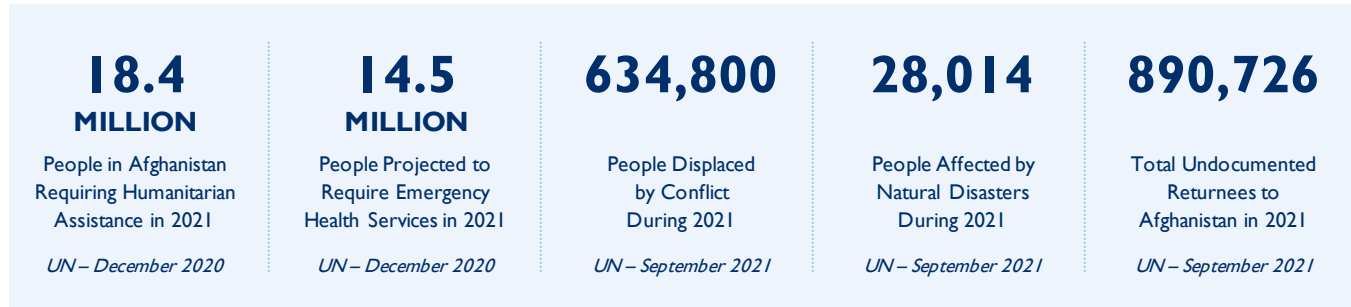


Afghanistan – Complex Emergency

SEPTEMBER 24, 2021

SITUATION AT A GLANCE



- The UN released \$45 million from the CERF for immediate support to health facilities through the end of 2021.
- A WFP survey of 1,600 households across Afghanistan indicated that 95 percent of surveyed households do not have enough to eat each day.
- Approximately three-quarters of humanitarian organizations in Afghanistan experienced challenges in delivering assistance after mid-August, resulting in a reduction in the number of people accessing services.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING For the Afghanistan Response in FY 2021	USAID/BHA ¹	\$197,327,430
	State/PRM ²	\$132,665,720
	Total	\$329,993,150

For complete funding breakdown with partners, see detailed chart on page 6

¹USAID's Bureau for Humanitarian Assistance (USAID/BHA)
²U.S. Department of State Bureau of Population, Refugees, and Migration (State/PRM)

KEY DEVELOPMENTS

UN Provides Emergency Funding to Afghanistan Health Sector

The functioning of Afghanistan's health system continues to be affected by several challenges, including a lack of equipment and medicines, insufficient availability of trained personnel, serious delays in health worker salary payments, and disruptions to routine immunization campaigns and coronavirus disease (COVID-19) response activities, including vaccinations, according to the UN World Health Organization (WHO). As of mid-September, only 17 percent of health facilities previously supported under the Sehatmandi program—which supported 2,300 health facilities in Afghanistan prior to the suspension of international development funding in late August—were operational. Additionally, nine of the country's 37 coronavirus disease (COVID-19) treatment hospitals were closed, and health actors reported a significant decline in COVID-19 surveillance, testing, and vaccination activities since August.

Furthermore, women are hesitant to seek care following decreases in the number of functional health facilities and female health staff reporting to work.

On September 22, UN Under-Secretary General and Emergency Relief Coordinator Martin Griffiths announced the release of \$45 million from the Central Emergency Response Fund (CERF)—a pooled humanitarian fund established and managed by the UN to support sudden-onset and underfunded emergencies—for immediate assistance to Afghanistan's health sector. The CERF funding will be provided to WHO and the UN Children's Fund (UNICEF) to support key health care facilities, including hospitals treating COVID-19 patients and health facilities affected by the Sehatmandi program pause, in coordination with national and international non-governmental organizations (NGOs). The additional funding is expected to restore health care access for many people across the country through the end of 2021. Humanitarian actors, including NGOs, the International Committee of the Red Cross, UNICEF, and WHO, have continued to provide critical health care services in recent weeks, including support to hospitals to deliver trauma care for patients following escalated conflict in early August and support to health facilities for the delivery of essential health care services. During the first half of September, WHO also imported more than 120 metric tons of health and medical commodities into Afghanistan by air, sufficient to address the urgent health needs of more than 2 million people and support more than 15,000 surgeries. Health actors continue to advocate for additional funding to scale up COVID-19 response and other emergency health activities, as well as for long-term, sustainable support to Afghanistan's public health system.

Household Food Insecurity Increases Amid Elevated Food Prices, Reduction in Livelihood Opportunities

According to a UN World Food Program (WFP) telephone survey of more than 1,600 households conducted between August 21 and September 16, only 5 percent of surveyed households in Afghanistan have sufficient food to eat each day. Approximately half of the surveyed households reported running out of food completely at least once during the previous two weeks. Additionally, only 10 percent of households headed by an individual with a secondary or university education reported the ability to purchase sufficient food for their families each day. The figure indicates worsening food insecurity levels among middle-class and urban populations, which previously did not experience food insecurity at the rates observed among rural populations heavily affected by recurrent drought. WFP cites shrinking livelihood opportunities and significant increases in the prices of staple foods among the factors contributing to increased food insecurity among Afghan households in recent weeks.

The average cost of staple items has increased since late July, according to market monitoring data collected by humanitarian actors from August 11 to 28 in 20 of Afghanistan's 34 provinces. The survey

indicates that the average cost of a minimum expenditure basket—the minimum set of items and services a seven-person household in Afghanistan requires to meet essential needs—increased by 2 percent and the average cost of a minimum food basket—the minimum set of food items a household requires to meet basic needs—increased by 7 percent between late July and late August. Survey respondents also highlighted difficulties for merchants to obtain or restock commodities, as well as barriers to market access for many consumers, including financial barriers, insecurity affecting travel to the market, and fear of contracting COVID-19. Staple food prices remained elevated during the first three weeks of September, according to WFP. Broadly, the market prices of many key goods in Afghanistan also remain significantly higher than prices prior to the onset of the COVID-19 pandemic in March 2020. For example, as of mid-September 2021, the price of wheat was approximately 28 percent higher and the price of cooking oil was approximately 95 percent higher than prices observed in mid-March 2020. The average number of work days available for casual laborers is also nearly 41 percent lower than the March 2020 average, WFP reports.

With support from USAID/BHA and other international donors, WFP has provided food assistance to 6.4 million people across Afghanistan in 2021 to date, including more than 1.4 million people reached since August 15. During August and September, WFP continued a range of activities to bolster food security and improve nutrition among Afghan households. In addition to ongoing food assistance distributions, the UN agency transported 10 trucks of critical nutrition commodities from Pakistan into Afghanistan on September 21. The commodities will support children and pregnant and lactating women in Herat and Kandahar provinces.

Majority of Humanitarian Agencies in Afghanistan Report Adverse Impacts on Delivery of Assistance Since Mid-August

To assess humanitarian operational capacity—including the scope of program suspensions and access constraints—in Afghanistan, the UN Office for the Coordination of Humanitarian Affairs (OCHA) conducted a survey of nearly 150 relief organizations, including UN agencies and NGOs, from September 9 to 16. Overall, 74 percent of humanitarian partners noted that the changing environment affected assistance delivery since August 12; those partners reported pausing 62 percent of their programs. The most commonly cited reasons for temporary suspensions of activities included cash and liquidity issues impeding procurement and payment of salaries; lack of clarity regarding the safe participation of all staff, particularly female staff; and direct bans of female staff participation. Additionally, 66 percent of the partners that reduced activities reported fewer people had accessed their services during the previous three months, most commonly due to direct bans on women's movement, fear of movement, and active conflict. Notably, only 18 percent of the surveyed organizations cited active conflict as the main reason for suspensions, compared to 87 percent among organizations that paused activities during the previous iteration of the survey, conducted from August 6 to 12—reflecting the high level of insecurity and fighting in early August.

In the survey, humanitarian agencies also indicated various factors that would enable resumption of humanitarian activities. Overall, 79 percent reported improved cash liquidity, 60 percent suggested greater commitment by local Taliban leaders to refrain from interfering in humanitarian operations, 58 percent reported clear messaging from local and national-level Taliban leaders, and 48 percent reported additional funding would support resumption of activities. In contrast, in the August survey, 97 percent of partners had cited a reduction of fighting as the main enabling factor for resuming paused activities.

Despite operational constraints, relief agencies, including USG partners, continued to deliver multi-sector assistance to populations across Afghanistan in early September. From September 1 to 15,

humanitarian organizations provided food assistance to more than 340,000 people, cash-based assistance and relief commodities to approximately 12,600 people, and nutrition services to nearly 20,800 children ages 6–59 months, according to OCHA. Humanitarian agencies also provided water trucking services for 177,500 drought-affected people and psychosocial support services for nearly 10,100 people.

KEY FIGURES



3.5 Million

People targeted with USAID/BHA-supported WFP food and nutrition assistance



11

Number of USG implementing partners conducting protection interventions



10

Number of USG implementing partners supporting health programming

U.S. GOVERNMENT RESPONSE

FOOD SECURITY AND NUTRITION

The USG supports the delivery of life-saving emergency food assistance across Afghanistan, providing vulnerable populations with locally, regionally, and internationally procured in-kind food assistance; cash transfers for food; and food vouchers. With USAID/BHA support, WFP has also expanded food assistance to support populations who have experienced reduced access to income-generating activities and staple foods in urban communities as a result of the COVID-19 pandemic. Additionally, USAID/BHA partner the UN Food and Agriculture Organization (FAO) and NGOs provide households with seeds and livestock feed to bolster agricultural livelihoods recovery and resilience. USAID/BHA also supports coordination and capacity-building activities among food security actors in Afghanistan to strengthen humanitarian response efforts.

PROTECTION

With support from State/PRM, the Office of the UN High Commissioner for Refugees (UNHCR) provides protection assistance to refugees and refugee returnees, internally displaced persons (IDPs), and other vulnerable populations in Afghanistan. Additionally, USG NGO and UN partners support mental health and psychosocial support (MHPSS) programs, including individual counseling, activities to support development of coping skills, and safe healing and learning spaces for children. USG partners also implement child protection activities and family services, provide legal assistance to returning refugees to access documentation, and integrate MHPSS and other protection measures into education, health, and nutrition programming.

HEALTH

The USG is supporting ten partners to implement life-saving health activities across Afghanistan to improve community health awareness, bolster outpatient consultation efforts, and provide support to essential health services. USG partners aim to increase equitable access to and utilization of health services among IDPs, conflict-affected persons, and vulnerable host communities. USG assistance supports hospitals and clinics and enables the deployment of mobile health teams to deliver emergency and primary health care services, conduct trainings for local community health workers and health care professionals, provide essential medicines, and support vaccination campaigns. Additionally, USG funding supports WHO to coordinate emergency health response activities across the country, support the continuation of essential health

services, and ensure continued supply of critical health and medical commodities into the country.

COVID-19 PREVENTION AND RESPONSE

The USG continues to support UN and NGO partners to conduct activities dedicated to preventing, mitigating, and responding to the spread of COVID-19 in Afghanistan. USG partners have conducted COVID-19 awareness campaigns, trained community health workers on infection prevention and control measures, and expanded delivery of water, sanitation, and hygiene (WASH) services. USG partner-supported mobile health teams have also conducted outpatient consultations, provided referrals and transportation to isolation and treatment facilities, and advised personnel on proper COVID-19 protocols. Additionally, UN partners have provided hygiene kits and medical equipment to frontline health workers, deployed mobile health teams, and supported risk communication and community engagement activities. In response to secondary effects of the pandemic—such as increased food insecurity and protection risks—USG partners are delivering food and multipurpose cash assistance (MPCA), increasing provision of protection services, and supporting efforts to increase livelihoods opportunities for returning refugees.



5

Number of USG implementing partners supporting shelter programming

SHELTER AND SETTLEMENTS

Shelter needs among populations in Afghanistan remain significant due to conflict and natural disasters, such as floods and landslides, which frequently result in displacement and damage or destruction of houses. USG partners provide emergency shelter for newly displaced people, as well as shelter repair kits, transitional shelter, and MPCA to support the housing needs of IDP and host community populations. Partners also conduct trainings to improve preparedness for natural hazards.



3

Number of USG implementing partners supporting livelihoods programming

LIVELIHOODS AND EDUCATION

With USG funding, partners deliver livelihoods programming and skills training to support sustainable refugee reintegration and boost opportunities for vulnerable host community populations; activities include courses to increase literacy, business knowledge, and skills development. State/PRM partners support returning refugees, IDPs, and host communities in Afghanistan by providing access to skills training and adult literacy courses, in addition to access to education for Afghan refugees and host community children in Pakistan. Partners also work to ensure IDP and returning refugee children have access to learning spaces and accelerated learning programs to help children prepare for enrollment in formal schools, as well as support initiatives to improve infrastructure in schools within host communities.

CONTEXT IN BRIEF

- Ongoing insecurity and frequent natural disasters continue to displace populations and generate humanitarian needs throughout Afghanistan. The UN estimates that more than 4.9 million people remain in protracted displacement in Afghanistan, while natural disasters, such as avalanches and floods, affect approximately 250,000 Afghans each year. In 2021, drought and the socioeconomic impacts of the COVID-19 pandemic are further exacerbating humanitarian needs.
- The Taliban seized Afghanistan’s capital city of Kabul on August 15, 2021, following the successive capture of several provincial capitals and territory in early August. Following the collapse of the Government of Afghanistan, economic and political instability has resulted in the deterioration of basic service provision across the country, increased prices of staple foods and fuel, reduced household purchasing power, and other developments that constrain the ability of Afghan households to meet basic needs.
- In late August, the USG activated a Disaster Assistance Response Team (DART) based in the region outside of Afghanistan to lead the USG response to humanitarian needs generated by the crisis in Afghanistan and a Washington, D.C.-based Response Management Team (RMT) to support the DART.
- On October 25, 2020, the U.S. Chargé d’Affaires to Afghanistan, Ambassador Ross Wilson, redeclared a disaster for FY 2021 for Afghanistan due to the ongoing complex emergency.

USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2021¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/BHA			
Implementing Partners (IPs)	Agriculture; Economic Recovery and Market Systems (ERMS); Food Assistance–Cash Transfers, Local, Regional, and International Procurement; Health; Humanitarian Coordination, Information Management, and Assessments (HCIMA); MPCA; Protection; Shelter and Settlements; WASH	Countrywide, Badakhshan, Badghis, Balkh, Bamyan, Daykundi, Farah, Faryab, Ghazni, Helmand, Herat, Jowzjan, Kabul, Kandahar, Kapisa, Khost, Konar, Kunduz, Laghman, Loghar, Nangarhar, Paktia, Sar-e Pul, Takhar, Uruzgan, Wardak, Zabul	\$47,000,000
	HCIMA	Countrywide	\$500,000
FAO	Agriculture	Badghis, Balkh, Farah, Faryab, Ghazni, Herat, Jowzjan, Kandahar, Nangarhar, Nimroz, Sar-e-Pul, Zabul	\$6,000,000
International Federation of Red Cross and Red Crescent Societies	Disaster Risk Reduction Policy and Practice (DRRPP), Food Assistance–Cash Transfers, Health, Shelter	Badakhshan, Badghis, Daykundi, Ghor, Herat, Kandahar, Nuristan	\$1,200,000
International Organization for Migration (IOM)	DRRPP, HCIMA, Shelter and Settlements	Countrywide; Balkh, Herat, Kabul, Kandahar, Kunduz, Nangarhar, Paktia	\$8,000,000
UNICEF	HCIMA, Nutrition, WASH	Countrywide	\$16,500,000
OCHA	HCIMA	Countrywide	\$800,000
WHO	HCIMA, Health	Countrywide	\$5,300,000

WFP	Food Assistance—Cash Transfers, Vouchers, Local, Regional, and International Procurement; Nutrition	Countrywide	\$112,000,000
	Program Support		\$27,430
TOTAL USAID/BHA FUNDING			\$197,327,430
STATE/PRM			
IPs	Health, ERMS, Protection	Countrywide	\$30,054,998
		Pakistan	\$8,025,536
International Labor Organization	ERMS	Countrywide	\$1,128,233
IOM	Health	Countrywide	\$2,900,000
	COVID-19 Emergency Response	Pakistan	\$400,000
UNHCR	Education, ERMS, HCIMA, Health, MPCA, Protection, Logistics Support, Shelter and Settlements, WASH	Countrywide	\$34,100,000
		Pakistan	\$27,300,000
		Regional	\$27,300,000
UN Population Fund (UNFPA)	Health, Protection	Countrywide	\$1,456,953
TOTAL STATE/PRM FUNDING			\$132,665,720
TOTAL USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2021			\$329,993,150

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 24, 2021.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: cidi.org
 - Information on relief activities of the humanitarian community can be found at reliefweb.int.

USAID/BHA bulletins appear on the USAID website at [usaid.gov/humanitarian-assistance/where-we-work](https://www.usaid.gov/humanitarian-assistance/where-we-work)