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Reporting Period: 1 – 31 July 2022

# Afghanistan

## Humanitarian Situation Report

### Report # 8

#### 1 – 31 July 2022



### Situation in numbers



**24.4 M**

People in need of humanitarian assistance (HNO 2022)



**13.1 M**

children in need of humanitarian assistance (HNO 2022)



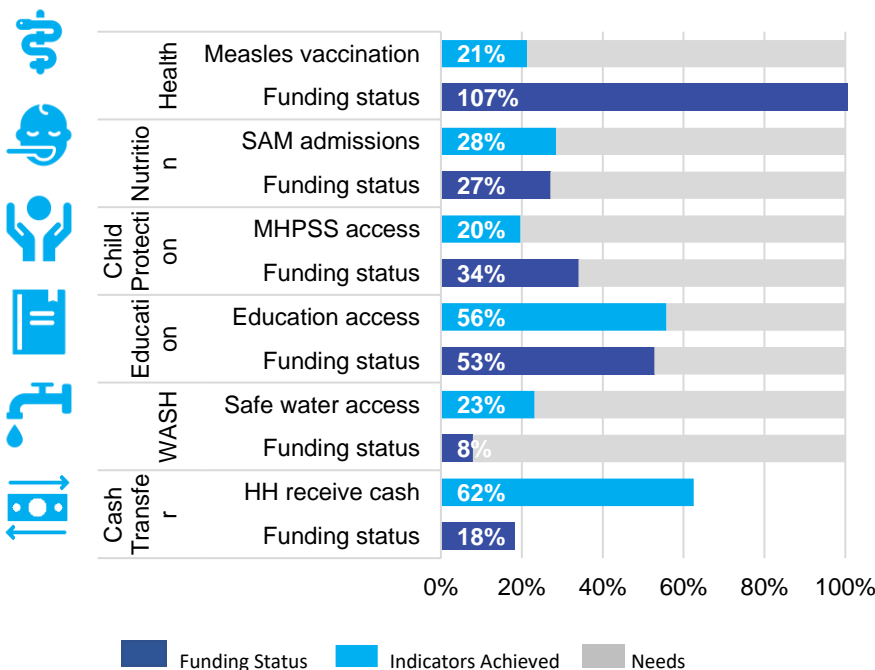
**1.1 M**

Severely acutely malnourished children under the age of five years expected to need treatment (HRP 2022)

### Highlights

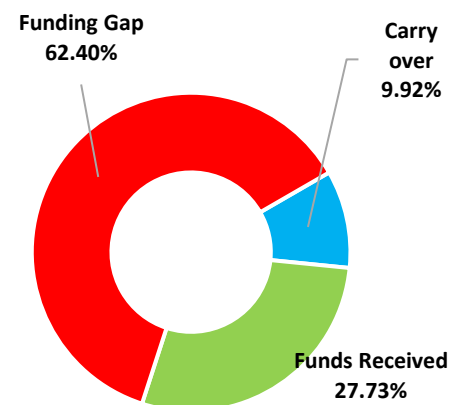
- Across the country flooding affected thousands of people, killing at least 39, as well as destroying farmlands and severely impacting livelihoods. UNICEF and partners responded to the floods through interagency needs assessments and with emergency WASH and health interventions.
- Throughout July, UNICEF continued its earthquake response reaching more than 13,340 people with health services, including for injuries and trauma, in Khost and Paktika, while more than 35,000 people received WASH supplies and safe drinking water in the affected districts.
- UNICEF continued to scale up its nutrition response with 49,591 children receiving life-saving treatment for severe acute malnutrition (SAM). Helmand and Kandahar Provinces in the Southern Region had the highest number of SAM cases (25 % of those admitted for treatment).
- Schools remained closed for girls in secondary school in July. Despite the challenges, UNICEF reached 283,000 children (55 per cent girls) with educational opportunities through 9,887 community-based education (CBE) classes.

### UNICEF's Response and Funding Status\*



### UNICEF Appeal 2022

**US\$2,047,724,710**



\*The response and funding status is cumulative from the beginning of the year

## Funding Overview and Partnerships

The UNICEF Afghanistan Humanitarian Action for Children (HAC) appeal is the largest single-country appeal in the history of the organization, valued at US\$ 2 billion for 2022. Thanks to generous contributions from partners, the appeal is currently around 38 per cent funded. This includes flexible emergency funding from both public and private partners, which will allow UNICEF to continuously use resources to respond to rising and sudden needs. Some contributions received in 2021 continue to enable implementation in 2022, together with additional support received this year. UNICEF is grateful to the Afghanistan Reconstruction Trust Fund (ARTF) and Global Financing Facility for Women, Children and Adolescents Multi-Donor Trust Fund (GFF), the United Kingdom Foreign Commonwealth and Development Office (UK FCDO), the Governments of Ireland, Korea, and New Zealand, the United States Agency for International Development (USAID), the Central Emergency Response Fund (CERF) and the UNICEF's family of National Committees for contributions received in the last month. UNICEF will continue to partner with donors to ensure sufficient resources are mobilized to address the needs of children and communities in Afghanistan.

## Situation Overview & Humanitarian Needs

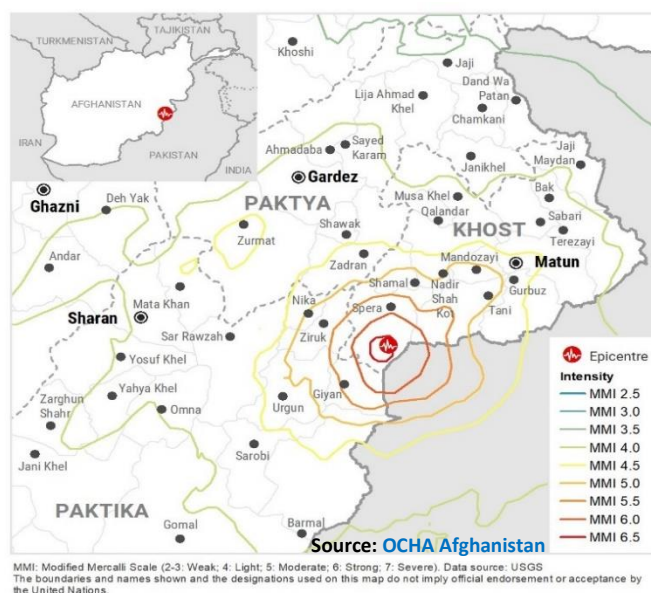
Aftershocks from the 5.9 magnitude earthquake on 22 June 2022 continued to be felt in July in Khost and Paktia Provinces. Analysis shows that Spera and Shamal Districts in Khost Province and Barmal, Ziruk, Nika and Gayan Districts in Paktika Province were the most affected districts in these two provinces. As of July 2022, an estimated total of 1,036 people were killed and 2,924 were injured. At least 4,500 homes were damaged (fully or partially) in Paktika and Khost Provinces, leaving many without shelter and sleeping in the open, prone to weather, health, protection, and other hazards.<sup>1</sup>

July witnessed significant heavy rains and atypical summer flooding across Afghanistan, affecting several provinces in the western, eastern, southern, south-eastern, and central regions. Flash floods reportedly killed at least 39 people and an additional 16 people were reported injured. In the south, the districts of Zabul, Kandahar and Uruzgan were the most affected, with a reported 1,325 people affected in Zabul alone. Assessments are ongoing in Kandahar and Uruzgan. Initial assessments indicate that more than 7,000 people in the Eastern Region have been affected by floods. In Farah Province, in the Western Region, 2,121 people are in need of assistance due to flooding, with assessments ongoing in other parts of the region. The interagency response is underway across all flood-affected areas.

Rain also damaged or destroyed at least 1,206 houses and seriously impacted livelihoods: businesses, crops, farmland and irrigation systems were destroyed in at least nine provinces. Roads, bridges and irrigation systems were also impacted.<sup>2</sup> Even before the flooding, the livelihood situation in rural Afghanistan was critical, with many farmers in severe debt due to the financial crisis. The floods may push even more farmers and those living in rural areas into poverty.

July also saw an increase in conflict-related displacement, especially in Bamyan Province and Balkhab District, Sar-e Pol Province. At least 27,000 people were temporarily displaced after fighting began in Balkhab District, fleeing to neighbouring northern provinces and to Bamyan Province in the central highlands. Approximately 6,000 people were displaced to Bamyan alone. Due to the inaccessibility of locations where people were displaced to, initial verification and response was difficult, but an interagency assessment was carried out and an emergency response was mobilized involving UNICEF and partners. In other locations, such as Panjshir, Takhar, and Kapisa Provinces, incidents of armed conflict were also reported.

In July, over 10,800 cases of acute watery diarrhoea (AWD) and 23 associated deaths were reported, with 84 districts in 17 provinces now affected. Since May 2022, Jawzjan (11,379 cases, 59.7 per cent of total number), Helmand (3,579 cases,



<sup>1</sup> Earthquake Damage Assessment - Khost, Paktika and Paktiya Provinces, Afghanistan (July 2022) - Afghanistan | ReliefWeb

<sup>2</sup> Afghanistan: Flash Update #3 - Flash Flooding in Central, Eastern, Southern, South-Eastern and Western Regions (5 August 2022) - Afghanistan | ReliefWeb

18.8 per cent) and Kabul (1,156 cases, 5.1 per cent) have been the most affected provinces. Of the total number of cases, 16.5 per cent were children under 5 years and 31.0 per cent of the total number of cases had severe dehydration.

There were also 4,041 reported cases of suspected measles and 12 associated deaths. This represented a continued reduction in the number of new suspected measles cases this year. In the last week of July, the weekly number of suspected measles cases dropped below 1,000 for the first time in 2022. The measles outbreak affected the entire country; however, the most affected provinces were Badakhshan, Nangarhar, Kabul and Kunduz.

## Summary Analysis of Programme Response

### Health

Throughout July, UNICEF continued to support delivery of routine primary and secondary health care services, as well as primary health care delivery to populations with no access to health facilities. UNICEF also responded to acute emergencies, including disease outbreaks and natural disasters, through 2,300 health facilities in all 34 provinces through 24,000 health workers.

In July, more than 3.8 million people received inpatient and outpatient health care, including about 1.26 million children under-five. UNICEF staff and extenders conducted monitoring visits to 432 health facilities across the country to assess the functionality of the facilities. More than 95 per cent of visited health facilities were reported to have functional maternal and child health services, and functional immunization services in 91.5 per cent of visited facilities.

Through 171 mobile health and nutrition teams (MHNTs), over 118,000 people in remote, hard-to-reach and previously inaccessible areas received medical care, including 56,415 children under five. MHNTs faced several operational challenges, including incorrect mapping and identification of “white areas”<sup>3</sup> and a shortage of supplies due to significant delays by the Afghanistan Drug Authority (AFDA) in issuing quality certification of pharmaceuticals. However, AFDA clearance was eventually granted for most medicines, which will resolve the immediate supply shortage. A nationwide assessment of UNICEF-supported MHNTs is also ongoing to review their performance. The outcome of this assessment will be reported in Situation Report #9 at the end of August.

In July, UNICEF continued to respond to disease outbreaks and natural disasters. A total of 39,800 children under five were vaccinated against measles through routine immunization programmes. An additional 138,000 children between 6 months and 14 years were vaccinated in Sarobi, Barmal, Gayan, Urgun, Ziruk, and Nika Districts in Paktia Province, and in Spera District in Khost Province, as part of the earthquake response campaign between 23 and 28 July 2022. A measles vaccination campaign is also planned for mid-August in 85 newly identified high-risk districts in 25 provinces. The campaign will target 1.49 million children aged 6-59 months.

To respond to AWD outbreaks, UNICEF established Integrated Emergency Response Teams in “hotspot locations”<sup>4</sup>. To enable treatment of AWD, UNICEF established 322 cholera treatment units in health facilities, and established 1,209 oral rehydration points at health facilities and in communities. UNICEF partners also received 56 AWD treatment kits.

COVID-19 vaccination continued in health facilities. A community-based outreach campaign for COVID-19 vaccination was launched in mid-July with over 2.49 million people fully vaccinated by the end of July 2022.

UNICEF continued to provide emergency medical care and lifesaving health and nutrition services through seven health centres and three MHNTs in earthquake affected Paktika and Khost Provinces. In July, there were 13,340 outpatient consultations, including for injuries and trauma, while 160 critical patients were referred to provincial hospitals. Service delivery contracts were signed with two partner organizations to provide AWD/cholera response services in earthquake affected districts. Ten oral rehydration points and two cholera treatment units were also established in these areas.

### Nutrition

In July, 49,591 children received life-saving treatment for severe acute malnutrition (SAM). Over 1 million children between the ages of 6 and 59 months were screened for malnutrition.

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<sup>3</sup> A “white area” is an area of operation that was previously inaccessible.

<sup>4</sup> A hot spot location is an area with a high caseload of a disease outbreak or an area at high risk for a future outbreak.

Helmand and Kandahar Provinces in the Southern Region, had the highest number of SAM cases, contributing 25 per cent of the total number of children admitted for treatment across the country. This was likely driven by weak infant and young child feeding practices, drought, acute food insecurity, poor access to safe water and good sanitation, and AWD. Overall, the main challenges for families to access treatment include long distances from homes to treatment facilities, and unavailability or cost of transportation. Broadly scaling up nutrition services remains a key priority for UNICEF in the Southern Region.

As of the end of July, all facilities supported under the Basic Package of Health Services (BPHS) project and 171 MHNTs were providing nutrition prevention and treatment services across the country. In addition, 18 private clinics are newly providing malnutrition prevention and treatment services in the Central, Eastern and Northern Regions. However, the Ministry of Public Health has directed healthcare activities to scale down in private facilities and to build up in public facilities. UNICEF continued to expand nutrition services to other UN agency platforms; 63 UNFPA-funded family health house sites in the south and west received supplies and training. Additional scale up to these sites is planned.

In July, 229,153 caregivers received nutrition counselling through health facilities and mobile services across the country. From January through July 2022, UNICEF has supported nearly 1.7 million nutrition counselling sessions across the country. Due to an error in the Health Management Information System database, counselling services for infant and young child feeding practices were underreported between January and June 2022. This error was identified and figures from the previous months were reported correctly in the cumulative total for the July report.

In June, UNICEF supported roll-out of the national micronutrient powder (MNP) programme. Over 200,000 children aged 6-59 months received MNPs and 8,358,453 children received vitamin A supplementation through the national campaign. Moreover, 700 health workers trained on integrated management of acute malnutrition and over 1,000 were trained on maternal, infant and young child nutrition in July.

UNICEF supported training for 650 social mobilizers to raise awareness on integrated nutrition messages in 19 provinces. These social mobilizers will support implementation of weekly iron and folic acid supplements for adolescent girls, MNP distribution for children aged 6-59 months, and implementation of the Community Based Nutrition Programme (CBNP).

In July, UNICEF supported a national scale-up of a simplified treatment protocol for children with SAM, which recommends a lower dosage of RUTF. This scale-up is expected to be completed by September 2022. In August 2022, UNICEF will begin supporting treatment of children with severe cases of moderate acute malnutrition (MAM) as a measure to prevent increased SAM cases.

Scale-up of nutrition services in activities in urban areas, including construction of new outpatient departments and day care sites, remain challenging due to bottlenecks with the de facto authorities at the provincial level. In June, the Ministry of Public Health halted further provincial data collection for all agencies and partners. The remaining four SMART surveys planned in Bamyan, Daikundi, Badakhshan and Uruzgan Provinces are therefore on hold along with all health field studies. Negotiations to reinstate the surveys are underway.

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

In July 2022, the Country Task Force on Monitoring and Reporting (CTFMR) verified 72 grave violations which affected 58 children (11 girls and 47 boys). Violations reported included 53 cases of killing and maiming, four cases of sexual violence, and one case of child recruitment into armed forces or groups. In July 2022, killing and maiming remain the most prevalent grave violation, representing 91 per cent of the total violations affecting children. The majority affected were boys.

A key issue is a lack of resources to provide victims of grave violations with immediate lifesaving assistance, including medical treatment. The CTFMR continues to invest in capacity building of frontline workers to deliver critical child protection and gender-based violence (GBV) services, and to monitor incidents of grave child rights violations. UNICEF has supported training for 66 case workers and UN staff (16 female and 50 male) on monitoring and reporting mechanism (MRM) standards.

A total of 13,571 children (5,164 girls and 8,407 boys) received child protection case management services across the country. Family tracing and reunification for unaccompanied and separated children (UASC) remained a key priority. In July, 1,273 UASC (289 girls and 984 boys) were reunified with their parents or provided with family-based or alternative care. Of these children, 272 were placed in alternative family care with their caregivers as part of the earthquake response in Khost and Paktika Provinces.

To address GBV, UNICEF reached out to 20,744 children and caregivers (4,596 girls, 967 boys, 12,170 women, and 3,011 men) with prevention, risk mitigation, and response interventions. This included distribution of 400 dignity kits as part of the earthquake response in the Central Region.

The risk of explosive ordnances continued to pose significant danger to children in Afghanistan, especially as previously inaccessible locations opened, resulting in a high number of child casualties. Since the start of the year, a total of 462 children were affected, with 136 children killed and 328 maimed by explosive ordnances. UNICEF and partners reached over 108,000 children and members of communities (31,081 girls, 37,498 boys, 18,745 women, and 20,676 men) with sessions on explosive ordnance risk education to help prevent injuries and death.

In July, UNICEF finalized key messages and scripts for the national campaign on mental health and psychosocial support (MHPSS). These messages will be broadcast through TV, radio, social media, and community engagement sessions during the August 2022 campaign. UNICEF also supported 133,753 children and caregivers (49 per cent girls and women) with MHPSS services and messages on well-being. Of these children and caregivers, over 14,000 were in earthquake affected districts. They also received psychosocial support through 12 new child-friendly spaces in Barmal, Gayan and Spera.

UNICEF supported 503 children on the move<sup>5</sup> (74 girls and 429 boys) with protective services in July. An additional 2,359 adolescent girls received training on income generation and life skills in adolescent-friendly centres, aiming to reduce their vulnerabilities and build self-esteem.

In July, 45 UNICEF partners were trained on prevention of sexual exploitation and abuse (PSEA), including mitigation, prevention, response, and reporting. In addition, 77 staff from UNICEF partner organizations working in earthquake affected areas were oriented on PSEA. UNICEF also facilitated messaging on PSEA through U-Report, where PSEA related messages were sent to 6,500 males and 1,750 females across Afghanistan.

## Education

Schools remained closed for girls in secondary school. There was no official announcement from the de facto authorities on when they might be able to continue and under which conditions. UNICEF continued to monitor the situation through staff, technical extenders and partners, and found that despite the restrictions, secondary schools remained open for girls in 11 provinces, with secondary schools fully open in five provinces and some schools open in six provinces.

In July, UNICEF continued supporting about 283,000 children (55 per cent girls) with educational opportunities through 9,887 community-based education (CBE) classes. UNICEF distributed classroom materials and teaching and learning materials to CBEs and public schools, benefitting a total of 194,815 students. In addition, 615,231 public school students were supported with textbook distribution in the Western Region.

In July, UNICEF paid 11,229 CBE teacher salaries for the month of June through the UNICEF Programme Management Unit (PMU) and through implementing partners. As part of the emergency cash support programme, which provides about US\$ 100.00 per month for public school teachers through the PMU, grievance redressals continued, but no additional payments were made in July. As of the end of July, UNICEF has supported emergency cash payments for 191,102 public school teachers (33 per cent female), reaching 99 per cent of the 192,979 identified eligible teachers. This number excludes Technical Vocational Education and Training (TVET) teachers, who will be paid in the upcoming month. In July, UNICEF also supported training of 572 teachers.

## Water, Sanitation and Hygiene (WASH)

During July, UNICEF provided 496,301 people with access to safe water. Of these, 482,716 were provided water through temporary emergency water provision, such as household water treatment products, chlorination, and water trucking, in response to high rates of AWD, drought, and the impact of natural disasters such as floods and earthquakes. From the total number of people reached with access to safe water, 13,585 were reached with durable solutions through five new solarised water systems and one gravity fed system. Sixteen communities were trained on water safety plans.

In July, over 1.4 million people received critical WASH supplies, including 21,525 displaced persons affected by conflict in Sar-e Pol Province.

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<sup>5</sup> Children who have migrated, voluntarily or involuntarily, within or between countries, often without parents or caregivers.

In the Southern Region, UNICEF provided 53 healthcare facilities in Zabul, Helmand, Uruzgan and Farah Provinces with chlorine and sprayers to improve infection prevention and control measures. In these facilities, 82 staff were trained on operation and maintenance of these supplies, as well as disinfection measures. In Zabul, UNICEF built new solar systems and handwashing facilities in four health centres. UNICEF also built four new latrines and supported rehabilitation of 18 others, along with construction of four incinerators. In Kandahar, UNICEF supported one school with a new solarized borehole and handwashing facility, benefiting 450 students and 12 teachers. UNICEF also supported desludging and rehabilitation of 28 latrines, and provided soap to 137 schools in Ghor, Herat, and Zabul Provinces.

In July, UNICEF provided 14,602 people with new latrines, while 31,549 people were supported with improvements to existing latrines. In the Southern Region, 29,501 people were reached through solid waste management campaigns in 14 locations in Zabul, Uruzgan and Kandahar.

In July, 1,212,699 people were reached with hygiene promotion across the country, including 1,119,027 people who were reached with hygiene promotion specific to AWD/ cholera.

In earthquake affected areas and surrounding districts, UNICEF is conducting blanket distribution of household water treatment products and soap for an estimated 2 million people. This is intended to mitigate the risk of AWD. Distribution of critical supplies and hygiene awareness is ongoing social mobilizers and implementing partners. So far, 18,775 people have received hygiene kits, 35,776 people have received household water treatment products, and 34,269 people have received soap. To further mitigate AWD, UNICEF trucked safe drinking water to 19,562 people in Gayan and Barmal Districts in Paktika Province.

Eight hundred families in earthquake affected areas have received latrine squatting plates, which households have used to build latrines, digging pits and constructing superstructures using local materials. Plans are underway to support an additional 5,000 families with installation of emergency latrines. UNICEF is also planning for more durable water supply solutions, such as construction of 18 solar powered piped water supply networks in Khost and Paktika Provinces (nine in each province). Upon completion of these networks, 4,179 families (29,253 people) will have access to safe drinking water within their household premises.

### **Social and Behaviour Change (SBC) and Accountability to Affected Populations (AAP)**

SBC interventions aim to promote greater community participation, engagement, and accountability in Afghanistan. In July, 9,226,100 people were reached with key behaviour change messages and information on humanitarian situations and disease outbreaks through mass media campaigns; distribution of information, education and communication materials; programme partners; social mobilizers; and community networks.

Through 2,093 community sessions conducted by 630 social mobilizers, 147,318 caregivers, community-based health service providers, persons with disabilities, and displaced persons were engaged in two-way dialogues. Partners and community influencers like religious leaders, community development councils, youth networks, and school management shuras were instrumental in facilitating these community engagement dialogues. Topics covered in the dialogues included prevention of malnutrition, including the importance of reporting to health facilities if a child is sick or underweight; COVID-19; AWD/ cholera; avoiding open defecation; and practicing good hygiene in their daily lives. Sessions on nutrition addressed maternal and child health, SAM service uptake, promotion of breastfeeding, and infant and young child feeding.

UNICEF also engaged over 11,000 influencers from community networks and structures to support community engagement interventions. These influencers included youth, community health workers, school management shuras, polio structures, religious leaders, Child Protection Action Networks, nutrition councillors, UNICEF technical extenders, and social mobilizers. These groups were trained to reach and engage communities on behaviour change and dissemination of lifesaving messages.

To strengthen the humanitarian response mechanism through existing community structures and as part of UNICEF's Accountability to Affected Populations (AAP), UNICEF supported an integrated community engagement system through two-way dialogues with communities to support programme design, delivery, and collection of community insights and feedback. In July, 9,651 people shared their feedback and concerns through different channels including through social mobilizers, Community Engagement and Feedback Centres, and programme partners. Several people expressed their concerns over AWD/ cholera, lack of safe drinking water, girls' education, and lack of medicine in health facilities. This

feedback was addressed by sharing accurate and timely information with communities and by referring complaints to relevant UNICEF programme sections and clusters.

### **Gender and Adolescent Development and Participation**

UNICEF continued to reach out to women and girls through 87 women and girls' safe spaces (WGSS) in 15 provinces. In Nuristan, Lagman and Paktia Provinces, 14 new WGSS were established. In July, 11,229 women and girls (5,870 women and 5,359 girls) received lifesaving information through these spaces on risk mitigation and integrated services as well as psychological first aid, psychosocial support, GBV case management, referrals, life-skills and livelihood training. A total of 619 GBV cases were identified and psychosocial supported provided through WGSS as well as in the community by social workers. Through community dialogues and awareness raising, 41,523 women and girls were reached with GBV prevention messages. UNICEF supported women and girls with their personal and menstrual hygiene by distributing 1,664 dignity kits and 2,500 bars of soap to vulnerable women and girls in Daikundi, Parwan, Paktia and Herat Provinces.

UNICEF provided life skills training and peer-to-peer mentoring sessions for 1,416 adolescents and youth. In Lagman Province, 20 GBV survivors (11 women and 9 girls) received a one-month livelihood training and were equipped with materials relevant to maintaining this livelihood. UNICEF supported training for 166 frontline workers on gender integration, GBV, case management, PSEA and youth/adolescent friendly services. These frontline workers included health workers, teachers, social workers, Child Protection Action Network members and service providers. Eleven new Men and Boys Network meetings were established in Herat, Nuristan and Lagman Provinces with 200 members (65 men and 135 boys). GBV issues were discussed at meetings joined by community members, community elders, local authorities and services providers. They were also trained on child rights, women's rights, and violence against women and children. Furthermore, 335 religious leaders received a training of trainers on maternal and child health, child marriage and parenting in Herat and Lagman Provinces. These leaders will disseminate messages during Friday sermons. UNICEF also supported 14 radio programmes on women's rights, reaching over 16,000 community members in Herat and Kandahar.

### **Social Protection and Humanitarian Cash Transfers (HCT)**

In July, UNICEF began the final round of cash transfers in Logar Province, supporting households with pregnant and lactating women, households with children with disabilities, and female-headed households, to help meet their basic needs. The final round in Logar will reach 19,221 households. In July, 2,427 households received their cash transfer.

In Badghis Province, UNICEF is providing multi-purpose cash assistance to over 30,000 households. In July, 21,543 households were reached in Abkamari, Balamurghab, Qala-e-naw, and Qadis Districts. In addition, UNICEF began registration of households in earthquake affected Spera District in Khost Province. However, cash distribution will only begin when gaps have been determined in collaboration with other humanitarian actors.

In July, UNICEF strengthened staff capacity on humanitarian cash transfers (HCT) through a five-day training for programme and operations staff in Kabul. UNICEF continues to scale up its HCT response, with preparations underway for the winter response, which involves multi-purpose cash assistance for families to meet their basic survival needs, including a winter top-up at the beginning of the season. Preparations for a formative evaluation, which will inform the scale up of cash assistance in Afghanistan, also commenced in July. The formative evaluation will assess both HCT and regular cash transfer programmes.

### **Humanitarian Leadership, Coordination and Strategy**

The Clusters continued to support the earthquake response in July as part of the Interagency Earthquake Emergency Appeal. In July, the results of the joint needs assessments enabled a more focused and prioritized response and indicated the need to shift beyond the initial immediate emergency response to more sustainable interventions such as EQ sensitive shelter repairs and addressing critical services gaps.

In July, a formal approval to proceed with implementation of national nutrition SMART surveys was received from the Ministry of Public Health. In seven provinces, field data collection was completed, with surveys in the remaining four provinces to be carried out in August.

The Whole of Afghanistan Assessment (WOAA) is ongoing. Under the WOAA exercise the sample groups for gathering data on severity and need are now urban, rural and refugee populations. This was endorsed by the Humanitarian Country Team, as it is a shift from last year's assessment modality. The WOAA findings are expected to be shared with the Humanitarian Country Team in September 2022 and will be an integral part of the 2023 Humanitarian Planning Cycle,

including the Humanitarian Response Plan (HRP) and the Humanitarian Needs Overview (HNO), as well as Integrated Food Security Phase Classification (IPC) data.

Planning for winter prioritization was ongoing in July at the inter-cluster level and will be concluded in the first half of August 2022, with a view to ensure early mobilization of resources to respond in high priority districts. 2022 winter prioritization follows spring and summer prioritization exercises by the Inter-Cluster Country Team. A multi-sector vulnerability approach was applied to the 2022 winter plan, which considers areas where temperature falls and snow cover persists, where winter season risks are high, where sector-specific vulnerabilities are acute, and where people are underserved.

In July, a Letter of Understanding on WASH Cluster Co-Coordination was signed by the UNICEF Representative and the Country Director for the Danish Committee for Aid to Afghan Refugees (DACAAR). This formalized the relationship between UNICEF and DACAAR and clarify roles in the WASH cluster between the WASH Cluster Lead Agency (UNICEF), the Co-Coordination Organization (DACAAR), and core pipeline stakeholders (DACAAR, UNICEF, and IOM).

## External Media, Statements & Human-Interest Stories

### EXTERNAL MEDIA

- [“Cholera Outbreak Increases After Recent Earthquake in Khost Province, UNICEF”](#)
- [Reuters \(incl. interview with UNICEF Chief Nutrition\): “Children of Afghanistan bear brunt of economic woes”](#)

### STATEMENTS AND PRESS RELEASES

- [Statement from the UNICEF Afghanistan Representative: We see you; we hear you; we’re staying here with you](#)
- [Press release: Government of Germany, through KfW, contributes €20 million to ensure better nutrition of children and women in Afghanistan](#)
- [Press release: European Union provides additional €25 million for polio vaccines and €15 million for child protection in Afghanistan](#)

### HUMAN-INTEREST STORIES

- [UNICEF Changemaker Hadisa: “My dreams are shattered”](#)
- [UNICEF Changemaker Fatima: “My future is uncertain and worrying”](#)
- [Blog by 24-year-old illustrator, Mozhdah: “Our situation is like sad music”](#)
- [“Saving Lives, Securing Futures: Together for Children in Afghanistan” – Comprehensive multimedia content package, including human-interest stories, videos, b-roll, and user-generated content](#)

### SOCIAL MEDIA

- [UNICEF establishes 140 new community-based education classes in earthquake affected areas](#)
- [1,500 gain access to safe water in earthquake affected Khost Province](#)
- [Thread: UNICEF Representative offers condolences to families who lost children in floods in Southern Region](#)
- [Thread: UNICEF Representative saddened at loss of 2 children in detonation of unexploded ordnance](#)
- [UNICEF #PostcardsFromAfghanistan campaign collects digital art from young Afghan illustrators](#)

## Next SitRep: 15 September 2022

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

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## Summary of Programme Results\*

Sector	Total needs	UNICEF and IPs Response			Cluster/Sector Response		
		2022* target	Total results (Jan-Jul)	Change (Jul) ▲ ▼	2022 target	Total results (Jan-Jul)	Change (Jul) ▲ ▼
<b>Health</b>							
Number of children aged 6 to 59 months vaccinated against measles	9,790,030	10,465,896	2,081,667	11,974			
Number of people accessing primary healthcare through UNICEF supported facilities	11,290,030	15,338,868	17,382,367	17,382,367			
<b>Nutrition</b>							
Number of children 6-59 months with SAM admitted for treatment.	1,078,804	1,078,804	307,251	49,591	539,402	314,498	49,591
Number of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	2,670,547	2,136,438	1,721,461	229,153	2,136,438	1,721,461	229,153
Number of children aged 6-59 months who received vitamin A supplements in semester one	6,759,823	5,407,859	8,425,663	8,358,453 <sup>6</sup>	5,407,859	8,425,663	8,358,453
Number of children aged 6-59 months who received MNP <sup>7</sup>	2,959,419	2,959,419	85,715	0	1,602,628	85,715	0
<b>Child Protection, GBViE and PSEA</b>							
Number of children and caregivers accessing mental health and psychosocial support	4,460,000	4,237,000	877,936	133,753	1,370,000	941,424	133,753
Number of unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services	45,000	42,750	10,085	1,273	14,000	10,264	1,273
Number of girls and boys who have suffered from grave child rights violations (including former CAAFAG & children in detention) benefitted from social and economic reintegration and life skill assistance.	43,800	41,610	2,191	529	13,500	2,318	529
Number of women, girls and boys accessing GBV risk mitigation, prevention, or response interventions		63,590	312,745	20,744		-	-
Number of children and adults accessing explosive weapons-related risk education		1,000,000	594,318	108,000		-	-
Number of people (disaggregated by age and sex) reached through UNICEF supported awareness activities and community mobilization interventions on PSEA		1,000,000	305,030	14,929			
Number of individuals (M/F) & Implementing partners trained on SEA prevention, risk mitigation and SEA Reporting mechanisms		700	5,169	1,061			
<b>Education</b>							
Number of school-aged girls and boys affected by shocks receive direct support for their education	7,921,797	7,525,707	4,416,893	935,341	1,500,000	452,627	27,596
Number of female and male teachers receiving incentives (salaries) as a stop gap measure in CBEs and public schools (6 months)	203,870	203,870	202,331 <sup>8</sup>	11,299	37,500	14,383	790
Number of teachers male/ female trained (in-service/pre-service)	37,500	101,935	11,242	572	15,326	5,705	69

<sup>6</sup> Vitamin A distribution through polio vaccination campaigns

<sup>7</sup> MNP distribution only began recently. Results will be reported in the next Situation Report.

<sup>8</sup> Number of public-school teachers who were supported by UNICEF emergency cash payments so far and the number of CBE teachers' payments made in July.

WASH							
Number of people (M/F) accessing a sufficient quantity of safe water for drinking, cooking, and personal hygiene	15,302,274	11,537,160	3,544,187	496,301	10,429,585	4,683,116	877,615
Number of people gain access to gender and disability-sensitive sanitation facilities	8,503,812	7,478,621	407,254	41,309	898,513	384,609	10,324
Number of people (M/F) reached with handwashing behaviour change programmes	15,302,274	11,537,160	3,074,228	362,213	10,429,585	4,587,290	189,359
Number of people (disaggregated by sex & age) reached with critical WASH supplies	9,695,738	9,210,951	3,893,802	456,654	3,942,068	3,935,467	428,847
HCT/Social Policy							
Number of households reached with UNICEF-funded humanitarian cash transfers		160,000	99,957 <sup>9</sup>	0			
SBC/AAP							
Number of people (disaggregated by age & sex) who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms		20,000	49,831	9,651			
Number of people reached with key behaviour change messages and lifesaving information on humanitarian situations and outbreaks (disaggregated by age, sex)		7,000,000	9,226,100	0			
Gender, Youth, and Adolescent Development							
Number of women and girls accessing safe spaces		9,400	113,651	11,229			
Number of people who participate in group education/dialogue sessions on consequences of and alternatives to child marriage, the rights of adolescent girls, and gender equality		1,000,000	193,798	41,523			
Number of adolescents (girls and boys) who actively participated in life skills or comprehensive sexuality education interventions to address child marriage		120,000	29,695	1,416			

## Annex B

### Funding Status

Appeal Sector	2022 HAC Requirements (US\$)	Funds available		2022 Funding Gap	
		Humanitarian resources received in 2022	Resources available from 2021 (carry-over)	\$	%
Nutrition	204,095,521	42,717,077	16,415,409	144,963,035	71.03%
Health	334,457,872	259,025,908	102,985,464	0	0.00%
WASH	768,889,756	45,304,087	20,324,488	703,261,181	91.46%
Child protection, GBViE and PSEA	71,920,805	16,323,249	8,921,048	46,676,508	64.90%
Education	440,853,967	204,850,544	27,879,531	208,123,892	47.21%
Social Protection/HCT	208,504,821	12,486,617	21,796,912	174,221,292	83.56%
Adolescents/Youth/Gender	3,853,594	2,387,021	991,150	475,423	12.34%
Cross-sectoral (SBC, RCCE and AAP)	6,648,374	13,210,180	5,496,697	0	0.00%
Program Management Unit	8,500,000	10,449,251	1,596,478	0	0.00%
<b>Total</b>	<b>2,047,724,710</b>	<b>606,753,934</b>	<b>206,407,177</b>	<b>1,277,721,331</b>	<b>62.40%</b>

<sup>9</sup> Only includes unique households, counting households reached with multiple rounds of cash transfers in 2022 only once.