



Humanitarian Action for Children

A boy washes his face at a UNICEF-installed water point at the Herat Regional Hospital where UNICEF provides critical nutrition, health, and WASH support.

# **Afghanistan**

### HIGHLIGHTS1

- The humanitarian situation in Afghanistan has deteriorated significantly with the recent political and socioeconomic developments. Essential services are on the brink of collapse, exacerbating the needs of an already vulnerable population. More than half of the population, 24.4 million people, need humanitarian assistance, including 12.9 million children. Multiple disease outbreaks (measles, acute watery diarrhoea, dengue, COVID-19) are ongoing. In 2022, 8.7 million people will be in emergency level food insecurity and 1 in 2 children under 5 years will be acutely malnourished. The full impact of the political transition has not yet materialized, with considerable socioeconomic shocks expected to affect children's survival.
- The needs of vulnerable Afghan children and their families are unprecedented. In response, UNICEF will uphold the humanitarian imperative and prioritize life-saving activities. This will help ensure urgent scale-up of WASH, health, nutrition, education and child protection services by preventing collapse of critical systems and safeguard hard-won gains, including protecting the rights of women and girls.
- US\$2 billion is urgently needed to meet the humanitarian needs of 15.3 million people in Afghanistan.

24.4 12.9 million people children

2018 2022

TO BE REACHED

15.3

8.1

million

million

people<sup>6</sup>

children<sup>7</sup>

## **KEY PLANNED TARGETS**



## 1.1 million

children admitted for treatment for severe acute malnutrition



## 10.5 million

children vaccinated against





## 11.5 million

people accessing a sufficient quantity of safe water



# 7.5 million

children accessing educational services

2018

2022

**FUNDING REQUIREMENTS** 

US\$ 2 billion

2018

2022

## **HUMANITARIAN SITUATION AND NEEDS**

The degree of suffering is nearly unprecedented. The political and socioeconomic developments of 2021, with leadership transitions and implications on basic services and financial systems, have brought further turmoil to a country that has experienced four decades of prolonged conflict, recurrent natural disasters, chronic poverty, and disease outbreaks including the devastating effects of COVID-19. More than half of the population requires some form of humanitarian assistance and protection - a 25 per cent increase since early 2021. Population movements will continue throughout 2022, with over 650,000 estimated to be displaced by economic hardships, shocks and insecurity and 785,400 expected to return from abroad. Based on recent events, simulations suggest that without urgent action, Afghanistan could see near universal poverty of 97 per cent by mid-2022, up from 47 per cent in 2020. The loss of purchasing power with rising poverty has coincided with soaring prices of basic commodities, further heightening humanitarian needs. Harsh winter conditions with temperatures far below freezing worsen these vulnerabilities yet further. The current crisis and its uncertainties for women's rights creates a conducive environment for heightened gender-based violence, which already affects 46 per cent of Afghan women.

Without access to minimum life-saving services, Afghans will suffer cataclysmic effects. Thirty-five million people rely on basic primary health care services for life-saving care; without sustained access to these services, an estimated 112 children will die every day. <sup>14</sup> The deteriorating situation has left 8.7 million people in emergency food insecurity level 4 (IPC 4). <sup>15</sup> Undernutrition contributes to 45 per cent of child deaths in Afghanistan. Currently, acute malnutrition is above emergency thresholds in 27 of 34 provinces and rapidly worsening. <sup>9</sup> Drought has exacerbated WASH needs, with 53 per cent of water points across three provinces drying up. The breakdown of water services in urban settings has halved water availability and increased contamination from wastewater; 8 of 10 Afghans now drink bacteriologically contaminated water. <sup>16</sup>

Even prior to the COVID-19 pandemic, access to education was a challenge, with cultural practices, displacement, inaccessibility and lack of facilities keeping 4.2 million (60 per cent girls) out of school. Without sustained access to education, 7.9 million more children risk missing out on critical education.<sup>17</sup> Prolonged school closures and absences often result in children, particularly girls, not returning to complete their education – with lasting impacts on children. These impacts, combined with the socioeconomic crisis, have nearly obliterated coping mechanisms and given rise to child labour and early marriage.<sup>8</sup> With the economy and many public service sectors verging on collapse due to non-payment of salaries and empty government coffers, Afghanistan's people face an uncertain future.

### SECTOR NEEDS



# 1.1 million

children are severely acutely malnourished<sup>18</sup>



## 18.1 million

people in need of health assistance<sup>19</sup>



## 15.1 million

people lack access to safe drinking water<sup>20</sup>



# 4.5 million

children and caregivers in need of MHPSS services<sup>21</sup>



## 7.9 million

children in need of education support<sup>22</sup>

## STORY FROM THE FIELD



Rubaba (in blue scarf) interacts with her teacher at the UNICEF-supported accelerated learning centre, where 15 girls between the ages of 13 and 20 are catching up on lost years of learning.

18-year-old Rubaba dropped out of school when she reached 7th grade when her parents tasked her to herd cattle as they struggled to provide income. With thanks to a UNICEF-supported Accelerated Learning Centre close to her village in Bamiyan, she is now catching up on lost learning. "My parents told me I could study under one condition: when I'm needed at home, I have to stay. I agreed instantly," says Rubaba. Even though it takes her many hours to walk from the grazing grounds to the center, she barely misses her classes.

Read more about this story here

### **HUMANITARIAN STRATEGY**

UNICEF remains committed to stay and deliver support aimed at saving lives, alleviating suffering, maintaining human dignity, and protecting rights of affected populations. This includes responding to immediate humanitarian needs and sustaining essential services at scale to prevent public systems from collapsing, in line with humanitarian principles and capitalizing on the increased access currently available. UNICEF will support a range of activities, including payment of incentives for critical workers for six months to prevent the loss of life and maintain services essential for humanitarian response. In coordination with partners on the ground, UNICEF will deliver an integrated gender-sensitive package of health, nutrition, WASH, education and child protection services to the most vulnerable populations.

UNICEF will prioritize life-saving health and nutrition activities through static facilities and mobile teams. This includes screening and treating children for severe acute malnutrition, providing basic primary health care services including routine immunizations, referrals and counselling on infant and young child feeding, as well responding to outbreaks such as measles and acute watery diarrhoea (AWD). With limited access to safe water and poor sanitation practices, urgently scaling up access to safe water (including through ensuring functional WASH systems) and sanitation is a key priority to respond to current disease outbreaks and prevent further spread.

UNICEF is committed to ensuring that all children, especially girls, have access to quality education through sustaining access to public education and the expansion of communitybased education (CBE) classes. UNICEF will target out of school children through accelerated learning centres and increase the number of qualified female teachers. Keeping public schools and CBE classes operational to ensure all children return to learning requires also financial support to teachers. Child protection will scale-up gender-based violence prevention, response and mitigation and case management activities. Mental health and psychosocial support (MHPSS) will be provided by social and community workers in child, youth, and women safe spaces, UNICEF will scale-up explosive ordnance risks education (EORE) to prevent serious injury or death and continue identifying, verifying, reporting and responding to grave violations against children.

UNICEF will expand the use of humanitarian cash transfers to facilitate a more rapid and dignified response. This includes meeting sector-specific needs as well as multipurpose cash transfers to cover basic needs of the most vulnerable struggling to meet their daily needs in response to multiple shocks, including winter. UNICEF will take a multipronged approach to ensure key life-saving messages are reaching the affected and at-risk communities. UNICEF will ensure accountability to affected populations and continuity of confidential, safe and accessible reporting mechanisms for prevention of sexual exploitation and abuse.

As a cross-cutting programme strategy implementation, UNICEF will use a dedicated Project Management Unit (PMU) capacity to support the operational delivery of key activities related to payments of emergency incentives for health workers, teachers, WASH technicians, and social workers among others, beneficiary data management, and provide an overall agile risk management mechanism.

### **2022 PROGRAMME TARGETS**



#### **Nutrition**

- 1,078,804 children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- 2,136,438 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- **5,407,859** children aged 6 to 59 months receiving vitamin A supplementation



#### Health

- 10,465,896 children aged 6 to 59 months vaccinated against measles
- 15,338,868 people accessing primary heatlh care through UNICEF supported facilities



### Water, sanitation and hygiene

- 11,537,160 people accessing a sufficient quantity of safe water for drinking and domestic needs
- 7,478,621 people use safe and appropriate sanitation facilities
- 9,210,951 people reached with critical WASH supplies



### Child protection, GBViE and PSEA

- **4,237,000** children and parents/caregivers accessing mental health and psychosocial support
- 63,590 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 1,000,000 people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers
- 1,000,000 children and adults accessing explosive weapons-related risk education



### **Education**

- 7,525,707 children accessing formal or non-formal education, including early learning
- 101,935 male and female teachers provided with inservice and pre-service training



## Social protection

 160,000 households reached with UNICEF-funded multipurpose humanitarian cash transfers



### Adolescents/youth

 4,000 adolescents accessing skills development programmes



#### Cross-sectoral (HCT, C4D, RCCE and AAP)

7,000,000 people reached through messaging on prevention and access to services

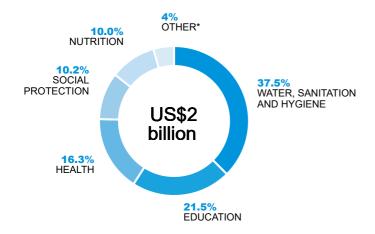
### **FUNDING REQUIREMENTS IN 2022**

UNICEF is requesting US\$2 billion to meet the humanitarian needs of women and children in Afghanistan in 2022. These resources will allow UNICEF to provide an integrated package of education, nutrition, WASH, health, and child protection services to the most vulnerable populations. With over half of the population in need of humanitarian assistance, basic services on the brink of collapse and a socioeconomic catastrophe looming, a scaled-up humanitarian response is urgently needed. It is crucial that UNICEF expands the scale and scope of humanitarian interventions at this pivotal point to avoid preventable deaths and alleviate suffering.

Targeting goes beyond the initial scope of the Humanitarian Response Plan (HRP), aiming to cover 95 per cent of the people in need in UNICEF-led clusters through sustaining a critical workforce for the provision of life-saving services. The significant funding requirements include needs such as the costs of preventing the complete breakdown of WASH services and maintaining access to water in high population density locations to prevent further spread of waterborne diseases; keeping over 7.5 million children in primary and secondary school; and sustaining life-saving services in over 1,500 basic primary health centres across the country.

Unless these needs are met, over 10 million people will be left without life-saving services, particularly in health, education and WASH. Additional targets and funding beyond the scope of the HRP are linked to the United Nations-developed Transitional Engagement Framework, which lays out a costed need to sustain an enabling environment for humanitarian response and preventing catastrophe in Afghanistan.

Without timely and adequate support, UNICEF and its partners will be unable to effectively address the needs of Afghanistan's most vulnerable children and families.



*This includes costs from other sectors/interventions: Child protection, GBViE and PSEA (3.5%), Program Management Unit (<1%), Cross-sectoral (HCT, C4D, RCCE and AAP) (<1%), Adolescents/youth (<1%).

Sector	2022 requirements (US\$)
	(03\$)
Nutrition	204,095,521
Health	334,457,872
Water, sanitation and hygiene	768,889,756
Child protection, GBViE and PSEA	<b>71,920,805</b> <sup>26</sup>
Education	440,853,967
Social protection	208,504,821
Adolescents/youth	3,853,594
Cross-sectoral (HCT, C4D, RCCE and AAP)	6,648,374
Program Management Unit	8,500,000
Total	2,047,724,710

### **ENDNOTES**

- 1. UNICEF's public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
- 2. Inter-Cluster Coordination Team Humanitarian Country Team (ICCT-HCT) Joint meeting on Global Humanitarian Overview (GHO), 28 October 2021.Will be updated with 2022 Humanitarian Needs Overview (HNO).
- 3. https://reliefweb.int/sites/reliefweb.int/files/resources/IPC\_Afghanistan\_AcuteFoodInsec\_2021Oct2022Mar\_report.pdf
- 4. ICCT-HCT Joint meeting on GHO, 28 October 2021. Will be updated with 2022 HNO.
- 5. 53 per cent children of total people in need, Afghanistan Humanitarian Needs Overview, January 2021. Will be updated with 2022 HNO.
- 6. Figures calculated based on people accessing basic primary health care to avoid duplication with other sectors. It includes 8,129,600 children (3,834,717 girls; 4,294,883 boys), 3,374,551 women, 3,834,717 men, of which 1,288,465 (8.4 per cent) are persons with disabilities (Afghanistan 2021 Humanitarian Needs Overview). Will be updated with 2022 HNO. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
- 7. 53 per cent children of total people to be reached 8,129,600 children (3,834,717 girls; 4,294,883 boys) Afghanistan Humanitarian Needs Overview, January 2021. Will be updated with 2022 HNO.
- 8. Child Protection Sub-Cluster, Whole of Afghanistan 2021 presentation.
- 9. Nutrition Cluster, Whole of Afghanistan 2021 presentation.
- 10. ICCT-HCT Joint meeting on GHO, 28 October 2021. Will be updated with 2022 HNO.
- 11. https://www.undp.org/publications/economic-instability-and-uncertainty-afghanistan-after-august-15
- 12. Winterization Plan 2021-2022.
- 13. Central Statistics Organization (CSO) (2015) Afghanistan Demographic and Health Survey 2015.
- 14. Health Cluster meeting presentation 14 September 2021.
- 15. IPC Acute Food Insecurity Analysis, September 2021 March 2022, issued in October 2021.
- 16. WASH Cluster presentation to the HCT, November 4, 2021
- 17. UNESCO Institute for Statistics (UIS) 2018 data, retrieved on 23 August 2021.
- 18. Figures are provisional and subject to change upon finalization of the inter-agency planning documents.
- 19. Figures are provisional and subject to change upon finalization of the inter-agency planning documents.
- 20. Figures are provisional and subject to change upon finalization of the inter-agency planning documents.
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- 23. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.
- 24. UNICEF's capacity to deliver life-saving services is maintained through five field offices, eight outposts and cluster lead responsibilities of WASH, nutrition, education and child protection.
- 25. The life-saving messages would be provided in local languages, including the use of social media, radio/TV messages, Information, Education and Communication (IEC) material distribution, and the use of motorized messaging.
- 26. US\$1.1 million allocated to PSEA.