

Afghanistan

Update on the context and situation of children

Afghanistan has an estimated population of 40 million people (World Bank, 2021) with an annual population growth rate of 2.1 per cent. This is attributed to the high fertility rate of 5.3 children per woman. This growth rate leaves Afghanistan with the youngest age structure in South-Asia Region, with 48 per cent of the population below age 15. This demographic dividend provides a unique opportunity to invest in young people during this critical period to accelerate socio-economic development.

In 2022, the deteriorating economic situation following the transition of power, freezing of assets and development funding, flaring conflicts and multiple emergencies - drought, earthquakes, food insecurity, water scarcity, disease outbreaks, and recurring floods - continued to cause a complex humanitarian crisis which has left an estimated 24.4 million people in need of humanitarian assistance, including approximately 13.1 million children.

The operating environment remained highly complex with bureaucratic impediments, threats, detention, intimidation of humanitarian workers, and restrictions on female humanitarian workers increased significantly, hindering the delivery, and monitoring of critical life-saving services. In this volatile environment, UNICEF managed to scale up its critical lifesaving interventions and supported provision of basic services, benefitting from increased geographical access and continued engagement with the de facto authorities. UNICEF Afghanistan managed to secure 1.01 billion USD (49.14 per cent unfunded) against its Humanitarian Action for Children (HAC) Appeal 2022 of US\$ 2.05 billion.

In 2022, the de-facto authorities (DfA) issued a ban on movement in public without a mahram and a decree barring girls from attending tertiary education and women from employment, both in national and international Non-Governmental Organizations (NGOs). These restrictive measures worsened the situation of women and girls and limits their access to services, public life, and mobility. As a result, there has been a 25 per cent increase in protection needs and reported cases in child marriage, child labour, violence, and abuse, including, domestic and gender-based violence.

The economic outlook is projected to move to a low growth path (2.0 to 2.4 per cent) for the next two years, with no improvement in per-capita income. Close to 11.8 million people (including 6.1 million children), are projected to be multidimensionally poor because of combined shocks to food security, school attendance, dependency, unemployment, underemployment, unemployed youth, and those who do not attend school or a training programme. Real GDP is projected to have a cumulated contraction of close to 30-35 per cent between 2021 and 2022 (IsDBI-OPHI Briefs, 2022).

While conflict dramatically declined after August 2021, armed clashes remained active and intensified in some areas of the country particularly in Baghlan and Panjsher provinces. The UN country task force on monitoring and reporting mechanism (MRM) on grave violations against children in situations of armed conflict reported the killing and maiming of 909 children (including 177 girls). The leading cause of child casualties were Explosive Ordnance (718 children), including IEDs, VBIED and RCIEDs UXO and, ERW. Islamic State of Iraq and al-Sham - Khorasan Province (ISIL-KP) continued to carry out suicide attacks, non-suicide IED attacks, and complex attacks against the de facto authorities which dramatically affected children.

According to the 2022 Whole of Afghanistan Assessment (WoAA), 59 per cent of households assessed confirmed at least one family member experiencing protection risks. Concerns regarding the lack of additional safeguards of children is heightened due to the treatment of children in criminal

proceedings, their vulnerability in places of detention and the possibility of death penalty for certain crimes.

In June 2022, a 5.9 magnitude earthquake struck south-eastern Afghanistan, leading to wide-scale destruction across already vulnerable districts in Paktika and Khost provinces. In addition to loss of life (over 1,000) and devastating injury (more than 3,600), the earthquake resulted in destruction of homes leaving thousands vulnerable to further harm. Approximately 362,000 people were living in high intensity impact areas (MMI 5+), while needs assessments conducted indicate that more than 100,000 people were directly affected.

UNICEF and its cluster partners conducted provincial representative SMART surveys in 34 provinces which revealed serious to critical levels of child wasting across the country, stunting at 32.7 per cent (10 per cent severe) and 23.4 per cent of children 0-59 months are underweight. The driving factors are multiple and cross-cutting ranging from rising poverty, food insecurity and poor access to basic health services. In 2022, Afghanistan registered 2 cases of wild polio virus in children and a devastating outbreak of measles in all the provinces with a total of 76,519 cases and 388 deaths recorded.

Multiple data sources report an unfolding water scarcity crisis in Afghanistan due to 2021 drought and a continuing La Nina resulting in higher-than-normal temperatures and lower than average precipitation. According to a recent REACH survey, 80 per cent of the rural population have insufficient access to water for domestic use, and 23 per cent reported Water Sanitation and Hygiene (WASH) as one of their top three priorities (WoAA 2022). The impact of multifaceted WASH issues is illustrated by the outbreak of Acute Watery Diarrhea (AWD) which spread to 149 districts in all 34 provinces since September 2021 resulting in over 240,000 AWD cases, with 87 deaths (Case Fatality Rate of 0.04 per cent). A water quality monitoring study conducted by Danish Committee for Aid to Afghan Refugees (DACAAR) in 2022, found 62 per cent of 3,723 water sources tested in 6 AWD affected provinces are contaminated (positive for E-coli).

While an estimated 4 million children (60 per cent girls) were already out of school, this number grew in 2022 due to multiple factors such as increased poverty levels. The current ban on girls' access to secondary education directly affects around one million girls. The recent decree which bans girls from attending tertiary education leaves girls and women vulnerable. Their future is bleak, and progress made on equitable access to education, and participation in public life is thrown back many years, directly impacting opportunities for an Afghanistan that prospers.

Major contributions and drivers of results

Health: During the reporting year, UNICEF played a strategic and central role in ensuring the continuation of health service delivery by supporting over 65 per cent of health facilities in the country with primary and secondary healthcare, including timely payment of salaries to over 26,000 health workers in these facilities. Specifically, UNICEF ensured availability of supplies and running costs in 2,300 health facilities and hospitals providing the Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS). Further, UNICEF ensured availability of supplies in over 100 district, provincial and regional hospitals, with funding from Afghanistan Reconstruction Trust Fund (ARTF) and Global Financing Facility (GFF) through World Bank (WB) support. This resulted in over 18.09 million people (including 1.7 million children) accessing primary healthcare against a target of 15 million in 2022 (118 per cent).

In Reproductive, Maternal, Newborn, Adolescent and Child Health (RMNCAH), high-impact interventions were supported in 600 health facilities. To facilitate access to care, out-of-pocket

expenses were reduced for 24,000 pregnant women in Daikundi province through a Humanitarian Cash Transfer (HCT) project as strategy for better health outcomes and well-being. Maternal and Child Health Handbooks (MCH-HB) were distributed to 2,000,000 pregnant women and mothers of children under two years of age in 34 provinces. In addition, around 250,000 newborns and children received health care services at Indra Gandhi Institute of Child Hospital (IGICH).

In coordination with national and the provincial health authorities, UNICEF, along with partners, scaled up Mobile Health and Nutrition Teams (MHNTs) from 60 to 171 aimed at enhancing access to medical services to underserved populations in hard-to-reach villages. These teams, comprised of doctors, nurses, midwives, vaccinators, and nutrition counsellors visited villages in remote areas to provide a package of health and nutrition services, with a particular focus on mothers and children.

Emergency: To fulfil its core commitments to children, UNICEF prepared for, and responded to multiple emergencies including natural disasters (earthquake and floods), and disease outbreaks (measles and acute watery diarrhea). Following the earthquake in Paktika and Khost provinces in July 2022, UNICEF provided emergency medical care and life saving nutrition services through 12 health centers and mobile health and nutrition teams (MHNTs) repurposed to serve the area. As a result, 10,000 people with injuries and trauma in the health centers and 1,300 cases of injuries and trauma in far-flung remote villages were reached with medical attention and over 2,500 individuals with group counseling on mental health and psychosocial support. In response to the measles outbreak in the country, a total of 2,898,696 children aged 6-59 months received measles vaccinations in the affected areas and an additional 138,696 children were reached with measles vaccines in earthquake areas.

Despite contextual challenges, UNICEF has successfully supported EPI programmes, particularly in low-performing districts. This has resulted in a high coverage of routine immunization, with 1,466,256 children (94 per cent of the target) receiving routine immunization. In 2022, a total of 1,441,742 children under one year received the first dose of measles vaccines, and 1,088,568 children 12-23 months received the second dose of measles vaccines. In addition, 5,360,753 children aged 9-59 months received measles vaccinations in a nationwide measles campaign. Overall, 8.2 million children 6-59 months received measles vaccines during outbreak response and preventive campaigns. Immunization support included technical assistance and capacity building, vaccines and logistics supplies, and communication for social and behavioral change. To strengthen the cold chain, 311 (287 solar and 24 electric) cold chain equipment were procured and installed in EPI centers, completing the solarization of cold chain to 77.5 per cent of the total of 2,400 EPI centers.

The number of Afghans vaccinated against COVID-19 increased from approximately 4.3 million at the beginning of 2022 to a cumulative number of 11.3 million adults by end of November 2022, representing 58.2 per cent of the total targeted population in the country; of which about 10.83 million are fully vaccinated (54.75 per cent of the target population).

The Afghanistan polio eradication effort achieved outstanding strides, with the number of wild polio cases significantly declining from 56 in 2020 to 4 in 2021 and 2 in 2022. During the reporting period, UNICEF delivered over 65 million doses of polio vaccine to cover 6 nationwide and 3 subnational polio campaigns, vaccinating on average 9.3 million (93 per cent) of the targeted 10 million children under five years per campaign across the country. After the political transition in August 2021, the prohibition of House-to-House (H2H) campaign in favor of Mosque-to-Mosque (M2M) or site-to-site (S2S) vaccinations led to many children missing vaccinations because vaccination teams could not access children at doorsteps. Implementation of this suboptimal campaign modality has persisted in the southern region resulting into about half (50 per cent) of the children missing vaccinations. Through UNICEF supported social mobilization, communication, and advocacy interventions, 88 per cent of targeted caregivers have positive perception and increased knowledge towards polio vaccination. While progress has been made in coverage and breadth of vaccinations, the polio eradication programme faced challenges of threats and killing of frontline workers, harassment, ban on female

workers, and widespread misinformation about polio. This led to increased vaccination refusal by caregivers from 0.3 per cent in 2021 to 0.4 per cent in 2022.

Nutrition: UNICEF in coordination with partners scaled up lifesaving nutrition treatment services from 1,411 to 3,218 service delivery points including 170 UNICEF supported Mobile Health and Nutrition Teams (MHNTs), over 100 Family Health Houses (FHHs), 1,000 Health Sub Centers (HSCs) and all BPHS and non-BPHS static health facilities across the country. As a result, a total of 601,848 children under-five were provided with Severe Acute Malnutrition (SAM) treatment services. In addition, 2.8 million children in the most deprived and hard-to-reach areas received Growth Monitoring and Promotion (GMP) services while their caregiver's received orientation and counselling on infant and young child feeding through a community promotive approach as part of Community-Based Nutrition Package (CBNP) and BPHS health facilities. Over 8 million girls and boys aged 6-59 months were reached with vitamin A supplementation and approximately 1.17 million children received Multiple Micronutrient Powder (MNP) supplementation to prevent deficiency and consequences of limited healthy growth and development.

Child Protection: Throughout 2022, devastating protection violations have been exacerbated by pockets of conflict, widespread poverty and alarming rollbacks in girls' and women's rights. Despite these challenges, UNICEF continued to scale up its response to provide child protection prevention, mitigation and response services across the country reaching a total of 8,645,781 vulnerable children and care givers (44 per cent girls and women) in 401 districts in 34 provinces against a target of 4.2 million (over 200 per cent). Amongst them, 7,760 are children and care givers with disabilities. This target was overachieved due to several strategic approaches including integration to other sectors, direct implementation, diversifying and working with other UN agencies.

A total of 957,536 children (437,969 girls & 519,567 boys) benefited from structured mental health and psychosocial support (MHPSS) through mobile health teams, door to door, child friendly spaces, peer groups and referrals to specialized mental health services. In response to the sharp increase on attacks in schools, killing and maiming, UNICEF expanded its Explosive Ordnance Risk Education (EORE) programme reaching 2,894,988 children and adults. In addition, a total of 61,151 (23,186 girls and 37,965 boys) children on the move benefited from mental health and psychosocial support, family tracing and reunification services, legal aid, life skills and vocational trainings, referral to health and education services and community-based reintegration packages. Gender Based Violence (GBV) prevention and risk mitigation services were scaled up as part of community and specialized services. As a result, 1,205,749 people including 17,788 (10,773 boys and 7,015 girls) children benefited from mitigation, prevention, and response services against a target of 64,000 (1,900 per cent). This was over achieved due to poor targeting. A more appropriate target will be used in 2023.

UNICEF continued to strengthen the social work sector by deploying and building the capacity of social workers from 500 in 2021 to nearly 5,000 in 2022 thus improving access to child protection services for children at risk of violence, including those living with disability and from ethnic minorities.

WASH: In 2022, UNICEF supported the development of a National Sanitation and Hygiene Strategy which will guide all sector partners both in urban and rural context to make realistic and need based plans towards achieving SDG 6.2 Further, UNICEF in collaboration with WASH sector partners including NGO partners and the De facto Authorities (DfA) continued supporting delivery of WASH services to the most vulnerable at national and sub-national levels in urban and rural areas. This resulted in around 6.2 million people (3.9 million people in rural and 2.3 million people in urban) gaining access to at least basic drinking water.

Since the transition of power in mid-August 2021, UNICEF shifted its focus to scaling up emergency WASH services to meet immediate needs in the country. UNICEF reached 5,500,505 people

(1,265,116 men, 1,265,117 women, 1,540,141 boys and 1,430,131 girls) affected by drought, flood, earthquake, and returnees with WASH services. In addition, 1,203,755 people (276,864 men, 276,864 women, 337,051 boys, and 312,976 girls) in humanitarian situations gained access to safe means of excreta disposal. Along with the delivery of WASH services in humanitarian context, over 728,000 people (168,000 women, 195,000 girls, 172,000 men and 193,000 boys) gained access to safe drinking water services across 28 provinces in 124 locations through durable and sustainable water supply solutions. Approximately 300,000 people out of the 728,000 people gained access to safe water through either solar-powered or gravity-fed water supply systems. After transition of power in August 2021, WASH needs increased in urban areas and the systems were unable to meet water demands without external support. UNICEF scaled up its urban WASH service delivery reaching around 2.3 million people of which 440,000 gained access through durable and sustainable water supply solutions.

UNICEF provided focused capacity building support to technical staff in the ministry in planning, implementation, and monitoring of WASH programs through national technical extenders placed at the Ministry of Rural Rehabilitation and Development (MRRD). Through this alternate modality, efforts have been placed on preventing collapse of existing structures and loss of technical staffing within government ministries that service the sector. UNICEF continued to pay for salaries and operational support costs for more than 215 extenders through third parties to sustain the sector and facilitate implementation of the WASH programme at scale.

A total of 1,428 communities achieved Open Defecation Free (ODF) status enabling half a million people to live in ODF environment and more than 425,572 people gaining access to basic sanitation. In addition, UNICEF supported Global Hand Washing Day (GHWD), World Toilet Day (WTD) and Menstrual Hygiene Management (MHM) day attended by a total of 5,000 people (majority females). Basic WASH services were provided in 274 schools benefiting 180,000 children (104,400 boys and 75,600 girls) and 154 healthcare facilities under regular and emergency programme while 124 schools and 77 healthcare facilities were also reached with hygiene promotion activities.

Education: Withdrawal of on-budget support and development aid by the international community following the transition of power significantly impacted the education sector which over relied on international aid which accounted for close to 70 per cent of the total investment in the education sector. To prevent the total collapse of the education sector, UNICEF with donor support covered two months emergency payments to more than 220,000 public school teachers in primary, secondary and TVET, thus preventing teacher attrition, and providing the de-facto authorities with sufficient time to mobilize domestic resources to take over after March 2022. In addition, UNICEF supported recruitment of 40 National Technical Advisors to start revitalizing some of the key technical functions of the ministry.

In 2022, benefitting from increased geographical access and high demand from communities for education for both girls and boys, supported by increased funding and coordination with the Ministry of Education, UNICEF significantly expanded a community-based education (CBE) programme to 14,981 Community Based Schools (CBS), doubling the number of vulnerable children reached to more than 520,000 (55 per cent girls) in 28 provinces, with corresponding 14,981 teachers and school management shuras being recruited and trained. During the reporting period, UNICEF supported the reopening of 200 public schools in 4 provinces of the southern region. In addition, UNICEF expanded the Girls Access to Education (GATE) programme benefiting around 1,200 female students in 11 provinces to become teachers and spearhead the preparation work to revitalize teacher training and support. Unfortunately, at the end of the year, due to the ban on girls attending universities, most of the classes were closed again. Through improved coordination between the de-facto authorities at both national and regional level, UNICEF managed to reach a total of 5.1 million (2,748,344 boys and 2,341,182 girls) children with teaching and learning materials.

Emergency Cash Transfer: In response to high levels of poverty and vulnerability of people, and

country level commitments to scale up the use of cash in development and humanitarian programmes, UNICEF systematically strengthened its capacity to deliver cash transfers at scale in 2022. With support from headquarters and regional office, UNICEF Afghanistan Country Office developed an officewide cash strategy to mitigate poverty and address financial barriers in accessing essential services. As a result, a total of 116,331 households in 7 priority provinces were reached with multi-sectoral and sectoral cash assistance delivered through national and international partners.

From the post distribution monitoring data, food is the most predominant item households expended the cash on, with 85 per cent of households reporting that they used part of the cash to buy food. About 55 per cent of households used part of the cash for medical expenses. This was followed by winter clothing and shoes for children (42 per cent), hygiene items (24 per cent) and debt repayment (24 per cent). About 21 per cent of beneficiary households reported using part of the money for education expenses.

UN Collaboration and Other Partnerships

In 2022, UNICEF Co-chaired the UN Programme Management Team (PMT) and Outcome 1 (Sustained Essential Services) of the UN Cooperation Framework (UNCF).

UNICEF maintained effective partnerships with the Ministry of Public Health, WHO, UNFPA and other key partners in Afghanistan - both at the national as well as at provincial level. A UN-to-UN transfer agreement was developed between UNICEF and WHO to transfer funds to WHO for technical cooperation and to support activities for Health in Emergency Response (HER) and the Asian Development Bank (ADB) High Impact Interventions for Maternal, Newborn and Child Health. UNICEF also engaged technical partners and academic institutions on inclusive approach to strategy development. For example, UNICEF partnered with the University of Geneva Center of Humanitarian Studies to fill some evidence gaps in the public health sector through implementation research to be conducted in 2023.

UNICEF co-leads the Education Cluster with Save the Children US. UNICEF stepped up as the leading agency in framing the agenda for continued support to education, providing an alternative vehicle to channel external support to the sector against the Afghanistan Education Sector Transitional Framework (AESTF). UNICEF further actively participates in the Development Partners Group, co-chaired by UNESCO and USAID, which coordinates and promotes information sharing between the various UN agencies, donor agencies and NGO/INGOs involved in Education work. UNICEF also leads coordination within the de facto MoE's technical departments. UNICEF coordinated with WFP for food distribution in CBE and incentivizing adolescent girls' participation in education.

In partnership with UNAMA, UNICEF co-chairs the Country Task Force on Monitoring and Reporting of Grave Violations, advocacy, and negotiation with DfA on prevention and addressing human and child rights violations and build their accountability on protection of children. UNICEF works with the Resident Coordinator's Office (RC), Office of the Special Rapporteur on Children in Armed Conflict, International Agencies, and civil society organizations in monitoring of grave violations and implementation of response plans.

UNICEF signed an MOU with WFP to ensure integrated humanitarian response to support children out of school, children at risk or victims of violence and exploitation. More than 10,000 children living and working in the street and their care givers were provided with food for 6 months and their care givers enrolled in income generating activities.

UNICEF is actively involved in interagency access and plays a lead role in the Access Working Group and UN Joint Engagement Group, as well as at the senior level through the UN Humanitarian Country Team.

Through strong engagements and collaboration with other agencies such as WFP and WHO, UNICEF has been co-leading the streamlining of Integrated Management of Acute Malnutrition (IMAM) training package and the identification of underserved areas (white areas) with minimal to no access to the formal health system.

UNICEF continued to strengthen its partnerships with donors to deliver large scale humanitarian cash transfers in 2022. UNICEF ACO remained an active member of the UN Cash and voucher working group, the UN Social Protection technical working Group (Co-chair) and the UN Economic recovery taskforce.

Lessons Learned and Innovations

Nutrition Programme's experience in 2022 has shown that if nutrition services, mostly community-

based interventions, contributing to nutrition preventive programs including Community Based Nutrition Programme (CBNP), Micronutrition Powder (MNP) supplementation, community-based Weekly Iron and Folic acid Supplements (C-WIFS) are planned, implemented, and delivered as a package, then they can have a maximum impact in reducing malnutrition. In 2022, the implementation of these interventions as a package, enabled the office to optimize delivery through implementing partners and the programmes were well received by the Provincial Nutrition Department (PND) which facilitated signing of some of the MoUs. Nutrition section in 2023, nutrition will use these lessons learnt to scale-up lifesaving nutrition treatment services and expand preventive actions.

Empowerment of local structures (Community Development Councils - CDCs) remained a core working modality for WASH services delivery including in humanitarian context. Implementation through CDCs is a cost effective and quick implementation modality which was proven during the earthquake response in Paktika province this year. In addition, Community-Led Total Sanitation (CLTS) approach proved to be a successful tool in eradicating open defecation and provision of improved sanitation facilities without any subsidy which is also an appropriate tool for value for money. Implementation through the extenders is the cheapest modality and key to scaling up sanitation in rural areas with less funding requirement in comparison to NGO modality because it ensures sustainability of ODF status. The extenders will spend at least 3 months in the district after the district attain ODF certificate. WASH programme will support capacity building activities for local structures including staff and partners to sustain the gains made.

The collapse of the banking system posed a major constraint to the delivery of humanitarian cash transfers. UNICEF adapted to this challenge by establishing the Programme Management Unit (PMU) which was charged with managing large scale and sensitive payments, including payment of cash transfers within this difficult context. PMU in collaboration with non-traditional financial providers within the country ensured stable delivery of sensitive payments. In working to overcome existing UNICEF Information Technology (IT) solution limitations of Humanitarian cash Operations and Programme Ecosystem (HOPE) for beneficiary data management, UNICEF developed a new Global Solution for cash Distribution (GSD) to handle large scale humanitarian cash transfers and grievance redressal data. The system offers a strong grievance and feedback module that allows UNICEF to receive and process grievances in a timely manner. This solution will now be adopted globally by the HOPE team and made available to other country offices.

UNICEF adopted innovative ways to intensify and increase polio awareness across the country, especially the use of roundtable discussions with key influencers to engage communities and address key concerns, including the establishment of a social media cell(s) to improve online engagement and accelerate polio awareness. These efforts have contributed to an average reach of 29 million users every month, transforming community engagement dynamics in educating, informing and persuading caregivers to vaccinate their children against polio. As a result, an average of 9.3 million children were vaccinated during national campaigns reaching 93 per cent coverage. These innovative approaches will be intensified in 2023 to enhance strategic engagement and advocacy on child development issues especially in undeserved districts.

While physical access has largely improved across the country, the operational environment remains complex and challenging. Recent responses to rapid-onset emergencies at the interagency level have largely been incoherent in terms of needs assessments, information sharing and the rapidity of response at scale. This was evidenced in the earthquake response. Building on lessons learned from the earthquake, UNICEF is setting up a Rapid Response Mechanism (RRM), to eliminate multiple needs assessments, duplication of efforts and ensure a cohesive narrative. This would enable the humanitarian community to rapidly respond to shocks in a coordinated, cost-effective, dignified manner. The RRM will provide quick impact, first response, covering the basic survival needs of populations affected by rapid-onset emergencies for a period of two months. To complement, UNICEF is developing rapid deployment kits, which would allow teams to rapidly deploy to deep-field locations

where there are no existing facilities. These will be prepositioned in field offices to strengthen rapid response when required.

Building on the successes and lesson learnt, UNICEF ACO will work towards sustaining the gains made and to accelerate progress towards achieving results planned for 2023