urgent needs are in Shelter/NFI, Multipurpose Cash Assistance, Health, WASH, and Protection. Ongoing assessments may identify additional needs, and the response strategy will be adjusted accordingly.</p>
Resource Mobilization	ARCS manages an Emergency Fund that provides resources to provincial branches to support initial response. Through its information management mechanisms, ARCS communicates volunteer mobilization needs and provides information to guide interventions.
Activation Of Contingency Plans	ARCS developed a Multi-Hazard Contingency Plan in late 2023, which includes potential threats from severe weather events. The National Society activated existing response procedures through regional and branch mechanisms and mobilized resources to provide essential relief items.

IFRC Network Actions Related To The Current Event

Secretariat	<p>The IFRC Country Delegation supports the coordination with clusters, inter-agency working groups, and humanitarian actors at national and sub-national levels. The IFRC continues to monitor the situation across the affected provinces and maintains communication with ARCS accordingly.</p> <p>The IFRC has provided support for the development of this DREF application and will continue to support the ARCS in submitting field reporting to the GO platform. The IFRC maintains stocks of relief items ready for release to supplement ARCS's ongoing response once the DREF is approved.</p>
Participating National Societies	<p>At the time of drafting this DREF application, formal commitments from Partner National Societies (PNS) are still being finalised given the recent onset of the emergency. A Movement Coordination meeting has been scheduled for 6 April 2026 to present the ARCS response plan to PNS partners and map planned contributions. Expected participants include representatives from the Danish Red Cross, Norwegian Red Cross, Qatar Red Crescent, and Turkish Red Crescent.</p> <p>Pending the completion of the field needs assessment, the Danish Red Cross (DRC) is in active discussion with ARCS regarding potential support for approximately 400 families through Multi-Purpose Cash Assistance (MPCA). ARCS has also been informed of the possibility of activating the crisis modifier under the DRC/Austrian Red Cross (AutRC) consortium, subject to alignment with the ARCS operational plan and donor notification requirements.</p> <p>The Norwegian Red Cross (NoRC) supports ARCS in the delivery of primary health care services, including referral care, across the eight targeted provinces through an established network of health facilities. A total of 20 facilities are currently supported, distributed as follows: Badghis (1 Basic Health Centre, 1 Mobile Health Team); Farah (1 Basic Health Centre); Ghor (1 Basic Health Centre); Helmand (1 Basic Health Centre, 2 Mobile Health Teams); Herat (2 Basic Health Centres, 1 Sub-Health Centre, 2 Mobile Health Teams); Kandahar (1 Basic Health Centre, 2 Mobile Health Teams); Logar (1 Basic Health Centre, 1 Sub-Health Centre, 1 Mobile Health Team); and Uruzgan (1 Sub-Health Centre, 1 Mobile Health Team).</p>



ICRC Actions Related To The Current Event

By the time of drafting this DREF application, the nature and scope of ICRC's engagement in the current flood response are still being established and will focus on areas affected by the armed conflict. A Movement Coordination meeting scheduled for 6 April 2026 will provide an opportunity to align ICRC and ARCS response plans, clarify respective roles, and identify areas of complementarity to ensure a coherent and coordinated Movement response across the affected provinces.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	The government has established committees for coordinating the responses to the needs across the affected provinces.
UN or other actors	The UN and other humanitarian agencies have scaled up their responses in the affected provinces to accommodate the needs of the affected population.

Are there major coordination mechanism in place?

The Humanitarian Country Team (HCT) serves as a strategic, policy-level, and decision-making forum that guides principled humanitarian action in Afghanistan. IFRC attends weekly as representative of the membership.

ARCS and IFRC participate in national-level monthly coordination meetings of the Food Security and Agriculture Cluster, Cash and Voucher Working Group, Emergency Shelter and Non-Food Items (ES-NFI) Cluster, Accountability to Affected Population Working Group, Health Cluster, WASH Cluster, and Gender in Humanitarian Action Working Group. IFRC also attends the Inter-cluster Coordination Team meeting.

Needs (Gaps) Identified



Shelter Housing And Settlements

The flash floods have caused severe damage to housing infrastructure across 22 provinces, with 2,634 houses completely or partially destroyed. Families whose homes were damaged or destroyed are exposed to the elements during a period of continued rainfall and unstable weather conditions. Many affected households have lost essential household items, including bedding, cooking utensils, and water storage containers, leaving them unable to meet their basic domestic needs.

Low-lying areas and settlements along riverbeds remain at high risk of further flooding as rainfall is expected to continue, with daily accumulation levels averaging 30mm in central, southern, southeast, and southwest regions. Displaced families are sheltering in damaged structures or with host communities, creating overcrowding and increased vulnerability. Without adequate shelter materials and basic household items, affected populations face heightened exposure to weather-related illness, loss of dignity, and deteriorating living conditions. Women, children, elderly persons, and people with disabilities are particularly vulnerable due to their limited mobility and increased protection risks in damaged or temporary shelter arrangements.





Livelihoods And Basic Needs

The floods have severely undermined the livelihoods and food security of affected households across all 22 provinces. The destruction of 1,730 livestock and damage to approximately 26,841 jeribs (5,368 hectares) of agricultural land at the start of the spring planting season has eliminated primary income and food sources for pastoral and farming households, many of whom had no savings or safety net to absorb the shock.

These production losses coincide with acute market stress. According to the WFP Countrywide Weekly Market Report (fourth week of March 2026), the closure of Pakistan border crossings has driven rice prices up 27-52 per cent (depending on variety), wheat grain up 18 per cent, and cooking oil up 11 per cent year-on-year. Daily labour availability has declined to 1.7 days per week, a 19 per cent decrease compared to the prior year, severely limiting cash income for households who have already lost agricultural livelihoods. Without targeted intervention, affected families face immediate hunger and deepening poverty, with limited capacity to rebuild without external support.



Multi purpose cash grants

Flood-affected families are facing severe food insecurity, creating an urgent need for humanitarian assistance. The crisis has overwhelmed the capacity of existing response mechanisms, prompting local authorities and humanitarian partners to call for additional support to address immediate needs.

According to ARCS initial needs assessment, as shared in ARCS's narrative report on 4 April and latest situation update, affected households have limited access to food and essential services, putting them at increased risk of hunger and malnutrition. Vulnerable groups, including children, pregnant and lactating women, and the elderly, are especially vulnerable due to reduced access to nutritious food and healthcare services. While emergency food assistance is urgently needed, the lack of sustainable food security and livelihood opportunities creates significant challenges for long-term recovery and resilience in the affected communities. Without viable livelihood options, many flood affected families remain dependent on short-term humanitarian aid, making it difficult for them to restore their sources of income or rebuild their lives.

Additionally, the absence of comprehensive needs assessments and the lack of direct engagement with affected populations due to continues rainfall and flood the ability of humanitarian actors to design targeted, effective, and context-appropriate interventions. To address these urgent challenges, the response will prioritize emergency food assistance, including the provision of multipurpose cash assistance in the most affected areas. At the same time, comprehensive needs assessments should be conducted to better understand the evolving needs of flood affected populations and to inform tailored response strategies.



Health

The late March to early April 2026 floods has had significant impacts on the health and wellbeing of affected communities across multiple provinces. The destruction and damage of houses have displaced families and created conditions that severely limit access to emergency and routine healthcare. Transport routes, including vital access roads, were damaged or washed away, further hindering access to health facilities and delaying critical care for trauma victims and people with chronic conditions.

These acute impacts unfold within a national context of profound health system fragility. The WHO Public Health Situation Analysis (March 2026) highlights that Afghanistan's health system is under extreme pressure due to multiple structural and resource constraints, including chronic underinvestment, reductions in international health funding, and restrictive policies that limit women's access to healthcare. The already widespread burden of malnutrition affecting 3.7 million children under five and 1.2 million pregnant and breastfeeding women, places flood affected populations at an even higher risk of health complications. In areas where health services have been disrupted by flood damage, vulnerable groups now face additional obstacles to accessing life-saving care, increasing the likelihood of preventable illness, deterioration of existing conditions, and potential rises in maternal and child mortality.

The health risks associated with communicable diseases have also intensified. Flood contamination of water sources increases the probability of Acute Watery Diarrhea (AWD) and other waterborne disease outbreaks, particularly in overcrowded temporary shelters or damaged settlements. As health facilities struggle to maintain functionality and outreach, disease surveillance systems become less effective, reducing early detection and response capacity during a period of heightened risk.





Water, Sanitation And Hygiene

The floods have severely impacted water, sanitation, and hygiene conditions across affected provinces. Extensive damage to water supply systems, including the destruction of irrigation canals, household water networks, and local wells, has compromised access to safe drinking water. There are reports of widespread destruction of water related infrastructure across multiple provinces, making it difficult for households to secure clean water for drinking, cooking, or hygiene. Flooded latrines, damaged sanitation facilities, and widespread contamination have increased the likelihood of open defecation, environmental pollution, and public health risks. These immediate impacts occur in a national environment already characterized by limited access to safe water and adequate sanitation.

According to OCHA's 2026 humanitarian overview, nearly 21.9 million people, approximately 45% of the population, were projected to require humanitarian assistance even before the recent floods, with WASH identified as a critical need. Existing pressures from drought, displacement, and deteriorating rural water systems have already weakened community resilience. The new wave of flooding has intensified these challenges by contaminating water sources, destroying household hygiene items, and disrupting sanitation infrastructure.

As a result, families face severe difficulties in maintaining hygiene practices, increasing the risk of AWD outbreaks and other communicable diseases. Displaced families, in particular, face inadequate access to safe water and sanitation in temporary shelter sites. Insufficient hygiene materials such as soap, menstrual hygiene supplies, and safe water containers further increase vulnerabilities, especially among women and girls. Without timely intervention, WASH related risks may escalate rapidly, leading to the deterioration of health outcomes and compounding the overall humanitarian impact.



Protection, Gender And Inclusion

The floods have exacerbated pre-existing protection risks and vulnerabilities, particularly for women, girls, elderly persons, people with disabilities, and female-headed households. Displacement, loss of livelihoods, and destruction of homes have increased exposure to protection threats, including gender-based violence, exploitation, and family separation. Women and girls face specific risks related to privacy, safety, and dignity in damaged shelters and temporary displacement settings where sanitation facilities, lighting, and secure spaces are inadequate.

Female-headed households, widows with young children, elderly caregivers, and households with members with disabilities face compounded vulnerabilities due to their limited mobility, reduced access to information, and exclusion from decision-making processes. Many of these groups have difficulty accessing humanitarian assistance due to physical barriers, social stigma, or lack of awareness about available services.

The lack of dignity kits, including menstrual hygiene materials, soap, undergarments, and other personal items, leaves women and girls without essential supplies to maintain their health, hygiene, and dignity. Protection messaging and awareness of available services are limited, leaving affected populations unaware of where to seek help for protection concerns, health services, or psychosocial support. Furthermore, the absence of gender and diversity sensitive programming risks excluding the most vulnerable groups from receiving the assistance they need.



Community Engagement And Accountability

Following the floods, affected communities face multiple challenges in accessing timely, relevant, and accurate information about available humanitarian assistance. The lack of established feedback mechanisms and two-way communication channels prevents communities from voicing their concerns, preferences, and complaints, limiting their participation in the design and delivery of assistance.

Vulnerable groups, including women, elderly persons, people with disabilities, and marginalized communities, often face additional barriers to accessing information and participating in decision-making due to limited mobility, illiteracy, language barriers, or social exclusion. Without inclusive and accessible communication mechanisms, these groups risk being overlooked or excluded from assistance.

The absence of systematic community engagement undermines trust between affected populations and humanitarian actors and increases the risk of errors in beneficiary targeting, duplication of assistance, or misalignment between assistance provided and actual needs. Communities are also unable to report issues such as protection concerns, fraud, exploitation, or dissatisfaction with assistance when feedback channels are not established or widely known. Continuous communication and community engagement are essential to ensuring operational success, building trust, and strengthening long-term community resilience, but these mechanisms are currently insufficient.



Any identified gaps/limitations in the assessment

The preliminary figures presented in this DREF are likely to underestimate the true scale of impact. Ongoing rainfall and damage infrastructures and blocked roads have restricted access to a number of affected communities, particularly in remote and mountainous areas, preventing comprehensive assessment coverage across all 22 provinces.

Figures will be revised upward as access improves and assessments are completed. The simultaneous onset of flooding across 22 provinces has stretched ARCS assessment capacity, making standardized data collection difficult and resulting in uneven information quality across regions.

Operational Strategy

Overall objective of the operation

This DREF operation aims to deliver immediate, multi-sectoral humanitarian assistance in order to reduce suffering, protect lives, and support early recovery for 12,000 flood-affected individuals, across 8 provinces of Afghanistan affected by the flash floods that began on 26 March and intensified by the 30 March 2026, by providing multipurpose cash assistance to 1,000 households, non-food items to 300 households, WASH support including family hygiene kits and safe water access to 350 households across 8 provinces, mobile health services through three Mobile Health Teams deployed in Logar, Laghman, and Uruzgan, and community-based health and first aid training for 200 volunteers, and ensuring the dignity, health, and resilience of the most vulnerable affected populations, including women, children, elderly, and people with disabilities, while strengthening ARCS's capacity to respond to ongoing and potential future emergencies over a six month operation period.

Operation strategy rationale

This operation delivers immediate, multi-sectoral assistance to the most severely flood-affected households across 8 priority provinces, Farah, Kandahar, Herat, Badghis, Helmand, Uruzgan, Logar, and Ghor, where field assessments confirmed the greatest concentration of damage and need.

Shelter damage is the first systematically verifiable indicator in sudden-onset flood emergencies and forms the basis for the 2,634 households recorded as affected at the time of DREF submission. This figure represents the minimum verified baseline of directly affected people, not a comprehensive measure of total humanitarian impact, as it does not capture households who suffered livelihood, agricultural, or livestock losses without structural shelter damage, nor communities that remained inaccessible at the time of assessment. The total affected population is expected to rise considerably as access improves and multi-sector assessments are completed across all 22 provinces.

Resources are concentrated in these provinces to ensure meaningful impact rather than diluted coverage across all 22 affected areas. Assistance is prioritized for households with the greatest losses and least capacity to recover without external support, with specific targeting of female-headed households, households with children under five, elderly caregivers, persons with disabilities, and pregnant and lactating women.

Cash and Voucher Assistance is the primary modality for this operation. The floods have simultaneously destroyed homes, livestock, agricultural land, and household assets, meaning needs vary significantly across families. A one-time cash transfer of AFN 10,500 (approx. CHF 133) per household, aligned with the Cash and Voucher Working Group minimum expenditure basket, gives 1,000 households the flexibility to address their most pressing immediate need. The intended outcome is that 1,000 targeted households are able to meet their immediate basic needs in the weeks following the floods, reducing negative coping behaviours such as reducing meal frequency or selling productive assets.

Emergency shelter and NFI distributions complement the cash component for the most severely affected households where physical assets have been entirely lost. Distributions of 300 family tents, 300 kitchen sets, 600 tarpaulins, 600 jerrycans, and 2,100 blankets will reach approximately 300 households (2,100 people) in the hardest-hit locations, prioritizing families whose homes are completely destroyed and who are living in the open or in damaged structures during continued rainfall. The intended outcome is that targeted households have adequate temporary protection from the elements and the essential items needed to maintain basic domestic functions while longer-term shelter solutions are established.

Shelter targeting will prioritize households whose homes are fully destroyed or structurally unsafe, especially those currently residing in open spaces, damaged structures, or overcrowded host family arrangements. In addition to family tents and core household items, ARCS will provide key safer shelter guidance on anchoring/ tent installation, drainage, and safe siting to reduce secondary flood risks during the continued rainfall period

Three Mobile Health Teams will be deployed in Logar, Laghman, and Uruzgan, provinces identified through ARCS field assessments as



having the highest levels of health service disruption relative to need. Each MHT will provide outpatient consultations, nutrition screening, reproductive health services, immunization outreach, and psychological first aid. The intended outcome is that 12,000 flood affected people have access to primary health care services, reducing preventable illness, maternal and child mortality risk, and the burden of untreated trauma. CBHFA (Community-Based Health and First Aid) training for 200 volunteers across 10 provinces extends health promotion reach beyond MHT coverage areas and builds lasting local response capacity within ARCS branches.

WASH support directly addresses the disease transmission risks created by flood contamination of water sources and destruction of sanitation infrastructure. Distribution of 350 family hygiene kits (containing soap, Aqua-tabs, laundry basins, and related items) and water trucking operations delivering 70,000 liters of safe drinking water, combined with hygiene promotion and household water treatment awareness sessions, target 350 households across the priority provinces. The intended outcome is a measurable reduction in WASH-related disease risk, particularly Acute Watery Diarrhoea, among the most vulnerable flood-affected households in areas where water systems remain compromised.

PGI (Protection, gender, and inclusion) activities are integrated across all sectors rather than delivered as a standalone programme. Training of 130 staff and volunteers on PSEA, disability inclusion, and gender sensitive programming ensures that PGI standards are operationalized at every distribution point and service delivery location. Distribution of 300 dignity kits to women and girls addresses immediate needs that are frequently overlooked in emergency response. The establishment of referral pathways for protection concerns ensures that cases identified during field operations. The intended outcome is that the most vulnerable groups, particularly women, girls, and persons with disabilities, are able to access assistance safely and with dignity throughout the operation.

CEA (Community engagement and accountability) mechanisms are embedded across all sectors from the outset. Selection criteria will be communicated transparently to both recipients and non-recipients. Two rounds of PDM (Post-distribution monitoring), exit surveys at key distribution points, and digital feedback collection through Kobo-based help desks will ensure that community concerns are captured and acted upon. The intended outcome is that affected people are consistently informed, have accessible means to raise concerns, and that operational adjustments are made in response to feedback throughout the six-month period.

Targeting Strategy

Who will be targeted through this operation?

The operation targets flood affected households across eight priority provinces, Farah, Logar, Kandahar, Herat, Badghis, Uruzgan, Helmand, and Ghor, selected based on field assessments confirming the highest concentration of damage and need. Assistance is prioritised for households with the greatest losses and the least capacity to recover without external support.

Targeting will be conducted in collaboration and consultation with local administrations, village heads, and humanitarian partners, guided by the existing coordination framework in Afghanistan.

Households will be eligible for assistance if they meet one or more of the following primary criteria:

- Households whose house was destroyed or damaged by the floods
- Households that have engaged in negative food-related coping mechanisms
- Households with two or more children under the age of five who are unable to meet their basic needs

The following criteria will be used to prioritise within the primary group:

- Elderly people with responsibility for children in the household
- Households without livestock or productive assets
- Households headed by widows or single mothers with young children
- Households with chronically ill members
- Households with a member with a disability
- Pregnant and lactating women

ARCS provincial branches and volunteers, drawing on their established community presence and trust, will lead household-level registration using the vulnerability criteria above. Beneficiary lists will be validated through community and local authority consultation to minimise exclusion errors and ensure that the most isolated and marginalised households, including those headed by women, or containing persons with disabilities or chronic illness, are not overlooked in favour of more visible or better-connected families.

For health services, Mobile Health Teams will conduct community outreach and prioritise accessibility for elderly people, persons with disabilities, pregnant and lactating women, and caregivers with young children. The inclusion of female health workers, midwives and nutrition counsellors, within MHT composition ensures that women and girls can access services in a culturally safe and appropriate manner.

For CBHFA, gender balanced volunteer recruitment, 100 male and 100 female volunteers, ensures that female community members can be meaningfully engaged and reached by volunteers of the same gender, which is essential for effective outreach in the Afghan context.



Internally displaced persons and other groups without formal community registration will be actively identified during the registration process to ensure that lack of documentation does not result in exclusion, where protection needs exceed ARCS's mandate, cases will be referred to relevant humanitarian actors. Multiple community feedback mechanisms, described under the CEA section, will enable affected people to raise concerns about targeting, exclusion, or the assistance process throughout the operation.

Explain the selection criteria for the targeted population

The primary criteria are designed to capture households facing the most acute and immediate risks.

- Households with destroyed or damaged shelter face direct exposure to continued rainfall and harsh conditions, making them the most urgent priority. Those already engaged in negative food coping strategies, such as reducing meal frequency, selling productive assets, or withdrawing children from school, are households whose resilience has already been exhausted and who are at risk of irreversible harm without immediate intervention.
- Households with multiple young children represent a heightened vulnerability given children's particular susceptibility to waterborne disease, malnutrition, and the health consequences of displacement.

The secondary criteria are applied where demand exceeds available resources and reflect the specific layers of vulnerability most prevalent in the Afghan context following a sudden-onset emergency.

- Female-headed households, particularly widows and single mothers, face structural barriers to accessing assistance, replacing lost assets, and resuming income-generating activities, making them disproportionately likely to fall into deeper poverty without targeted support.
- Households that have lost all livestock or productive assets face both an immediate consumption crisis and a long-term recovery deficit, as these assets represent their primary, and often only, source of food and income.
- Elderly caregivers, persons with disabilities, and chronically ill household members face compounded risks due to reduced mobility, limited access to health services, and inability to engage in labour or recovery activities.
- Pregnant and lactating women are prioritised given the heightened nutritional and health risks they face in displacement and emergency settings, particularly where health services have been disrupted.

Beyond the primary and secondary criteria, ARCS will take deliberate steps to ensure that the most marginalised groups are not excluded from assistance. Internally displaced persons and households without formal community registration will be actively identified during the registration process to ensure that lack of documentation does not result in exclusion.

Female ARCS volunteers and female health workers within Mobile Health Teams will conduct targeted outreach to women and girls, ensuring they can access assistance and health services in a culturally safe and appropriate manner. Community feedback mechanisms will allow affected people, including those who may feel unable to raise concerns publicly, to report exclusion or targeting concerns throughout the operation. Any protection needs identified that fall outside ARCS's mandate will be referred to relevant humanitarian actors operating in the affected provinces.

Total Targeted Population

Women	2,520	Rural	-
Girls (under 18)	3,360	Urban	-
Men	2,640	People with disabilities (estimated)	7%
Boys (under 18)	3,480		
Total targeted population	12,000		



Risk and Security Considerations (including "management")

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
<p>Deteriorating security situation: While the security situation remains relatively stable across most operational areas, localized incidents, ethnic tensions, and unpredictable security dynamics could disrupt operations or endanger staff and volunteers.</p>	<p>IFRC continuously monitors the security situation in Afghanistan and coordinates closely with ARCS branches, local authorities, and humanitarian partners to anticipate security developments. Security protocols are strictly enforced for all ARCS and IFRC personnel. Pre-deployment security briefings are mandatory, and all staff complete Stay Safe 2.0 e-learning. Movement tracking via phone/WhatsApp ensures real-time awareness of personnel locations. Security assessments are conducted before entering new operational areas. The IFRC Country Delegation security team maintains close coordination with external humanitarian actors and ARCS branches in flood-affected regions. Primary implementation is carried out by ARCS staff and volunteers who have local knowledge and community acceptance, minimizing exposure of international personnel.</p>
<p>UXO contamination: The border situation with Pakistan remains tense and unpredictable. Areas around Torkham crossing are contaminated with unexploded ordnance (UXOs), presenting high risks for personnel movement.</p>	<p>Operations in high-risk border areas are carefully assessed and coordinated with local authorities. ARCS applies its security framework for all national staff and volunteers. Movement near contaminated areas is strictly controlled and follows explosive ordnance risk education (EORE) protocols. Alternative access routes are identified where possible.</p>
<p>Continued rainfall and secondary flooding: Meteorological forecasts predict continued rainfall with daily accumulation averaging 30mm across central, southern, southeast, and southwest regions. Areas already saturated are at high risk of secondary flooding</p>	<p>ARCS continuously monitors weather forecasts and coordinates with meteorological authorities. Distribution points and Humanitarian Service Points are not established in flood-prone or low-lying areas. Response plans remain flexible to adapt to evolving conditions. Distributions are scheduled during weather windows to maximize safety and access. Emergency stocks are prepositioned in strategic locations to enable rapid response if additional flooding occurs.</p>
<p>Supply chain disruptions: Maritime uncertainty in the Strait of Hormuz and regional airspace restrictions are disrupting commercial and humanitarian logistics. Afghanistan is particularly exposed as Asia is the main destination for crude oil and LNG passing through the strait.</p>	<p>ARCS and IFRC prioritize use of pre-positioned stocks to enable immediate response while procurement is underway. Diversified supply chains and suppliers are utilized to reduce dependence on single routes. Early procurement of critical items (NFIs, medicines, hygiene kits) is prioritized. Logistics team is looking into the possible option to obtain free flight from the donors, to be flown from Dubai to Kabul directly. However, it is subject to the air space situation, if it clears the commercial aircraft to utilize the space as it is now under conflict zone.</p>
<p>Fuel price increases: Diesel prices have risen significantly across the region. This impacts all aspects of humanitarian logistics including water trucking, mobile health teams, and distributions.</p>	<p>Fuel costs are carefully monitored and factored into operational budgets with contingency margins. Distributions are consolidated where feasible to reduce transportation trips. MHT deployment is strategically planned to maximize coverage per movement. Close budget monitoring enables early identification of cost overruns requiring operational adjustments.</p>
<p>Procurement delays: Lead times for international procurement may be extended due to supply chain disruptions from the</p>	<p>Local procurement is prioritized where quality and availability permit, reducing lead times and supporting local markets. Multiple suppliers are identified for critical items. Procurement</p>



energy crisis. Local markets may have limited availability of specific items (e.g., dignity kit contents, medical supplies).	plans include contingency timelines accounting for potential delays.
Market inflation and rising commodity prices may reduce the purchasing power of the proposed cash transfer, rendering it insufficient to cover basic household needs by the time of distribution	ARCS and IFRC will maintain active coordination with the Cash and Voucher Working Group throughout the operation to ensure the transfer value remains aligned with the latest market monitoring data and minimum expenditure basket recommendations, and to recalculate the transfer value if required and possible.
<p>Please indicate any security and safety concerns for this operation:</p> <p>Security landscape in the country remains complex and fragile. Situation along the border with Pakistan is tense and unpredictable. Border line around Torkham is contaminated with UXOs and present high risk for movement and presence of staff and volunteers. During operation NS security framework will be applicable to NS staff and volunteers. IFRC security framework will be applicable for personnel (staff, staff on loan, surge, consultants) deployed under IFRC umbrella.</p> <p>Comprehensive security measures will be implemented to ensure the safety and security of all RCRC personnel engaged in this operation. These measures include but are not limited to continuous situation monitoring, timely security and safety updates, tracking of staff movements (via phone or WhatsApp), security assessments in operational areas, and pre-deployment briefings on the current security context. Additionally, completion of relevant IFRC e-learning courses (such as Stay Safe 2.0) are mandatory. The IFRC CD security team is maintaining close coordination with external humanitarian actors in the country, particularly regarding flood-affected areas, and is also working closely with ARCS branches and local authorities in the operational regions.</p>	
Has the child safeguarding risk analysis assessment been completed?	No

Planned Intervention



Shelter Housing And Settlements

Budget: CHF 184,085

Targeted Persons: 2,100

Indicators

Title	Target
# of people reached with shelter support	2,100
% of the Households who received shelter assistance reported improvement in their living conditions	70

Priority Actions

- Procure 300 family tents, 2100 Blankets, 600 tarpaulins, 300 kitchen sets and 600 jerrycans (including the replenishment of the stock)
- Register shelter beneficiaries using the Red Rose system with SADD collection and vulnerability-based selection criteria.
- Coordinate with the Shelter/NFI Cluster and ICRC to ensure complementarity and avoid duplication.
- Conduct post-distribution monitoring to assess the adequacy of assistance and collect beneficiary feedback.



Multi Purpose Cash

Budget: CHF 159,750



Targeted Persons: 7,000

Indicators

Title	Target
# of households provided with unconditional cash assistance	1,000
% of surveyed people whose households received cash transfers / vouchers are satisfied with the time/period that cash / vouchers were received	70

Priority Actions

- Select 1,000 households for MPCA based on established vulnerability criteria in targeted locations.
- Deliver a one-time MPCA transfer of AFN 10,500 (approx. CHF 133) per household through the Financial Service Provider, in line with CVWG guidelines.
- Monitor FSP performance to ensure adherence to humanitarian principles.
- Conduct post-distribution monitoring for all MPCA interventions.



Budget: CHF 70,024

Targeted Persons: 12,000

Indicators

Title	Target
# of Mobile Health Teams (MHTS) supported with staff, equipment and running costs for the provision of primary health services.	3
# of people reached with primary health services	12,000
# of people provided with MHPSS interventions including PFA	1,200
# of ARCS volunteers trained on CBHFA/ECV/first aid	200
# of people provided with hygiene promotion awareness and household water treatment	6,000

Priority Actions

- Deploy 3 additional Mobile Health Teams to priority flood-affected provinces
- Procure and distribute essential medicines, medical consumables, and equipment to support MHT operations
- Provide primary health care services including consultations, treatment, and referrals through MHTs, including nutrition services (malnutrition screening, counseling, and referral of severe cases).
- Train MHT staff in Psychological First Aid (PFA) to provide immediate psychosocial support
- Provide PFA and basic psychosocial support to 1,200 affected individuals experiencing trauma or distress
- Establish referral pathways for individuals requiring specialized mental health services
- Train 200 volunteers on Community-Based Health and First Aid (CBHFA) and Epidemic Control for Volunteers (ECV)
- Equip and train 200 volunteers with first aid kits and supplies to support community-level health response
- Establish community health committees and grandmothers' committees as platforms for health promotion and CEA
- Conduct hygiene promotion and health education sessions covering disease prevention, safe hygiene practices, and health-seeking behaviors



- Conduct community-based disease surveillance and early warning through trained volunteers
- Coordinate with health cluster and local health authorities to avoid duplication and ensure complementarity



Water, Sanitation And Hygiene

Budget: CHF 40,017

Targeted Persons: 4,666

Indicators

Title	Target
# of households reached with WASH actions in emergency response	350
# of liters of safe water distributed	70,000

Priority Actions

- Conduct water trucking operations to deliver safe drinking water to most affected communities
- Coordinate water trucking schedules with community leaders to prioritize high-risk areas and ensure equitable access
- Procure and distribute 350 family hygiene kits containing soap, laundry basins, Aquatabs, and related items
- Conduct hygiene promotion sessions through MHT staff and trained volunteers on safe water handling, handwashing, and sanitation
- Demonstrate proper use of Aquatabs and household water treatment methods in community sessions
- Monitor WASH infrastructure functionality and usage through field visits
- Coordinate with WASH cluster to align interventions and avoid duplication



Protection, Gender And Inclusion

Budget: CHF 15,176

Targeted Persons: 430

Indicators

Title	Target
# of male and female staff and volunteers trained on cross-cutting topics/PGI and CEA	130
# of people reached by PGI programming	430
# of women and girls who received dignity kit	300

Priority Actions

- Train 130 male and female staff and volunteers on protection, gender, and inclusion topics including PSEA, disability inclusion, and gender-sensitive programming
- Procure 300 dignity kits containing menstrual hygiene materials, soap, undergarments, and personal items
- Distribute dignity kits to 300 women and girls through discreet and respectful distribution processes
- Design awareness leaflets on protection risks, available services, and referral pathways in Dari and Pashto
- Conduct field monitoring visits with specific focus on reaching female-headed households, elderly persons, and people with disabilities
- Establish referral pathways for protection concerns in coordination with protection actors and service providers





Community Engagement And Accountability

Budget: CHF 2,130

Targeted Persons: 200

Indicators

Title	Target
% of people surveyed who feel treated with respect by the organisation's/programme's/operation's staff and volunteers.	70
% of surveyed people who feel the organisation/operation has communicated well about plans and activities	70
% of feedback received that is responded to within a defined timeframe	60

Priority Actions

- Share information on response plans, progress, delays, rights, and entitlements with the full targeted population through community outreach, volunteer-led sessions, and information materials integrated into all distribution and health service activities; stress that aid is free.
- Provide all 100 volunteers with a Q&A sheet for consistent community information sharing, ensuring accurate and uniform messaging at every point of community contact across all sectors.
- Train all volunteers on CEA principles integrated with PGI and PSEA orientation before deployment, so that information sharing and feedback referral are embedded in all field activities rather than limited to dedicated CEA sessions.
- Establish accessible community feedback mechanisms across all 8 provinces from the outset of the operation, including Kobo-based help desks at distribution points, community information boards, and volunteer-facilitated channels, ensuring all 12,000 targeted people have access to at least one feedback channel regardless of literacy, mobility, or gender.
- Analyse feedback data regularly and respond to complaints within an agreed timeframe; share aggregate findings with the operations team to inform adaptive management throughout the operation.
- Conduct two rounds of PDM with CEA questions and exit surveys at key distributions, targeting a representative sample of approximately 200 people to assess information reach, satisfaction, and awareness of feedback mechanisms across the targeted population.



Secretariat Services

Budget: CHF 19,703

Targeted Persons: -

Indicators

Title	Target
% of financial reporting compliance to IFRC procedures	100

Priority Actions

- Facilitate regular coordination meetings and joint field visits and track partner commitments, coverage gaps, and harmonise approaches
- Recruit and manage staff including surge personal; process salaries, allowances, insurance, and SOSC, conduct performance reviews and ensure duty of care obligations
- Provide regional technical oversight and deploy surge personnel as needed and facilitate regional coordination calls and planning sessions
- Produce situation reports, donor communications, and visibility materials and manage communication tools and media engagement for



the operation

- Implement MEAL framework; conduct field visits and two rounds of PDM and manage digital feedback mechanisms and share monitoring reports with stakeholders



National Society Strengthening

Budget: CHF 9,115

Targeted Persons: -

Indicators

Title	Target
# of lessons learned workshops conducted	1
# of volunteers recruited and trained covering sector-specific interventions	100

Priority Actions

- Recruit and train 100 volunteers across the six affected provinces, covering sector-specific interventions, HSP model, PGI/PSEA, CEA, first aid, CBHFA, hygiene promotion, and WEC awareness.
- Deploy trained volunteers across all sectors at displacement sites and affected communities.
- Conduct a lesson learned workshop at the end of implementation, incorporating community feedback from CEA mechanisms, PDM and exit surveys.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

ARCS will deploy a total of 100 volunteers across the intervention areas to implement this operation and has mobilized BDRTs; each consisting of an average of 10 active volunteers. These 100 volunteers will be recruited and mobilized for the operation across these provinces, trained in sector-specific interventions and deployed to displacement sites, health camps, distribution points, and community engagement activities. Volunteer roles include first aid provision, psychosocial support, hygiene promotion, community engagement and information dissemination, beneficiary registration and verification, distribution support, and post-distribution monitoring.

In addition, 3 Mobile Health Teams will be deployed to provide emergency primary healthcare services across the affected provinces. Each MHT comprises medical professionals including physicians, nurses, midwives, and community health workers providing outpatient consultations, reproductive health services, nutrition screening, IMCI treatment, polio immunization, and referral services.

The ARCS staff supporting this DREF operations will be drawn from the affected provinces and DREF operational areas, at the branches, regional and HQ levels. The staff from part of the core team deployed to operationalize response activities at displacement sites and are drawn from different departments with sector-specific specialization, including PSS counsellors, volunteer management officers, DRR officers, health coordinators, and WASH focal points. Staff will be responsible for current emergency operations overall field coordination, beneficiary registration management, distribution oversight, health service supervision, WASH monitoring, and reporting.

Existing IFRC technical resources supported under the ongoing operations will be used to support this DREF operation. They are IFRC operations manager, Quality and Accountability manager, CEA officer, Economic Recovery and Resilience Coordinator, Information Management officer, PGI officer, and support services. These technical staff provide operational management, quality assurance, information management, financial oversight, donor reporting, and technical guidance across all sectors of the response.

All 100 deployed volunteers and staff will be insured for the duration of the operation. All personnel will receive orientation on the operation objectives, sector-specific interventions, PGI and PSEA standards, CEA principles, security protocols, and reporting procedures before deployment to the field.



If there is procurement, will it be done by National Society or IFRC?

Procurement will be shared between ARCS and IFRC based on the nature and source of the required items, following the same approach successfully used in several operations. Procurement of family tents and imported items will be carried out by IFRC, leveraging its international supply chain and procurement capacity. Recognising these challenges, the Country Delegation Logistics team and APRO are working on several options, including sourcing abroad and airfreight, which will mainly be for replenishment of stock.

Other supplies available locally, including hygiene kits, sanitary kits, soap, water treatment supplies, and other consumables, will be procured locally within the country by ARCS, subject to market availability.

Cash transfers for MPCA will be delivered through a contracted Financial Service Provider (FSP), with the contracting process managed by the IFRC in coordination with ARCS and the Cash and Voucher Working Group. Any other necessary procurement, including items not available locally or requiring international standards compliance, will be carried out by the IFRC. All procurement will adhere to IFRC procedures and standards, ensuring transparency, competitiveness, and value for money.

How will this operation be monitored?

ARCS leadership and the IFRC Head of Delegation will be accountable for the timely implementation, compliance, financial management, and operational reporting of this operation. This will be done with the support of the IFRC operations manager and field coordinator.

ARCS operational teams, supported by IFRC, will be primarily responsible for monitoring interventions at the field level across all intervention area.

Monitoring will encompass the following elements: The ARCS PMER and IFRC Quality and Accountability, including CEA and PGI teams, will support the operation team to develop a comprehensive Monitoring and Evaluation (M&E) plan at the outset of the operation. The M&E plan will define key indicators, data collection methods, reporting timelines, and responsibilities, aligned with the indicator tracking tables established for each sector under this DREF.

The QA/operations team will carry out M&E activities in line with the plan, including regular field visits to displacement sites, distribution points, health camps, and WASH facilities to verify the quality, appropriateness, and timeliness of service delivery and to identify operational challenges requiring corrective action. IFRC/ARCS will conduct three monitoring visits to field operations across the affected provinces over the nine-month operation period. Monitoring visits will include direct observation of distributions and service delivery, consultation with beneficiaries and communities, review of registration and reporting data, and assessment of compliance with IFRC procedures and standards, including financial management, procurement, PGI, PSEA, and CEA.

Two rounds of post-distribution monitoring (PDM) will be conducted; one following the initial phase of distributions and MPCA delivery, and a second toward the end of the operation to assess the use and impact of assistance, measure beneficiary satisfaction, collect feedback on the adequacy and appropriateness of the response, and inform any necessary programme adjustments.

Exit surveys will be conducted at the conclusion of key distributions and service delivery activities to collect real-time feedback from aid recipients, building on the lessons learned from the MDRAF018 operation, which highlighted the importance of incorporating feedback mechanisms to continuously refine approaches and better meet the needs of affected communities.

Community feedback data collected through the CEA mechanisms established in each of the six affected provinces will be systematically analysed and used for informed decision-making and adaptive management throughout the operation. Feedback will be reviewed regularly by the operations team and escalated to management as needed.

IFRC-DREF regular and monthly progress reports will be compiled by ARCS and submitted to the IFRC, informing of the operation's progress, achievements, challenges, and expenditure. Reports will include an indicator tracking table mapping progress against targets, financial reporting, and documentation of operational issues and corrective actions taken. Progress reports will be shared with the IFRC Asia Pacific Regional Office to keep them informed of the operation's status.

A lessons learned workshop will be conducted at the end of the end implementation period (6 months), bringing together staff and volunteers to follow up on key operational and organizational learnings, document findings, and develop recommendations as a reference for future interventions. The workshop will incorporate feedback collected through CEA mechanisms, PDM, and exit surveys, ensuring that the perspectives of affected populations are central to organizational learning.

Assisted population registration and data management will be conducted using the standardized Red Rose system, which proved highly effective during the ongoing emergency operations in managing data accurately and streamlining the registration process. The system will enable real-time tracking of beneficiary numbers, distribution progress, and demographic data, supporting both operational monitoring and donor reporting.



Please briefly explain the National Societies communication strategy for this operation

IFRC will collaborate with the ARCS communications team to communicate in line with Movement-agreed key messages with external regional and global audiences, with a focus on the humanitarian situation generated by the Afghanistan flash floods and the Red Cross and Red Crescent humanitarian actions in assisting affected people. The communications strategy aims to generate visibility and support for humanitarian needs and the Movement's response, raise awareness among donors and the international community, and advocate for timely and sustained funding to address the scale of the emergency.

ARCS will collaborate with the IFRC Country Delegation on communications content, including photographs, videos, human interest stories, situation updates, and other materials documenting the impact of the floods on affected populations and the response being delivered by ARCS with Movement support. Content will highlight the specific vulnerabilities of affected populations, including the disproportionate impact on women, children, elderly people, and farming and pastoral households who have lost their homes, livestock, and agricultural land, as well as the scale of damage across 22 provinces, the gaps in humanitarian coverage, and the urgent need for sustained funding to support recovery.

Close collaboration on the sharing of content will be maintained between the Asia Pacific IFRC regional communications unit, the IFRC Country Delegation, and ARCS to ensure a coherent and coordinated communications approach in line with the Movement approach. All external communications will adhere to IFRC editorial and visual identity guidelines, protection of personal data standards, and do-no-harm principles, with particular attention to the safe and dignified representation of affected populations. ARCS will also use its communications capacity to support community engagement and accountability throughout the operation.



Budget Overview



DREF OPERATION

Code - Afghan Red Crescent (ARCS)
Afghanistan Flash Flood- 2026

Operating Budget

Planned Operations	471,183
Shelter and Basic Household Items	184,085
Livelihoods	0
Multi-purpose Cash	159,750
Health	70,024
Water, Sanitation & Hygiene	40,017
Protection, Gender and Inclusion	0
Education	15,176
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	0
Environmental Sustainability	2,130
Enabling Approaches	28,818
Coordination and Partnerships	0
Secretariat Services	19,703
National Society Strengthening	9,115
TOTAL BUDGET	500,000

all amounts in Swiss Francs (CHF)



Contact Information

For further information, specifically related to this operation please contact:

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