



Afghanistan

Conflict continues to drive humanitarian needs across Afghanistan. In 2017, some 295,000 people were internally displaced inside the country, and more than 482,000 people returned to Afghanistan from Iran (336,000) and Pakistan (146,000), many of whom require humanitarian assistance.¹ Civilian casualties—two thirds of which are women and children—have reached the highest levels recorded during the conflict so far.² The conflict has led to the closure or destruction of schools,³ limiting the capacity of remaining schools to accommodate displaced girls and boys. An estimated 13.5 million Afghans do not have access to improved water sources,⁴ and 35 per cent of children aged 6 to 11 months are suffering from diarrhoea.⁵ Between 2014 and 2016, the number of health care facilities that were attacked increased by 110 per cent (from 25 to 53), and the number of health care facilities closed by parties to the conflict increased by 163 per cent (from 72 to 189).⁶ The humanitarian situation is not expected to improve in the coming years, making a multi-year humanitarian response plan and humanitarian appeal even more relevant.

Humanitarian strategy

In Afghanistan, UNICEF leads the nutrition and water, sanitation and hygiene (WASH) clusters, coordinates the child protection area of responsibility, and co-leads the Education in Emergencies Working Group, and in these capacities, works to strengthen leadership, improve coordination and facilitate robust contingency planning. In 2018, UNICEF will provide treatment to 50 per cent of children suffering from severe acute malnutrition (SAM) in 24 provinces where the SAM rate exceeds 3 per cent.⁷ In collaboration with the health cluster, UNICEF will work through mobile health teams to reach affected women and children with measles vaccination for children under 5, health awareness-raising activities and critical supplies. Capacity building on maternal health and newborn care will support government counterparts, non-governmental organizations (NGOs) and partners to implement the basic package of health services. In WASH, UNICEF will promote the use of small-scale solar pumping networks and gravity-fed water systems to cater to the long-term needs of internally displaced persons, returnees and host communities. In line with its Grand Bargain commitments, UNICEF will work with the NGO Ground Truth to assess its support to national and local NGOs. UNICEF will also take action to enhance the number and quality of its partnerships with local actors.

Results from 2017

As of 31 October 2017, UNICEF had US\$17.6 million available against the US\$31 million appeal (57 per cent funded).⁸ All sectors were relatively well funded except for education, which only received 15 per cent of requested funding. This led to low achievement against education targets. Education results, as well as nutrition and WASH results, were also lower than planned because fewer people returned to Afghanistan in 2017 than expected. UNICEF-supported health interventions reached 117,500 children with measles vaccination (90 per cent of the target), focusing both on the protracted internal displacements and the provision of the same service to returnee children. In addition, 96 per cent of targeted pregnant women were reached with essential health kits. Although UNICEF reached 145,819 affected people with access to safe drinking water (73 per cent of the target), sanitation results were low given that a large proportion of internally displaced persons used host families' facilities rather than emergency latrines. Child protection results surpassed the target due to the significant needs of returnee and internally displaced children. Some 200,000 children and family members received blankets, winter clothes, family kits and plastic sheets to protect them from the cold.

Humanitarian Action for Children

unicef 

Total people in need:

3.3 million

Total children (<18) in need:

1.9 million

Total people to be reached:

1.14 million

Total children to be reached:

709,000

2018 programme targets:

Nutrition

- 209,000 children under 5 with SAM admitted for treatment
- 15,000 returnee children aged 6 to 59 months receiving vitamin A supplementation

Health

- 80,000 affected pregnant women and children have benefitted from essential health services and health education
- 130,000 children immunized against measles

WASH

- 100,000 people accessing basic sanitation facilities
- 200,000 people accessing safe drinking water

Child protection

- 75,000 children accessing psychosocial support through child-friendly spaces
- 10,000 children protected and supported through case management and family reunification
- 200,000 conflict- and disaster-affected people having received winter assistance

Education

- 120,000 children and adolescents provided with access to quality education

	Sector 2017 targets	Sector total results	UNICEF 2017 target	UNICEF total results
NUTRITION				
Children under 5 with SAM admitted for treatment	236,000	182,654	236,000	182,654
Children aged 6 to 59 months who received vitamin A supplementation	30,000	13,148	30,000	13,148
Children aged 24 to 59 months who received deworming tablets	20,000	9,803	20,000	9,803
HEALTH				
Children aged 9 months to 10 years who received measles vaccination			130,000	117,500
Pregnant/lactating women and children who benefitted from essential health services and health education			80,000	78,000
WATER, SANITATION AND HYGIENE				
People accessing safe drinking water for drinking, cooking and personal hygiene	750,000	316,646	200,000	145,819
People accessing sanitation facilities	450,000	192,340	100,000	62,130
CHILD PROTECTION				
Children accessing psychosocial support through child-friendly spaces	81,739	88,195	40,000	52,239
Children protected and supported through case management	40,235	4,692	3,000	3,781
Affected children and their families who receive warm winter clothes and other non-food item support			100,000	64,810
EDUCATION				
Children and adolescents accessing quality education	351,000	131,758	100,000	39,102

Results are through 31 October 2017 unless otherwise noted.

Funding requirements

In line with the country's multi-year, inter-agency 2018-2021 Humanitarian Response Plan, UNICEF is requesting US\$131,000,000 for the period 2018-2021. Of this amount, US\$32,800,000 is required for 2018. Without flexible and timely funding, UNICEF Afghanistan will be unable to support the country-wide response to the ongoing nutrition crisis and provide critical WASH services to internally displaced persons and returnees facing the spread of disease. In Afghanistan, the record levels of displacement and civilian casualties, especially among children, necessitate a boost in education and child protection interventions, including to protect children against the cold weather in 2018.

Sector	2018 requirements (US\$)	2018-2021 requirements (US\$)
Nutrition	15,000,000	60,000,000
Health	1,300,000	5,000,000
Water, sanitation and hygiene	5,000,000	20,000,000
Child protection	5,000,000	20,000,000
Education	5,000,000	20,000,000
Cluster/sector coordination	1,500,000	6,000,000
Total	32,800,000	131,000,000

¹ Office for the Coordination of Humanitarian Affairs, 'Afghanistan Humanitarian Response Plan 2018', OCHA, 2017.

² Ibid.

³ Revised Inter-agency Humanitarian Response Plan, 2017.

⁴ World Health Organization and United Nations Children's Fund, *Joint Programme Monitoring Report*, 2015.

⁵ According to the Afghanistan Demographic and Health Survey 2015, 35 per cent of children aged 6 to 11 months had diarrhoea two weeks prior to the survey.

⁶ Office for the Coordination of Humanitarian Affairs, 'Afghanistan Humanitarian Response Plan 2018', OCHA, 2017.

⁷ The 24 provinces were: Badghis, Dykundi, Ghazni, Ghor, Helmand, Jawzjan, Kandahar, Kapisa, Khost, Kunar, Laghman, Nangarhar, Nimroz, Nooristan, Paktika, Paktya, Panjsher, Parwan, Samangan, Takhar, Urozgan and Zabul Wardak.

⁸ Available funds include US\$10.8 million raised against the current appeal and US\$6.8 million carried forward from the previous year.

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