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Reporting Period: January 01, 2021 – December 31, 2021

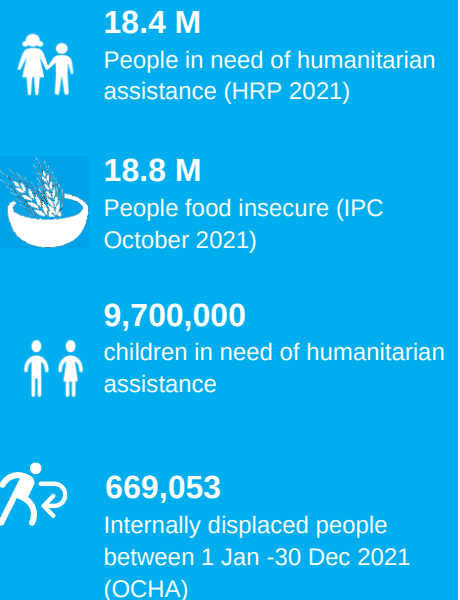
# Afghanistan

## Humanitarian Situation Report from January – December 2021

### Highlights

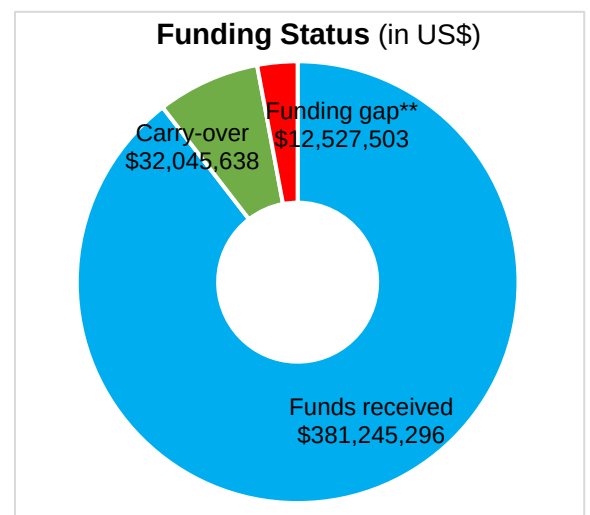
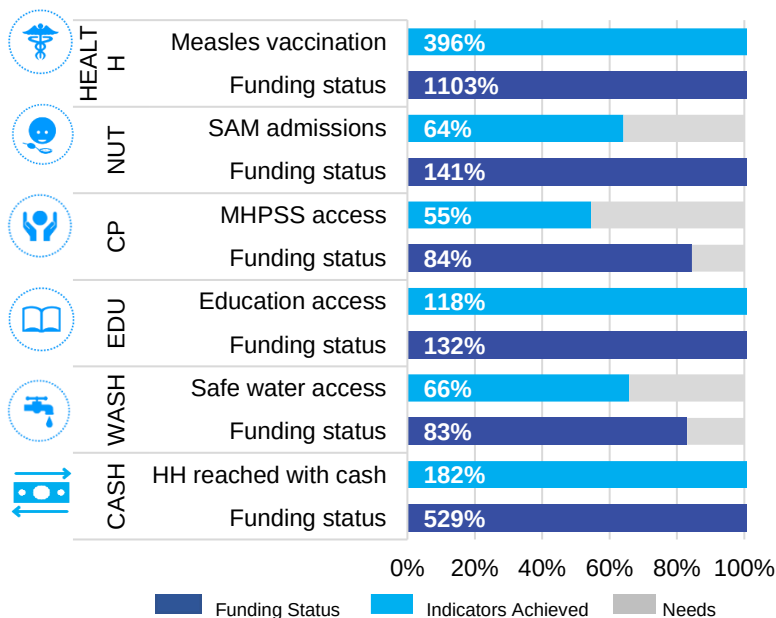
- 2021 saw increased conflict, severe drought, multiple outbreaks, the withdrawal of international forces and a significant political transition. However, within this context, UNICEF reached **4,246,562 people including 3,180,003 children**.
- Programmatic adaptations, rapid-scale-up and developing new ways of working in Q4 resulted in almost doubling most programmatic achievements and paved the way for UNICEF to reach 15 million people in 2022.
- UNICEF-led clusters developed scale-up strategies to work with partners on alternative modalities for response and worked to achieve results within the 2021 Flash Appeal.
- In October 2021, the Integrated Phase Classification (IPC) forecasted more than 52% of the population will be living in emergency IPC phase 4 between October and March 2022.
- 24.4 million Afghans, including 13.1 children, will need humanitarian assistance in 2022. Of this number, 1.1 million are acutely malnourished children under the age of five years (HRP 2022).

### Situation in Numbers



### UNICEF Appeal 2021

**US\$191,957,992\***



\* Funding needs for the 2021 HAC were calculated pre-August 15<sup>th</sup> 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 January 2021, UNICEF requested US\$ 143.6 million to respond to the humanitarian needs of children. As the context shifted dramatically in August 2021 and the humanitarian needs increased, UNICEF scaled-up its response with a revised appeal to provide life-saving services to 6.1 million people, including 5.7 million children, requiring US\$ 192 million. UNICEF has regularly engaged with partners to mobilize the resources required to support its scale-up plan. Consistent engagement, information sharing and continued advocacy for flexible emergency funding to operate in the new environment enabled UNICEF to obtain the necessary funding to respond to rising needs.

Public donors, international financial institutions, and private donors through UNICEF National Committees, have provided generous contributions to UNICEF Afghanistan's humanitarian response. Donors include, amongst others, the Afghanistan Reconstruction Trust Fund (ARTF), the Central Emergency Response Fund (CERF), the European Union (International Partnerships and Humanitarian Aid), Afghanistan Humanitarian Fund (AHF), the governments of Canada, Denmark, France, Germany, Japan, the Republic of Korea, Sweden, the United Kingdom, and USAID's Bureau for Humanitarian Assistance, and nexus funding from the Global Partnership for Education (GPE) and Education Cannot Wait (ECW). UNICEF also received funds from Global Humanitarian Thematic Funds and Emergency Programmatic Funds which provided much needed flexible funding to adapt to the changing context and enable rapid response and scale up. UNICEF expresses its sincere gratitude to all donors and looks forward to partner with them to deliver results against its 2022 HAC appeal of US\$ 2 billion.

## Situation Overview & Humanitarian Needs

Significant events in 2021 impacted access, limited supply and demand of services and brought further turmoil to a country amid decades of war. Escalating conflict, the COVID-19 pandemic, disease outbreaks, unprecedented severe drought, severe winter weather and a political transition that resulted in many uncertainties, including deepening poverty, all intensified the vulnerabilities of children and women in Afghanistan. The third wave of the COVID-19 outbreak significantly impacted access as schools were closed and movement restrictions were imposed to curb the spread. The wave peaked between May-July with around 2,000 cases per day. Throughout 2021, humanitarian needs increased from 18.4 million people in 2021 to 24.4 million in 2022 representing a 30% increase from last year.<sup>1</sup>

At the beginning of 2021, due to lack of snow fall, the country was moving towards a drought. The scope and severity of the drought was underestimated and affected two thirds of the country. According to 2021 Whole of Afghanistan (WoA) Assessment, 46% of rural households reported that drought affected their communities. Internal conflict increased in the first half of 2021. As a result, over 900 schools closed and a third of all households reported the presence of explosive hazards in or closely around their location. A record number of child casualties were recorded in the first half of 2021, comprising 32% of all casualties.<sup>2</sup> The conflict resulted in an increasing number of internally displaced people from 13,335 to more than 669,053 people across Afghanistan from the beginning of the year to 30 December 2021.<sup>3</sup> In addition to the internal displacements there was significant outflow and influx of people throughout 2021 spiking at various times due to conflict, uncertainty and the political transition. An estimated 4,959,037 individuals left Afghanistan between 1 January and 31 December 2021 and an estimated 4,497,490 returned during the same period. However, these figures do not account for unofficial border crossings which would substantially increase the total numbers.<sup>4</sup>

Since the events of August 15<sup>th</sup>, political, economic, and social shocks have compounded humanitarian needs. Critical public services that children and families rely on contracted or halted completely as the economy went into free-fall. Disruption to markets, movements across borders, financial and trade mechanisms, cash and liquidity, and the freezing of USD 9.5 billion in central bank reserves has led to GDP contracting by an estimated 40 per cent. This has had a direct impact on humanitarian needs as the very systems used to deliver response collapsed.

The deterioration had a direct impact on women and children. In the fourth quarter of 2021, schools re-opened but secondary schools remained closed in most provinces for adolescent girls. Teachers were not paid for months, resulting in some leaving the profession. While less than 20% of the urban population had access to piped water in cities, the drinking water supply reduced by half in urban settings, resulting in water contamination contributing to

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<sup>1</sup> Humanitarian needs and planned response 2022. OCHA, Jan 2022

<sup>2</sup> Humanitarian Needs Overview 2022

<sup>3</sup> <https://www.humanitarianresponse.info/en/operations/afghanistan/idps>

<sup>4</sup> DTM presentation to the HCT January 20<sup>th</sup>, 2022

the rise in acute watery diarrhoea (AWD). The abrupt halt to the SEHATMANDI project left primary health care clinics either closing or running out of medications which led to provincial, or district hospitals being overwhelmed. SAM cases rose steadily between August and December, proxy SAM rates in some provinces were 3% higher compared to the same time the previous year, due to lack of access to services and households' abilities to cope with rising costs in disruptions in income and availability of cash.

While 2021 has been full of unprecedented challenges, UNICEF was able to reach **4,246,562 people including 3,180,003 children**. Programmatic adaptations, rapid-scale-up and developing new ways of working in quarter four has paved the way for UNICEF to reach 15 million people in 2022.

## Summary Analysis of Programme Response

### Health

Pre-August 2021, through mobile health teams, UNICEF provided life-saving health services to 23,000 children and 22,900 pregnant women predominantly in conflict-affected and remote underserved districts. These achievements were possible in part due to concerted efforts in risk communication and community engagements that reached 12.7 million people with key health related messages. In response to the COVID-19 pandemic, UNICEF provided 570,000 personal protective equipment (PPEs) for 7,000 health care workers country-wide, and 560 oxygen concentrators helped over 12,000 severe cases of COVID-19. UNICEF took a leading role in the introduction of the COVID-19 vaccine in Afghanistan, focusing on procurement, cold chain improvements, demand generation and service delivery. The uptake to COVID-19 vaccination showed remarkable success, with 0.7 million people above the age of 18 years old fully vaccinated. This was attributed to site-to-site interventions organized by UNICEF and other partners. Post-August 15<sup>th</sup>, UNICEF continued to support COVID-19 vaccinations resulting in a total of 4,856,713 people (15.5% of the total eligible population) above age of 18 years receiving at least one dose of the vaccine by the end of 2021.<sup>5</sup>

Post-August 15<sup>th</sup>, as the health system was on the brink of collapse and large projects went on pause, UNICEF focused on scaling-up emergency response through increased mobile health teams – going from 60 to 137 teams by the end of December. To prevent the collapse of the health system, UNICEF secured CERF funding to support restarting the SEHATMANDI project and provided basic health care services across the country. From January 2021, UNICEF provided 1,048,559 million people with life-saving services in 17 out of 34 provinces.<sup>6</sup>

In response to the AWD cases, UNICEF with partners, provided and distributed required medical supplies in Kabul and Kandahar, including prepositioning in Herat and Jalalabad provinces, reaching around 150,000 people. Awareness raising interventions reached around 7 million people across the country with information, education, and communication (IEC) materials on prevention of AWD/Cholera. Mobile clinics were operational on an emergency basis to cover Kabul city with distribution of anti-diarrhoea treatment (ORS and Zinc tablets), including aqua tabs for water treatment at household level and active case findings.

In 2021, UNICEF supported polio eradication by administering 28.1 million doses delivered through four campaigns and complementary vaccination activities. Three campaigns were conducted pre-August 2021 and UNICEF and partners successfully negotiated with the *de facto authorities* to conduct a campaign in November 2021. This included a combination of modalities using house-to-house vaccinations and mosque-to-mosque vaccinations across the country.

### Nutrition

At the beginning of 2021, UNICEF continued delivery of lifesaving nutrition services in partnership with basic primary health services (BPHS) and humanitarian partners through fixed health facilities and mobile teams. With the nationwide COVID-19 pandemic and 25 provinces affected by drought, UNICEF continued programmatic adaptations to maintain and scale-up nutrition programming. UNICEF assessed the needs of implementing partners and increased the zonal level storage capacity from 1000m<sup>3</sup> to 2100m<sup>3</sup> where possible, and prepositioned therapeutic supplies in the provinces to respond to the rising needs. In 2021, UNICEF and partners treated 320,523 children (143,074 boys, 177,449 girls) with severe acute malnutrition (SAM) and a total of 78,370 pregnant and lactating women were provided with Infant and Young Child Feeding in Emergencies (IYCF-E) services.

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<sup>5</sup> WHO AFGHANISTAN EPIDEMIOLOGICAL BULLETIN, Epidemiological Week 52

<sup>6</sup> The 2021 HAC was revised pre-August 2021 and SEHATMANDI targets are outside of the scope, thus not reflected in the results annex below

Following the political transition, the pause in health service funding caused a severe disruption of the BPHS platform for nutrition service delivery. In addition, the economy sharply contracted, and households were struggling to provide for their families. UNICEF conducted a rapid mid-upper-arm circumference (MUAC) screening of 6,000 children in 26 IDPs settlements within 14 provinces to understand the nutritional situation amongst families in need. The assessment indicated an alarming situation of acute malnutrition up to 42% in the south. As a result, UNICEF activated a contingency plan and scaled up the integrated mobile health and nutrition teams (MHNTs) from 26 to 137, to ensure continuation of nutrition lifesaving preventive and treatment services in the high priority areas. In addition, UNICEF doubled the number of nutrition extenders to from 38 to 76 and trained them on nutrition reporting, monitoring tools and systems over four days in each zonal office. In October, when the BPHS services restarted, UNICEF conducted a mass media campaign to encourage the uptake of SAM services and the educate on misuse of Ready to Use Therapeutic Food (RUTF) due to reports that some RUTF was being sold in the market.

### **Child Protection, GBViE and PSEA**

During the first seven months of 2021, UNICEF, with the support of its partners and extenders, provided life-saving child protection (CP) response services to 123,109 individuals (44,057 boys, 36,193 girls, 21,506 men and 21,353 women). Out of which, 49,682 individuals (48% girls and women) benefited from mental health and psychosocial support (MHPSS) services and referrals; 56,922 individuals (49% girls and women) benefitted from messages and awareness raising on children protection. Case management services reached 9,140 children (6,404 boys and 2,736 girls) including 2,091 unaccompanied and separated children (2,069 boys and 22 girls) who were reunified with their parents and caregivers. Gender based violence (GBV) response, prevention, and risk mitigation services reached 2,627 individuals and life-savings supplies, including warm clothes and hygiene kits, were provided to the 1,433 vulnerable families. Additionally, a total of 2,705 households with vulnerable children received cash assistance. Significant improvements in the child protection legal and institutional systems were achieved through endorsement of laws and policies such as the Policy on Safeguarding Child Rights and Protection of Children in Contact with the Law under the Ministry of Interior, Policy, on the Protection of children in Armed Conflict under the Ministry of Defence and Protection, and the National Child Protection Policy under the Ministry of Labour and Social Affairs (MOLSA). This was followed by training packages that supported the quality of the child protection services provided to children. While these were endorsed under the previous government, it provides a platform for discussion with the de facto authorities.

In response to growing humanitarian needs post-August 2021, child protection services were scaled up through strengthening existing and expanding partnerships with new NGOs and community mechanisms. A total of 169,302 individuals (46% girls and women) benefited from MHPSS and 104,311 individuals (36% female) benefitted from messages and awareness raising on child protection. Cash support and accompanied case management benefited 13,825 vulnerable children. Emergency winterization supplies reached 25,688 children in Central, Northern, Western and Eastern regions.

UNICEF continued to focus on strengthening the capacity of staff, partners including frontline workers on prevention of sexual exploitation and abuse (PSEA). To increase awareness and capacity to respond to sexual exploitation and abuse (SEA), over 250 staff drawn from UNICEF partners and suppliers were trained on SEA prevention and response. Over 34,000 SEA-related information, education, and communication (IEC) materials were printed and distributed in English, Pashto, and Dari, to increase awareness. Post 15 August, PSEA activities focused on orientation and scale up capacity of implementing partners to integrate SEA in their programming. 158 partners and UNICEF suppliers were trained on SEA risk mitigation and integration. A total of 10,936,000 people were reached with information on PSEA through community awareness and U-Report chat-box. In August, UNICEF Afghanistan revised its guidance note on reporting SEA within UNICEF and for partners in line with the revised global guidance. This was complemented with the re-activation of UNICEF's own hotline number for SEA reporting including dedicated email address for increased safe and confidential reporting. This informed part of orientation of partners and staff.

### **Education**

In 2021 access to education was a challenge for several million children across Afghanistan. During the first half of the year, programme implementation was affected due to school closures during the third wave of COVID-19 – including community-based education (CBE), support to formal schools and Girls' Access to Teacher Education (GATE) - as well as the internal changes within the Ministry of Education (MoE). This affected upstream engagement activities such as the development of the national strategy for learning assessment and the roll out of in-service teacher training program. Initially, the COVID-19 pandemic resulted in prolonged school closures between June 2020 and May

2021. The political transition in August prolonged closures and resulted in uncertainty on the future of girls' education. Without adequate alternatives to continue learning at home and prolonged school closures, many children have faced massive learning losses and are at-risk of dropping out, thus joining the four million children currently out of school.

Towards the end of August 2021, primary schools reopened for all children and on 17 September 2021 secondary schools (grades 7-12) opened for male students and teachers. Despite the challenging context, UNICEF accelerated implementation to respond to the growing needs through 7,804 CBE classes thus ensuring access to learning for 245,995 children (including 129,647 girls). Further, the GATE scholarship program, closed due to COVID-19, with 1,060 female students enrolled at the start of 2021, restarted in nine out of 17 provinces, and resulted in 193 female students graduating with pre-service training to increase the overall number of female teachers. UNICEF continued to distribute essential teaching and learning material to the most marginalised children in Afghanistan. This included the provision of 100,000 school bags, 35,766 textbook sets, 557 handwashing stations with soap, 147 high-performance tents and various supplementary classroom materials across 30 provinces benefiting 70,250 children (33,720 girls and 36,530 boys). In December alone, 10,448 children received learning materials. For 2021, in sum, some 1,015,144 children benefitted from teaching and learning materials.

## **WASH**

In the first half of 2021, UNICEF's humanitarian WASH response prioritized conflict and drought-affected locations across Afghanistan. Focusing on areas of high need, UNICEF provided 64,930 people with access to safe water, 5,562 people with access to gender-sensitive sanitation facilities and 214,830 people benefitting from hygiene awareness and hygiene supplies. Strengthening and promoting humanitarian-development nexus was prioritized through implementation of durable water supply projects. The continued advocacy on increasing access to WASH facilities in institutions such as schools and health centres resulted in 522 schools gaining access to safe drinking water, gender segregated sanitary toilets and handwashing facilities benefitting 41,549 students. Moreover, 8 health centres in 7 provinces were provided with WASH facilities benefitting a total catchment of 555,000 people.

After the political transition, priorities shifted to addressing immediate needs and preserving the WASH Sector and preventing collapse. This included supporting operations and maintenance of WASH systems in urban and rural areas, supporting Community Development Councils (CDCs) to continue service delivery, enhancing the partnership base with NGOs, and implementing new programme implementation modalities such as direct implementation through engaging with the private sector. Through this, UNICEF was able to support affected populations with humanitarian WASH assistance, achieving the following results: a total of 264,131 people gained access to water, 389,251 people were provided with hygiene services and hygiene items, and 13,012 people with basic sanitation services. In close consultation with the education and health sections, 50 healthcare facilities were provided with WASH interventions and 23 schools received WASH facilities/services.

The Whole of Afghanistan Assessment found that 18 provinces had catastrophic levels of AWD (Acute Watery Diarrhoea) (>55%) among children under five. The WASH section developed operational response plan and jointly approach with Communication for Development (C4D) to ensure long-term behaviour change processes, through stronger community engagement to improve the adoption of immediate, safe WASH related practices and longer-term behaviour change.

## **Communication for Development (C4D) and Accountability to Affected Populations**

In the first half of 2021, Afghanistan introduced the COVID-19 vaccine and UNICEF, as the lead agency for risk communication and community engagement (RCCE), developed integrated RCCE and COVID-19 vaccination plans. Media campaigns were conducted to increase awareness, reaching 1.2 million people nationwide. 400,000 posters with key messages on immunization were developed and distributed. UNICEF held orientation sessions on COVID-19 prevention and vaccination for 5,300 members of different community groups and reached 282,782 people through community engagement interventions. To support the reopening of schools in compliance with safety measures, a media campaign, targeting school children and teachers, was conducted, reaching 700,000 students with messages on COVID-19 prevention measures.

In August 2021, the country plunged into crisis and millions of people needed humanitarian assistance and protection. In conjunction with the political crisis, outbreaks such as AWD/cholera, measles and dengue fever occurred in many parts of the country. Two surveys on knowledge, attitudes and practices related to AWD/cholera were conducted among 50,000 people and helped tailor the ongoing response. To respond to AWD outbreaks in the Central and Southern Regions, 40 social mobilizers were hired, and 4,610 community dialogue sessions conducted reaching

552,496 people with key messages on cholera prevention. 27,000 religious leaders and 12,400 community leaders (school management shura, community health workers) were trained on key cholera prevention messages to be disseminated in their communities and integrated media campaigns through radio and television reached 6 million people across the country.

UNICEF conducted two rapid assessments through U-Report with over 100,000 people to assess the priority needs of at-risk and affected populations on access to humanitarian assistance and preferred complaint and feedback mechanisms. Based on the findings, UNICEF developed a chatbot on how and where to get food, water and other humanitarian services and reached 10 million people with messages on services and life-saving actions via SMS. UNICEF has also developed and distributed to community platforms educational behaviour change communication materials, including the integrated emergency booklet and the GBV prevention and response booklet.

### **Gender and Adolescents Development and Participation**

Prior to the political transition, UNICEF partnered with grassroots women led CSOs for community led gender transformative interventions. UNICEF finalized and rolled out a guidance note on the establishment of women and girls' friendly space (WGFS). Through the WGFS established in Herat and Kandahar and targeted community outreaches, a total of 15,035 women, men, adolescent (age 10-19) girls and boys were reached with information on gender roles, GBV risk mitigation and available basic services (GBV and health), while 43 families and 114 young women received psychosocial support services, including timely referral of cases that needed specialized care by relevant GBV service providers.

To enhance and institutionalise partner capacity to integrate gender in their programming, a total of 60 participants (25 women and 35 men) drawn from UNICEF partners were trained in gender analysis and how to integrate gender in programme assessments, programme design, implementation, and monitoring. UNICEF finalised the development of adolescent toolkit and translated to Dari and Pashto languages for partners implementing adolescent-centric programming and capacity building. In the first half of 2021, a total of 1,439 adolescent (age 10-19) boys and girls were trained on life skills. To address social norms and negative masculinities, UNICEF through women led CSOs supported the piloting and establishment of 15 men and boys' networks in Herat and Kandahar.

Post August, the impact for women and girls was immediately felt, with restrictions on movement and their participation in public life curtailed, affecting their access to life saving information and services. UNICEF supported partners to establish a total of 40 WGFS in Herat, Kandahar, Paktya, Daikundi, Balkh, Parwan and Kabul provinces. Through WGFS and community outreach activities, 23,173 women and young girls, including influential community elders, community members and local authorities, were reached with awareness and information GBV prevention and available basic services. To ensure women's and girls, sanitary and dignity needs, UNICEF, and partners distributed 2,376 dignity kits to girls and women across four provinces in Afghanistan.

UNICEF scaled-up strategic partnership with nine local grassroots women's and youth led feminist and rights-based organization for promotion of women and girls' empowerment. These have been instrumental voice for capturing concerns and 2-way communication and feedback on key concerns of women and girls. This was complemented by a specific [U report poll](#), on women participation, that sought to understand the women's concerns across Afghanistan where 44,000 U-Reporters participated. UNICEF conducted capacity assessment of women CSOs between October and December, to identify existing capacity and gaps post August 15. The capacity assessment report has assisted UNICEF to develop capacity building and mentorship plan in the areas of leadership and advocacy, GBV service provision in the current context.

UNICEF supported 570 frontline workers (health workers, mobile health teams, nutrition counsellors, and women leaders) in Balkh, Parwan and Daikundi provinces. They were oriented on how to conduct safety audits within health/nutrition facilities and surrounding communities. The first round of safety audit report findings was consolidated in December 2021. The results will inform UNICEF and partners on how to mitigate safety and protection concerns at community and facility level, as women and their children access basic health and nutrition services.

### **Social Protection and Cash Transfers**

In 2021, UNICEF set out to scale up the use of humanitarian cash transfers (HCT). The first half of the year, UNICEF targeted Afghanistan as the second country in the world to roll out its new dedicated management information system (MIS) in Afghanistan. This system, the humanitarian cash operations and programme ecosystem (HOPE), enabled

UNICEF to support the scale up of HCT, by ensuring systems are in place to securely handle beneficiary data, apply targeting criteria, create payment lists, carry out payment verification, process feedback and grievances, and more. All of UNICEF partners for cash-based assistance (CBA) were trained on the use of the system. In Q1 of 2021, UNICEF provided cash for winter in Herat and Ghor provinces, shifting from in-kind assistance to CBA, reaching 900 households (6,570 people), including 547 persons with disabilities.

As part of the scale up of the humanitarian response post-August 2021, multi-purpose cash (MPC) was widely used to support households in meeting their basic needs during shocks, including drought, COVID-19, winter, and the worsening economic situation, which have all contributed to a stark rise of poverty levels and growing humanitarian needs. While the weakening financial system has been a challenge, through a strong network of financial service providers (FSPs), UNICEF has been able to reach those most in need with cash transfers.

In September, UNICEF registered nearly 1,438 households in Samangan province, an area affected by drought and high levels of multi-dimensional poverty. Here, UNICEF provided three rounds of cash transfers with the first round taking place in November, reaching 1,165 families (8,505 people), targeting families with children with disabilities, households with pregnant and lactating women (PLW) and female headed households. The second and third round are taking place in January 2022. In the period October to December 2021, UNICEF also provided MPC assistance to families identified by child protection partners, using a Cash Plus approach, combining cash transfers with child protection case management.

In October, UNICEF initiated a large-scale cash response to support families' basic needs during winter months, prioritizing provinces with the highest snow cover and highest levels of multi-dimensional and monetary poverty. Registration of households for this response started in November in Nuristan, Logar, and Wardak, with the first distributions taking place in December. By the end of 2021, 84,409 households were registered in HOPE, supporting a further scale up of HCT in 2022. In December, 33,644 households were reached with cash transfers in various parts of the country.

All together in 2021, UNICEF provided cash transfers in Kabul, Herat, Ghor, Kandahar, Samangan, Nuristan and Wardak provinces, reaching a total of 266,151 people (36,459 households), including a total of 156,819 children with US \$7,000,810. Throughout its CBA response in 2021, UNICEF prioritized households most affected by shocks, including female headed households, families with children with disabilities, and households with PLW.

## Humanitarian Leadership, Coordination and Strategy

In early 2021, the inter-cluster coordination team (ICCT) developed an Afghanistan Spring Disaster Contingency Plan which outlined anticipated responses to potential drought and other emergencies. This was followed by a Whole of Afghanistan Assessment (WOAA) in the lead-up to the 2022 Humanitarian Programme Cycle (HPC) preparations. The WOAA data was collected using key informant interviews, focus group discussions and household surveys both pre and post political transition and covered all sectors across the country. The crisis that emerged post August resulted in the development of a September-December 2021 Flash Appeal to address both emerging and critical unmet needs of 10.8 million people requiring US\$ 606.2 million.

The WASH Cluster Core Pipeline supplies management procedures were revised in March 2021 to ease and speed up the request process. As a result, agencies can make requests and collect emergency supplies within 24 hours. Nutrition partners continued to implement adaptive programming as per COVID-19 protocols during the third wave and escalated the use of mobile health and nutrition teams when the BPHS system halted for several months. In August, the Education in Emergencies (EiE) working group initiated the process to become an active cluster to avoid any complications with the de-facto authorities and to be able to move more quickly to respond to needs and undertake much needed advocacy. This was approved by the Interagency Standing Committee on 11 November. The Child Protection Sub-Cluster worked to improve service delivery through the establishment of sub-national working groups to ensure that accountability and reporting from partners at the regional level and the establishment of a Children Associated with Armed Forces and Armed Groups (CAAFAG) Task Force.

## External Media, Statements & Human Interest Stories

- Parwana's journey to recovery from severe [acute malnutrition](#).
- Life after severe acute malnutrition, Baby Danyal's [story](#).

- Rising [health risks for children across Afghanistan](#) as disruption to health and nutrition services continues and winter sets in.
- [UNICEF launches historic appeal](#) to save millions of children's lives.
- Sam Mort, Chief of Communications, UNICEF Afghanistan [reports from Bamiyan Provincial Hospital](#) on the malnutrition crisis.
- ED Fore [statement](#) on rise in early marriage in Afghanistan.
- ED Fore [statement](#) on 6 children killed due to unexploded ordnance.
- Afghanistan Country Office [statement](#) -- 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.
- Sam Mort, UNICEF's Chief of Communication, Advocacy & Civic Engagement based in Kabul, described the situation of the health system in Afghanistan [BBC Radio 4](#).
- [Statement by UNICEF Executive Director](#) welcoming the reopening of schools and highlighting the importance of including girls in higher education, a [news note on UNICEF supplies](#) arriving through the EU humanitarian airbridge.
- Lead story on [Al-Jazeera](#) highlighting the health and nutrition crisis facing children in Afghanistan.
- UNICEF Afghanistan Representative's interview with [The Guardian](#).
- Story by Reuters on [girls' education](#).

Next SitRep: January 26th, 2022 (bi-weekly)

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

Who to contact for further information:

Alice Akunga  
Representative a.i.,  
UNICEF Afghanistan  
Tel: +93799987101  
Email: [aakunga@unicef.org](mailto:aakunga@unicef.org)

Felix Ackebo  
Senior Emergency Specialist  
UNICEF Afghanistan  
Tel: +93 799987158  
Email: [fackebo@unicef.org](mailto:fackebo@unicef.org)

Sam Mort  
Chief of Communication  
UNICEF Afghanistan  
Tel: +93 790507110  
Email: [smort@unicef.org](mailto:smort@unicef.org)

## Summary of Programme Results

|                                                                                                                   | UNICEF and IPs Response |                        |                       |                   |                            | Cluster Response |                        |                       |                   |                            |
|-------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------|-----------------------|-------------------|----------------------------|------------------|------------------------|-----------------------|-------------------|----------------------------|
| Sector                                                                                                            | 2021 target             | Total results Jan-July | Total results Aug-Nov | Total results Dec | Total (cumulative Jan-Dec) | 2021 target*     | Total results Jan-July | Total results Aug-Nov | Total results Dec | Total (cumulative Jan-Dec) |
| <b>Nutrition</b>                                                                                                  |                         |                        |                       |                   |                            |                  |                        |                       |                   |                            |
| Number of children 6-59 months with SAM admitted for treatment                                                    | 500 000                 | 170 018                | 125 926               | 24 579            | 320 523                    | 400 000          | 119 717                | 158 406               | 22 456            | 300 579                    |
| Number of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling | 67 000                  | 39 281                 | 32 558                | 6 531             | 78 370                     | 446 176          | 5 235                  | 62 958                | 6 202             | 74 395                     |
| Number of children aged 6 to 59 months provided with micronutrient powders                                        | 4 382 700               | 0                      | 0                     | 0                 | 0                          |                  |                        |                       |                   |                            |
| <b>Health</b>                                                                                                     |                         |                        |                       |                   |                            |                  |                        |                       |                   |                            |
| Number children aged 6 to 59 months vaccinated against measles <sup>7</sup>                                       | 568 000                 | 263 386                | 390 485               | TBC               | TBC                        |                  |                        |                       |                   |                            |
| Number of children and pregnant women accessing primary health care in UNICEF-supported facilities                | 620 000                 | 615,189                | 334,656               | 98,714            | 1,048,559 <sup>8</sup>     |                  |                        |                       |                   |                            |
| Number of children 6-59 months vaccinated against polio <sup>9</sup>                                              | 435 000                 | 6 522 025              | 21 577 975            | 0                 | 28 100 000 <sup>10</sup>   |                  |                        |                       |                   |                            |
| <b>WASH</b>                                                                                                       |                         |                        |                       |                   |                            |                  |                        |                       |                   |                            |
| Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene         | 500 000                 | 64 930                 | 246 131               | 18 203            | 329 264                    | 2 405 982        | 587 653                | 1 187 964             | 283 112           | 2 058 729                  |
| Number of people reached with critical WASH supplies (including hygiene items) and services                       | 975 000                 | 214 830                | 389 251               | 43 950            | 648 031                    | 3 457 647        | 1 416 528              | 647 467               | 141 039           | 2 205 034                  |
| Number of people accessing basic sanitation facilities                                                            | 250 000                 | 5 565                  | 13 012                | 6194              | 24 771 <sup>11</sup>       | 1 039 581        | 544 134                | 18 025                | 10 419            | 572 578                    |

<sup>7</sup> Measles vaccination campaign figures from December 2021 are still under validation. Final figures will be added once confirmed.

<sup>8</sup> In 2021, there were significant disruptions to data collection, quality and reporting due to escalating violence, COVID-19 waves, interruptions in the health system and lack of trained personnel and timely reporting. As a result the data reported in 2021 does not accurately reflect the results achieved in the delivery of primary health care services. The figures above represent the results achieved based on a data reviews at the provincial levels, and improvements in HMIS/DHIS capacity.

<sup>9</sup> Target was set in January 2021 for acute emergencies only and for specific regions (South and East) of the country. However, after the political transition focus turned to the whole country with targets easily surpassed.

<sup>10</sup> Result reflects doses administered

<sup>11</sup> Target was increased based on the assumption of mass internal displacement in the last two quarters of 2021. As the figures of displacement were relatively small there was no need to install additional emergency sanitation facilities

| Child Protection, GBVIE and PSEA                                                                                                                   |           |           |           |           |            |           |         |         |        |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-----------|------------|-----------|---------|---------|--------|---------|
| Number of children and caregivers accessing mental health and psychosocial support                                                                 | 310 320   | 49 682    | 84 978    | 34 642    | 169 302    | 400 000   | 75 972  | 86 051  | 48 584 | 210 607 |
| Number of women, girls and boys accessing GBV risk mitigation, prevention or response interventions                                                | 62 064    | 2 627     | 11 290    | 6 752     | 20 669     |           |         |         |        |         |
| Number of unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services | 8 220     | 2 091     | 1 414     | 1597      | 5 102      | 8 000     | 2 289   | 1 415   | 1 600  | 5 304   |
| Education                                                                                                                                          |           |           |           |           |            |           |         |         |        |         |
| Number of children accessing formal or non-formal education, including early learning                                                              | 858 000   | 69 276    | 689 425   | 256 443   | 1 015 144  | 1 341 077 | 128 850 | 259 515 | 23 770 | 412 135 |
| Number of schools implementing safe school protocols (infection prevention and control)                                                            | 1 250     | 0         | 736       | 736       | 1472       |           |         |         |        |         |
| Social Protection and Cash                                                                                                                         |           |           |           |           |            |           |         |         |        |         |
| Number of households reached with humanitarian cash transfers across sectors                                                                       | 20 000    | 900       | 1 915     | 33 644    | 36 459     |           |         |         |        |         |
| C4D, Community engagement and AAP                                                                                                                  |           |           |           |           |            |           |         |         |        |         |
| Number of people reached with messages on access to services                                                                                       | 8 000 000 | 2 230 000 | 6 654 630 | 3 494 289 | 12 378 919 |           |         |         |        |         |
| Number of people participated in engagement actions for social and behavioural change                                                              | 500 000   | 618 832   | 891 622   | 43 044    | 1 553 498  |           |         |         |        |         |
| Number of people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms       | 50 000    | 11 447    | 132 565   | 36 246    | 180 258    |           |         |         |        |         |
| Gender & Adolescents Dev. and Participation                                                                                                        |           |           |           |           |            |           |         |         |        |         |
| Number of women, men, adolescent (age 10-19) girls and boys and key influencers                                                                    | 190 942   | 15 035    | 5 014     | 23 173    | 43 222     |           |         |         |        |         |

|                                                                                                              |        |        |       |       |        |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------|--------|--------|-------|-------|--------|--|--|--|--|--|
| including frontlines trained on gender roles, promote non-discriminatory practices and positive social norms |        |        |       |       |        |  |  |  |  |  |
| Number of adolescent (age 10-19) boys and girls reached with life skills                                     | 82 452 | 1 439  | 1 945 | 5 413 | 8 797  |  |  |  |  |  |
| <b>NFI</b>                                                                                                   |        |        |       |       |        |  |  |  |  |  |
| Number of households reached with critical lifesaving NFIs                                                   | 15 000 | 21 427 | 8 439 | 0     | 29 866 |  |  |  |  |  |

## Annex B

### Funding Status

| Sector                   | Requirements       | Funds available                                   |                                            | Funding gap       |           |
|--------------------------|--------------------|---------------------------------------------------|--------------------------------------------|-------------------|-----------|
|                          |                    | Humanitarian and other resources received in 2021 | Resources available from 2020 (Carry-over) | \$                | %         |
| Health                   | 14,835,952         | 156,114,725                                       | 7,538,832                                  |                   |           |
| Nutrition                | 45,140,000         | 56,148,208                                        | 7,665,347                                  |                   |           |
| Child Protection         | 14,640,000         | 11,531,787                                        | 835,332                                    | 2,272,881         | 16%       |
| Education                | 58,618,560         | 69,301,617                                        | 8,348,837                                  |                   |           |
| WASH                     | 45,750,000         | 33,042,873                                        | 4,948,090                                  | 7,759,036         | 17%       |
| Social Protection & HCT  | 4,880,000          | 25,359,573                                        | 443,991                                    |                   |           |
| Adolescents/Youth/Gender | 1,610,400          | 2,172,310                                         | 28,238                                     |                   |           |
| C4D                      | 3,921,080          | 448,502                                           | 976,992                                    | 2,495,585         | 64%       |
| Cluster Coordination     | 2,562,000          | 27,125,702                                        | 1,259,979                                  |                   |           |
| <b>Total</b>             | <b>191,957,992</b> | <b>381,245,296</b>                                | <b>32,045,638</b>                          | <b>12,527,503</b> | <b>7%</b> |