

Highlights

- Between November 2021 and March 2022, further deterioration in food security is expected, with the number of people in need reaching 22.8 million. This marks a 37% increase in the number of Afghans facing acute hunger since the assessment issued in April 2021.
- An estimated 30,000 children under-five suffering from severe acute malnutrition (SAM) were provided with lifesaving treatment services through mobile teams and Basic Package of Health Services (BPHS) health facilities across the country.
- The United Nations Children's Fund (UNICEF) welcomed the defacto authority's decision to support polio vaccination which will start on November 8th across Afghanistan, reaching 10 million children.

Afghanistan

Humanitarian
Situation Report from
1 to 31 October 2021

unicef

for every child

Situation in Numbers



18.4 M

People in need of humanitarian assistance (HRP 2021)



18.8 M

People food insecure (IPC October 2021)



9.700.000

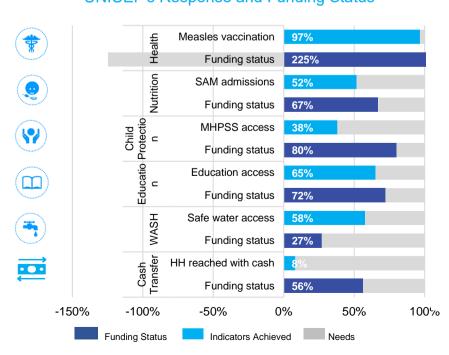
children in need of humanitarian assistance



682,981

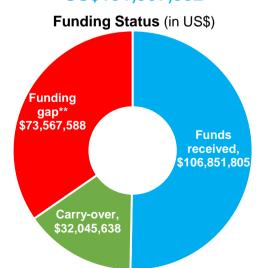
Internally displaced people since January 2021(18 October 2021)

UNICEF's Response and Funding Status



UNICEF Appeal 2021

US\$191,957,992*



^{*} Funding needs for the 2021 HAC were calculated pre-August 15th and do not reflect the full needs of the emerging crisis

^{**}Funding gap calculated by subtracting sections that have received excess funds for sustaining basic services

Funding Overview and Partnerships

In 2021, UNICEF requested US\$ 192 million to provide life-saving services to 6.1 million people, including 5.7 million children. Funds currently available amount to US\$138.8 million, with some sections receiving additional funding to maintain services. Beyond this, the remaining funding gap stands at 38%, affecting mostly the WASH and nutrition sectors as well interventions using cash-based modalities. Public donors, international financial institutions, and private donors through the UNICEF family of National Committees, have contributed funding to UNICEF Afghanistan's humanitarian response. This includes but is not limited to key donors such as the Central Emergency Response Fund (CERF), USAID Bureau for Humanitarian Assistance (BHA), European Union (EU), European Civil Protection and Humanitarian Aid Operations (ECHO), Afghanistan Humanitarian Fund (AHF), the Governments of Denmark, Japan, Sweden and Canada, and nexus funding from the Global Partnership for Education (GPE) and Education Cannot Wait (ECW). UNICEF expresses its sincere gratitude to all donors.

Situation Overview & Humanitarian Needs

The Integrated Food Security Phase Classification Report (Sept 2021-Mar 2022) was released, indicating that more than half the population of Afghanistan, a record 22.8 million people, will face acute food insecurity from November 2021. More than one in two Afghans are estimated to face crisis (IPC Phase 3) or emergency (IPC Phase 4) levels of acute food insecurity, including 3.2 million children under-five estimated to suffer from acute malnutrition by the end of the year. Severe drought conditions continue throughout the country with 53% of water points drying up due to drought in Badghis, Faryab and Ghor provinces.

From 1 January to 18 October 2021, more than 682,981 people have been internally displaced among which 59% are children under 18 years.² Outbreaks of measles (24,471 cases), dengue fever (383 cases) and acute watery diarrhoea (3,016 cases) and a cluster of malaria cases (136) continue to overwhelm struggling health services.³ As winter continues to approach, high altitude locations such as Bamyan, Ghazni, Nuristan, Wardak and Paktya drive the need for provision of life saving winter assistance for most households. Without support for winter clothing, blankets and a sustained fuel source for heating, households in need will face significant uncertainties in the winter, potentially increasing negative coping mechanisms, such as early marriage and child labour. Plans for snow clearance, a task previously undertaken by the government, remain unclear as no specific financial allocation has been made available for contractors. Without this critical service in the provinces, roads to the districts will be closed leaving large populations without access to basic services.

Summary Analysis of Programme Response

Health

During the month of October, UNICEF continued its efforts to respond to the needs of health services in the country impacted by the suspension of Sehatmandi project through the provision of life-saving health services. This included vaccinating over 50,000 children with Penta 3 through routine immunization programmes, providing medical supplies to basic primary health clinics, maintaining cold chain services, and supporting monitoring activities across the country. In addition, UNICEF and partners supported the implementation of 140,000 ante-natal care (ANC) visits to pregnant women through the maternal newborn and child health (MNCH) programme. During the reporting period, 64,031 children were vaccinated against measles and planning continues for a measles campaign to address increasing numbers, particularly in hotspot areas in the south of the country.

Since the first reported cases of Acute Water Diarrhoea (AWD) on Sept 12th in Kabul, 3,016 cases have been reported across Kabul, Kapisa, Zabul, Laghman and Kandahar provinces. The majority of cases are reported in Kabul city (74%)

¹ http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC_Afghanistan_AcuteFoodInsec_2021Oct2022Mar_snapshot.pdf

² https://www.humanitarianresponse.info/en/operations/afghanistan/idps

³ Afghanistan: Infectious Disease Outbreak Situation Report #12 31 October 2021

with children under five accounting for 10.4% of the caseload.⁴ An integrated response plan has been developed and approved with the de-facto health authorities, and includes WASH, environmental health, social mobilization and community engagement and health activities. Social mobilization and community engagement campaigns kicked off in Kabul city with the support of the communication for development team, covering all sub-districts with 20 trained technical teams supporting the implementation. Schools, universities, health facilities, mosques, madrasa, and other community gatherings were targeted with life-saving information and materials distribution between 16 and 31 October. Over 460,000 (34% female) were reached, 245,000 brochures and 5,000 flipcharts were distributed during the campaign.

During the month of October over 1,100 confirmed cases of COVID-19 were reported, bringing the total number since January 2020 to 156,275. Over 70 deaths were recorded during the reporting period, adding to the overall total of 7,284 reported deaths since the beginning of the pandemic. UNICEF and partners supported the vaccination of over one million adults during the month of October to protect them from COVID-19, taking the total number of doses administered to 5,852,810, with 2,755,517 people fully vaccinated against COVID-19 in Afghanistan.⁵

Nutrition

Nutrition services continue to be scaled up as UNICEF doubled the number of nutrition extenders in the field from 36 to 72. These newly recruited extenders were trained to provide further support and improve coordination and monitoring of the nutrition programmes at the field level. UNICEF continues to support the delivery of integrated nutrition and health services through 60 mobile teams across 15 provinces.

Facility level data is continuously reviewed and assessed to determine fluctuations in caseloads and trends and since August 15th, there has been a 5% increase in severe acute malnutrition (SAM) across the country. During the reporting period an estimated 30,000 children under-five suffering from severe acute malnutrition (SAM) were provided with lifesaving treatment services through mobile teams and Basic Package of Health Services (BPHS) health facilities across the country. In addition, a total of 150,000 women were provided with nutrition counselling services on maternal and infant and young child feeding.

Child Protection, GBViE and PSEA

UNICEF, through its partners and extenders, responded to the immediate and life-saving child protection needs of children and their caregivers affected by conflict and displacement. Together, we reached a total of 51,855 individuals -- 23,434 boys, 18,559 girls, 6,293 men and 3,569 women. Of this number, 24,900 individuals (11,642 boys, 10,478 girls, 1,561 men and 1,219 women) benefited from mental health and psychosocial support (MHPSS) through the provision of recreation activities, psychosocial support services and referrals; 2,626 (1,957 boys and 669 girls) were reached with case management services in the five regions of the country, including 463 unaccompanied and separated children (448 boys and 15 girls) who were provided with family tracing and reunification services. 18,574 individuals (8,485 boys, 5,647 girls, 3,412 men and 1,030 women) were reached through UNICEF and its partners with messages on explosive ordnance risk education (EORE) as a way of preventing injury and death, particularly amongst children. The EORE intervention is part of scaling up of risk education activities particularly targeting newly accessible areas and IDPs camps as the country opens and more people are poised to return to their areas of origin and other previously inaccessible areas. A total of 5,755 persons (1,350 boys, 1,765 girls, 1,320 men and 1,320 women) were reached with gender-based violence (GBV) response, prevention, and risk mitigation services across the country.

To increase downstream capacity on prevention of sexual exploitation and abuse (PSEA) among partners and beneficiaries, UNICEF continued to train frontline workers on PSEA. During the reporting period, PSEA training was conducted to 69 individuals (47 men and 22 women) who were drawn from adolescent youth network membership and extenders from Kandahar, Jalalabad, Badghis, Herat and Balkh provinces.

⁴ Afghanistan: Infectious Disease Outbreak Situation Report #12 31 October 2021

⁵ https://covid19.who.int/region/emro/country/af

Education

Female teachers and education administration workers have continued to remain at home with exceptions being reported in some provinces across the country. Most restrictions on the implementation of interventions by partners have been removed, except on resuming Accelerated Learning Centres (ALC) and Girls' Access to Teacher Education (GATE) classes. The discussion to re-open GATE classes continues, and in a few provinces, as Teacher Training Centres (TTC) are opening and agreements have been reached to ensure that students who were in their final month(s) of their academic year can sit their exams. This will be a crucial step forward as more female teachers will be required to ensure all girls can return to school.

Since August 15th, UNICEF, through its partners, has been able to ensure 5,350 CBEs are running, reaching 142,797 children. In addition, support has been provided to 627 schools with the Global Partnership for Education (GPE) funding to ensure safe operations (e.g. through the provision of handwashing facilities and soap) to prevent COVID-19 and promote safe hygiene practices. The provision of teaching and learning materials, training of teachers and where possible catch-up classes, are creating conditions for children to reconnect with learning after prolonged school closures due to insecurity and COVID-19.

WASH

With cases of Acute Watery Diarrhoea (AWD) cases increasing from mid-September, 2,550 kg of chlorine powder was distributed to the urban water supply authority in Kabul for mass chlorination of water in 11 hotspot locations of Kabul city benefiting an estimated 77,000 people. In addition, 150 kg of chlorine powder was provided to the urban water supply authorities in Parwan province to ensure safe drinking water to an estimated 5,000 people and curb the spread of AWD. UNICEF also provided over one million aquatabs to vulnerable people in AWD hotspot areas for the purpose of water treatment at the household level.

Under the humanitarian WASH interventions, 4,021 people, including school children and teachers in three schools in Herat and Farah provinces, accessed safe drinking water, menstrual hygiene management (MHM) facilities and handwashing facilities. In addition, 16,100 people in Herat, Nangarhar and Nuristan benefited from a hygiene promotion program in which essential WASH supplies, including hygiene kits and soap were distributed.

During October, UNICEF continued to provide emergency water through water trucking to an estimated 193,000 people in six districts of Balkh province in drought-affected areas. Soap bars were also distributed to the affected people to encourage handwashing to prevent COVID-19.

Communication for Development (C4D) and Accountability to Affected Populations

During the reporting period, 1,618 community health workers, religious leaders, community influencers, community protection workers and school management shura were oriented and trained on addressing COVID-19 vaccine hesitancy, as well as promoting and improving knowledge and communities' acceptance of vaccines. 66 social mobilizers supported COVID-19 campaigns reaching 28,000 community members to discuss the benefits of COVID-19 vaccination, address hesitancy issues and identify service points where they can be vaccinated. Additional concerns and questions on rumours and side effects of the vaccine were responded to through local social mobilizers and 10 radio programmes. A media campaign launched on September 26th ended on October 9th, reaching six million people across the country with broadcasting key messages on COVID-19 vaccination and prevention of acute watery diarrhoea.

In addition, 150 community engagement sessions were conducted at health posts and communities across three districts in Nangahar province, reaching 3,000 individuals (1920 males and 1080 females) with key prevention messages on dengue fever, COVID-19 and AWD. A poll on COVID-19 vaccine perception through U-Report took place

from October 14th to October 30th. Findings were shared with partners to incorporate into their programs and develop more targeted messaging and approaches.

Gender and Adolescents Development and Participation

Despite ongoing uncertainties across the country, some locations remained flexible on women and adolescent girls' empowerment activities. In October 2021:

- A total of 3,100 participants (1,389 male, 1,711 females out of which 1,876 were adolescent girls and boys) including influential community elders, community members and local authorities were reached with awareness and information GBV prevention and community leaders' role on protection of women and girls.
- 80 members of community men's networks were orientated on their important role as change agents for the promotion of gender equality and GBV risk mitigation.
- Through mentoring sessions, 160 out-of-school adolescent girls were reached with key messages aimed at preventing child marriage including the promotion and value of education as well as GBV prevention.
- A total of 13 women and girls' friendly spaces are fully functional in three provinces. Over 263 women and young girls were reached with psychosocial support (PSS) sessions.
- 50 religious leaders were trained on preventing violence against women and child marriage.

Social Protection and Cash Transfers

In October 2021, UNICEF scaled up registration of households to provide humanitarian cash assistance in Samangan, Kandahar and Kabul. In Kabul, an initial 750 households received a multi-purpose cash assistance combined with child protection case management to help families meet their basic needs. In this period, UNICEF established new partnerships for large scale registration for winterization assistance in Central Region provinces (Logar and Wardak) and Eastern Region (Nuristan). UNICEF is overcoming challenges of liquidity by having a diverse portfolio of Financial Service Providers (FSPs) to support UNICEF's scale up of humanitarian cash transfers.

Humanitarian Leadership, Coordination and Strategy

During the reporting period, UNICEF-led clusters continued to engage in the development of the inter-agency planning documents. A one-day workshop was held on October 11th to discuss targeting, prioritization, and planning figures, including calculations of the people in need. The WASH Cluster partners have been able to gain verbal agreement from the de facto authorities in most locations to allow female staff to work at the office and on the ground to continue to provide life-saving services. Orientations were provided to all clusters on the Cluster Coordination Performance Monitoring (CCPM), in readiness for the annual CCPM survey to be conducted in November.

All cluster partners continue to experience challenges with liquidity, affecting salary and contractor payments. Challenges remain across the country with varied permissions on women's right to work, across and within provinces as well as across clusters. This directly impacts education and child protection services and while some programming continues, there is a need to engage with authorities at all levels across the clusters to ensure harmonization.

External Media, Statements & Human Interest Stories

- ED Fore <u>statement</u> on rise in early marriage in Afghanistan.
- ED Fore <u>statement</u> on 6 children killed due to unexploded ordnance.
- Afghanistan Country Office <u>statement</u> -- Half of Afghanistan's children under five expected to suffer from acute malnutrition as hunger takes root for millions. UNICEF and WFP representatives sound alarm on nutrition crisis for children and mothers following joint visit to Herat.
- Afghanistan Country Office and WHO <u>joint press release</u> on the resumption of polio vaccinations. Also covered by <u>Al Jazeera</u>.

⁶ https://afghanistan.ureport.in/opinion/5383/

BBC Radio 4: Sam Mort, UNICEF's Chief of Communication, Advocacy & Civic Engagement based in Kabul, described the situation of the health system in Afghanistan. Mort said: "The clinics are closed or deeply compromised, so we're seeing people flooding to main hospitals, putting them under huge pressure." Also BBC Radio 5 Live on the humanitarian situation and food insecurity.

Next SitRep: December 15th, 2021

UNICEF Afghanistan Humanitarian Action for Children Appeal: https://www.unicef.org/appeals/

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Annex A

Summary of Programme Results

	UNICEF and IPs				Cluster Response*			
Sector	2021 target	Total results Jan-July	Total results Aug-Oct	Total (Jan-Oct)	2021 target	Total results Jan-July	Total results Aug-Oct	Total (Jan-Oct)
Nutrition								
Number of children 6-59 months with SAM admitted for treatment	500,000	170,018	88,489	258,507	400,000 ⁷	119,717	64,180	183,897
Number of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	67,000	39,281	25,683	64,964	446,176	5,235	58,371	63,606
Number of children aged 6 to 59 months provided with micronutrient powders	4,382,700	0	0	0				
Health								
Number children aged 6 to 59 months vaccinated against measles	568,000	283,529	234,283	517,812				
Number of children and pregnant women accessing primary health care in UNICEF-supported facilities	620,000	22,900	9,616	32,516				
Number of health care facility staff and community health workers trained on infection prevention and control	24,000	106,481	0	106,481				

⁷ Cluster targeting only 27 provinces while UNICEF targeting all 34 provinces of Afghanistan

Number of children 6-59 months vaccinated against polio	435,000	6,522,025	1,098,472	7,620,497				
WASH								
Number of people accessing a sufficient quantity of safe water for drinking, cooking, and personal hygiene	500,000	64,930	223,762	288,692	1,405,982	480,955	452,357	933,312
Number of people reached with critical WASH supplies (including hygiene items) and services	975,000	214,830	357,208	572,038	3,457,647	1,241,880	576,440	1,818,320
Number of people accessing basic sanitation facilities	250,000	5,565	9,667	15,232	539,581	537,205	14,429	551,634
Child Protection, GBViE and PSEA								
Number of children and caregivers accessing mental health and psychosocial support	310,320	49,682	68,480	118,162	400,000	75,972	69,553	145,525
Number of women, girls and boys accessing GBV risk mitigation, prevention, or response interventions	62,064	2,627	6,344	8,971				
Number of unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services	8,220	2,091	1,231	3,322	8,000	2,289	1,232	3,521
Education								
Number of children accessing formal or non-formal education, including early learning	858,000	69,276	142,797	212,073	1,041,077	128,850	133,061	261,911
Number of schools implementing safe school protocols (infection prevention and control)	1,250	0	627	627				
Social Protection and Cash								
Number of households reached with humanitarian cash transfers across sectors	20,000	900	750	1,650				
C4D, Community engagement and AAP								
Number of people reached with messages on access to services	8,000,000	2,230,000	6,130,873	8,360,873				

Number of people participated in engagement actions for social and behavioural change	500,000	618,832	518,964	1,137,796		
Number of people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms	50,000	11,447	129,752	141,199		
Gender & Adolescents Dev. and Participation						
Number of women, men, adolescent (age 10-19) girls and boys and key influencers including frontlines trained on gender roles, promote non-discriminatory practices and positive social norms	190,942	15,035	3,180	18,215		
Number of adolescent (age 10-19) boys and girls reached with life skills	82,452	1,439	625	2,064		
NFI						
Number of households reached with critical lifesaving NFIs	15,000	21,427	8,439	29,866		

^{*}Cluster results may vary due to reporting timeframes

Annex B

Funding Status⁸

		Funds av	ailable	Funding gap		
Sector	Requirements	Humanitarian and other resources received in 2021 *	Resources available from 2020 (Carry-over)	\$	%	
Health	14,835,952	25,797,978	7,538,832	-	0%	
Nutrition	45,140,000	22,575,405	7,665,347	14,899,248	33%	
Child Protection	14,640,000	10,883,133	835,332	2,921,535	20%	
Education	58,618,560	33,954,923	8,348,837	16,314,800	28%	
WASH	45,750,000	7,380,526	4,948,090	33,421,384	73%	
Social Protection & HCT	4,880,000	2,298,374	443,991	2,137,635	44%	
Adolescents/Youth/Gender	1,610,400	599,263	28,238	982,899	61%	
C4D	3,921,080	54,001	976,992	2,890,087	74%	
Cluster Coordination	2,562,000	3,308,202	1,259,979	-	0%	
Total	191,957,992	106,851,805	32,045,638	73,567,588**	38%	

^{*}Excluding funds earmarked for beyond 2021
**Funding gap calculated by subtracting sections that have received excess funds for sustaining basic services

 $^{^{8}}$ * Funding needs for the 2021 HAC were calculated pre-August 15th and do not reflect the full needs of the emerging crisis