Afghanistan

The crisis in Afghanistan has been ongoing for over 18 years, and humanitarian needs driven by armed conflict, natural disasters and poverty are on the rise. In 2020, over 9.4 million people (56 per cent children) will require humanitarian and protection assistance. Half of the population of Afghanistan – nearly 17 million people – live in conflict-affected areas and 103 districts are assessed as hardest to reach. The people of Afghanistan are routinely exposed to human rights violations, including deliberate attacks on schools and health facilities, sexual and gender-based violence and forced recruitment. Between January and September 2019, over 280,000 people (58 per cent children) were newly displaced by conflict and 336,000 people returned to Afghanistan. One third of school-aged children (3.7 million children, including 2.2 million girls) are out of school, and 2 million of these children live in conflict-affected areas. An estimated 2 million children under 5 years and 485,000 pregnant and lactating women are affected by acute malnutrition, and nearly 600,000 children are at risk of severe acute malnutrition (SAM) in 2020. Direct and indirect violence against humanitarian personnel and assets/facilities continues to challenge humanitarian access, with 319 such incidents recorded between January and September 2019.

Humanitarian strategy

UNICEF operations in Afghanistan will be led by its five field offices and six outposts to enable countrywide coverage and quality programming. As lead of the nutrition and water, sanitation and hygiene (WASH) clusters and the child protection area of responsibility and co-lead of the education cluster, UNICEF will enable strategic planning, coordinated response, capacity building of partners and advocacy at the national and state levels. Life-saving humanitarian assistance will be provided through the delivery of a timely, effective and integrated package of nutrition, health, WASH, child protection and education services. Sub-district health centres and mobile teams will provide hard-to-reach crisis-affected people with vital health and nutrition services. Education interventions will be expanded to include a multi-sectoral component incorporating WASH and child protection, including psychosocial support and referrals, which will increase programme costs. To improve humanitarian action and development programme linkages, UNICEF will invest in preparedness measures and risk-informed programming to strengthen local and community capacities by applying durable solutions to the most pressing needs of affected populations. Emergency cash programming will be implemented using common cash systems through inter-agency mechanisms such as the Cash Working Group. UNICEF will also promote cross-cutting work in communication for development, accountability to affected populations, early childhood development and gender to promote community resilience.

Results from 2019

As of 31 August 2019, UNICEF had US$20.5 million available against the US$50 million appeal (41 per cent funded). UNICEF and partners reached some 500,000 affected people (60 per cent children) with humanitarian assistance during the year. Given the lack of flexible funding, UNICEF prioritized urgent life-saving interventions, limiting the ability of sectors and clusters to fully achieve their 2019 targets. Responses largely covered people affected by floods, drought and conflict in camps, host communities and places of origin. UNICEF reached affected populations with gender-sensitive integrated services in education facilities, basic health centres, child-friendly spaces and communities. UNICEF’s humanitarian interventions focused on the provision of supplies and services that included the distribution of ready-to-use therapeutic foods, hygiene kits, teaching and learning materials, school tents, vaccines, essential medicines, winter kits, etc. UNICEF provided technical support and capacity building for partners at the national and sub-national levels to improve emergency preparedness and response. As part of efforts to strengthen the linkages between humanitarian action and development programming, sectoral plans were developed based on multi-hazard vulnerability and risk analysis. With funding gaps exceeding 90 per cent for health, child protection and education, UNICEF reprogrammed regular resources to ensure the delivery of essential services.
As per reports of the National Disease Surveillance and Response, between January and June 2018, there were 175 measles outbreaks recorded (2,415 cases); whereas 19 outbreaks (175 cases) were detected during the same period in 2019. Due to the reduction in the number of outbreaks, only 12,237 children have been vaccinated thus far in 2019, including during the peak time between March and May. The cluster target is lower than the UNICEF target because the cluster target only covers 22 provinces and the UNICEF target covers 34 provinces.

### Funding requirements

In line with Afghanistan’s inter-agency Humanitarian Response Plan 2018–2021, UNICEF is requesting US$72 million to meet the humanitarian needs of women and children in 2020. These resources will allow UNICEF to provide life-saving and urgent education, nutrition, health and child protection services in the most vulnerable and hard-to-reach areas. Without additional funding, UNICEF will be unable to support the countrywide response to the ongoing conflict in Afghanistan and provide critical services to internally displaced persons and populations affected by conflict and natural disasters.

### Table: Education in Emergencies Dashboard – Afghanistan, September 2019

<table>
<thead>
<tr>
<th>Sector</th>
<th>2020 requirements (US$)</th>
<th>2021 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nutrition</strong></td>
<td>22,500,000</td>
<td>22,500,000</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td>8,150,000</td>
<td>8,150,000</td>
</tr>
<tr>
<td><strong>Water, sanitation and hygiene</strong></td>
<td>8,000,000</td>
<td>7,150,000</td>
</tr>
<tr>
<td><strong>Child protection</strong></td>
<td>6,500,000</td>
<td>7,000,000</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>23,700,000</td>
<td>22,035,000</td>
</tr>
<tr>
<td><strong>Cluster/sector coordination</strong></td>
<td>1,200,000</td>
<td>1,200,000</td>
</tr>
<tr>
<td><strong>Cash transfers and accountability to affected populations</strong></td>
<td>2,000,000</td>
<td>2,000,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>72,050,000</td>
<td>70,035,000</td>
</tr>
</tbody>
</table>

### Additional notes:

6. Ibid.
8. Ibid.
9. Ibid.
11. This was calculated using the proportion of children within the total population used in the Humanitarian Needs Overview/Humanitarian Response Plan (56 per cent).
12. This includes children under 5 years targeted for SAM treatment (300,000); 95 per cent of the adult population targeted with access to safe drinking water (108,775); pregnant and lactating women benefiting from quality health services and health education (150,000); and children targeted for access to education (210,000). As per the draft 2020 Humanitarian Needs Overview data sheets, the ratio of boys and girls is approximately 50:50.
13. This includes children under 5 years targeted for SAM treatment (300,000) and children targeted for access to education (210,000). As per the draft 2020 Humanitarian Needs Overview data sheets, the ratio of boys and girls is approximately 50:50.
14. The education requirement has increased compared with 2019 due to the expansion of the education package for the set up of community-based classes (comprising supply distribution, teacher recruitment and training and community leader capacity building) to include a multi-sectoral component through the inclusion of WASH and child protection psychosocial support and referrals.

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