

AFGHANISTAN - COMPLEX EMERGENCY

FACT SHEET #3, FISCAL YEAR (FY) 2017

JULY 19, 2017

NUMBERS AT A GLANCE

5.7 million

People in Afghanistan Targeted by the UN for Humanitarian Assistance in 2017
UN – March 2017

146,440

Afghans Internally Displaced by Conflict to Date in 2017
OCHA – July 2017

242,882

Undocumented and Deported Returns to Afghanistan in 2017
From Iran and Pakistan
IOM – July 2017

35,446

Documented Afghan Returnees from Pakistan
January–July 2017
UNHCR – July 2017

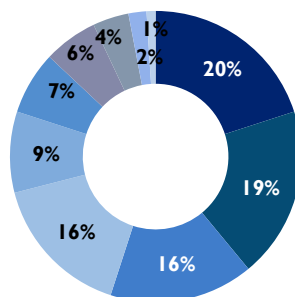
1.4 million

Registered Afghan Refugees in Pakistan
OCHA – May 2017

98,056

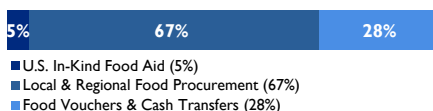
Individuals Affected by Natural Disaster Events in 2017
IOM – July 2017

USAID/OFDA¹ FUNDING BY SECTOR IN FY 2017



- Shelter & Settlements (20%)
- Humanitarian Coordination & Information Management (19%)
- Logistics Support & Relief Management (16%)
- Health (16%)
- Risk Management Policy & Practice (9%)
- Protection (7%)
- WASH (6%)
- Agriculture & Food Security (4%)
- Natural & Technological Risks (2%)
- Nutrition (1%)

USAID/FFP² FUNDING BY MODALITY IN FY 2017



- U.S. In-Kind Food Aid (5%)
- Local & Regional Food Procurement (67%)
- Food Vouchers & Cash Transfers (28%)

HIGHLIGHTS

- Conflict-induced displacement in 2017 decreased 25 percent compared to the same period in 2016
- UNAMA reports record-high numbers of child casualties
- Health and nutrition remain key concerns among relief actors

HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2017

USAID/OFDA	\$19,081,422
USAID/FFP	\$41,950,155
USAID/Afghanistan	\$6,000,000
State/PRM ³	\$50,600,000
Total	\$117,631,577

KEY DEVELOPMENTS

- Intensified armed conflict, natural disasters, and inflows of returnees from Iran and Pakistan continue to generate significant humanitarian needs across Afghanistan. Conflict displaced more than 146,000 Afghans in the first seven months of 2017, straining the resources of the Government of Afghanistan (GoA), host communities, and the humanitarian community. In addition to displacement and ongoing refugee returns, more than 200 natural disaster events, including avalanches, flooding, and landslides, impacted nearly 98,000 individuals across 33 of Afghanistan's 34 provinces from January to July.
- Between January and June, the UN reported 174 security incidents targeting humanitarian staff, resulting in nine deaths and ten injured aid workers. Health care infrastructure, personnel, and programs remain common targets, with the UN reporting at least 67 security incidents impacting health services.
- Conflict continues to strain Afghanistan's health infrastructure. In April, security conditions necessitated the closure of 15 health facilities in southern and eastern Afghanistan. Only 60 percent of the Afghan population has access to health services.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

INSECURITY, DISPLACEMENT, AND HUMANITARIAN ACCESS

- As of July 9, conflict in 2017 had internally displaced more than 146,000 people in 29 of 34 provinces in Afghanistan, according to the UN Office for the Coordination of Humanitarian Affairs (OCHA). Approximately 58 percent of internally displaced persons (IDPs) are children younger than 18 years of age. As a result of intensified conflict during the summer fighting season, nearly 122,000 people were displaced in May, 30,000 of whom require assistance, according to OCHA. Conflict also hinders humanitarian access to affected populations, preventing humanitarian actors from conducting needs assessments and providing assistance. Approximately 24 percent of displaced persons in Afghanistan are located in hard-to-reach areas, according to the UN.
- Conflict from January–June resulted in approximately 5,243 civilian casualties, including 1,662 deaths, according to the UN Assistance Mission to Afghanistan (UNAMA). Of the casualties, 40 percent resulted from improvised explosive devices (IEDs). Compared to the same period in 2016, civilian casualties increased in 15 of Afghanistan’s 34 provinces. Between January 2009 and June 2017, conflict in Afghanistan resulted in more than 26,500 civilian deaths and nearly 49,000 injuries.
- As of June 30, children accounted for nearly 1,580 conflict-related civilian casualties in 2017—more than 430 deaths and 1,140 injuries—a 1 percent increase compared to the first half of 2016 and the highest recorded number of child casualties since UNAMA began documenting cases in 2009. Women casualties increased 23 percent during the first six months of 2017, with UNAMA recording more than 630 women casualties.
- On May 31, at least 92 people were killed and 491 injured when a vehicle-borne improvised explosive device detonated at a checkpoint in the capital city of Kabul near the perimeter of the International Zone—the deadliest incident documented by UNAMA since 2001. With support from USAID/OFDA and USAID/Afghanistan’s Office of Humanitarian Affairs, the UN World Health Organization (WHO) provided health and trauma kits and other medical supplies to affected individuals following the attack. The USAID-funded Afghan Civilian Assistance Program III (ACAP III), which aims to mitigate the impact of conflict, IEDs, and mines, provided support to survivors and families of the victims. ACAP III distributes food and household commodities, offers rehabilitation services, assists in restoring livelihoods, and provides psychosocial counseling throughout Afghanistan.
- From January to June, the UN reported 174 security incidents targeting aid workers, resulting in nine deaths, ten injuries, and 20 abductions. Health care activities, facilities, and staff remain common targets, with the UN reporting at least 67 security incidents impacting health services during the first six months of 2017.

REFUGEE MOVEMENTS

- Although rates of refugee returns decreased during the months of May and June, coinciding with Ramadan, nearly 243,000 undocumented and more than 35,000 documented Afghans returned to Afghanistan from January to July. Approximately 20 percent of the population in Kunar, Laghman, and Nangarhar provinces are returnees, the UN reports.
- The rapid pace of returns in 2016 has stabilized as a result of changing refugee policies in Pakistan, concerns regarding the security situation in Afghanistan, and the reduction of the repatriation grant provided by State/PRM partner the Office of the UN High Commissioner for Refugees (UNHCR) from \$400 to \$200 per person. In February 2017, the Government of Pakistan (GoP) extended Proof of Registration cards for registered Afghan refugees in two, one-year increments, with the first increment valid through December 31, 2017. The GoP also agreed to establish new visa categories for Afghans; approved the documentation of undocumented Afghans in Pakistan; and declared its willingness to consider a national refugee law. To date in FY 2017, State/PRM has contributed \$50.6 million to assist conflict and disaster-affected populations in the region, including IDPs, Afghan returnees, and Afghan refugees in neighboring countries.
- In November 2016, the GoA established the Displacement and Returnees Executive Committee (DiREC), in partnership with the UN and other international humanitarian organizations, to develop relief programs and update the government’s response strategy for returning populations. DiREC created the Policy Framework and Action Plan for Returnees and IDPs in December 2016 that addresses several response areas, including the provision of immediate humanitarian assistance, access to services, documentation, land allocation, and long-term integration. As of May 18,

DiREC continues to deliberate response strategy implementation and develop policy guidance for the allocation of land for returnees and IDPs.

- With support from USAID/OFDA, USAID/FFP, and USAID/Afghanistan, relief actors provided food, health, livelihood, and water, sanitation, and hygiene (WASH) assistance to returnees at the borders of Iran and Pakistan between January and May. In May, USAID and implementing partners, including the UN World Food Program (WFP), WHO, and the UN Children’s Fund (UNICEF), provided emergency relief assistance to nearly 66,000 returnees and IDPs. In addition, USAID/OFDA and USAID/FFP participated in joint countrywide assessments to determine critical food and relief needs of IDPs.

NATURAL DISASTER PREPAREDNESS AND RESPONSE

- From January to July, more than 200 natural disaster events, including avalanches, earthquakes, flooding, and landslides, affected nearly 98,000 individuals across 33 of 34 Afghan provinces, according to the International Organization for Migration (IOM).
- With prior year USAID/OFDA support, the Aga Khan Foundation/U.S. (AKF/US) and its affiliate FOCUS Humanitarian Assistance have supported 40 communities—more than 120,000 people—in northeastern Badakhshan and Baghlan provinces in assessing vulnerabilities and strengthening skills to prepare for, mitigate, and respond to disasters. Between April and May 2017, AKF/US trained more than 120 individuals in Badakhshan and Baghlan in emergency response techniques, conducted nearly 25 assessments to determine potential community hazards, and supported community-driven efforts to prepare schools to respond to, and recover from, disasters.
- With USAID/OFDA support, the International Rescue Committee (IRC) assessed the needs of nearly 1,000 households—approximately 6,200 people—affected by natural disasters and conflict in April and May. IRC provided nearly 560 households with WASH supplies and more than 510 households with cash assistance to purchase commodities.
- With prior year USAID/OFDA support, the International Medical Corps (IMC) continues to strengthen the capacity of Afghan communities in Laghman and Nangarhar provinces to respond to crises. In May, IMC established and trained 17 community emergency response teams in crisis response, disaster risk reduction (DRR), and emergency preparedness, with a focus on participation from women and youth. Working with local organizations, IMC is rehabilitating flood walls that protect agricultural land and houses in Laghman and Nangarhar. In addition, IMC initiated a program in schools in eastern Afghanistan to raise awareness of disaster threats and methods to mitigate and reduce damage in hard-to-reach areas. By building community capacity, particularly among school-age children, IMC is strengthening local preparedness and leadership in DRR.
- In May 2017, USAID/OFDA partner Save the Children/U.S. provided more than 5,350 disaster-affected individuals with essential relief commodities, including hygiene and shelter repair kits, and conducted DRR trainings that reached more than 3,400 people in Faryab, Kabul, Kandahar, and Kunduz provinces.

HUMANITARIAN COORDINATION

- Due to expanded humanitarian needs and ongoing access and security constraints, effective coordination between the GoA, UN agencies, donors, and relief actors remains critical for humanitarian response efforts. By coordinating activities, humanitarian organizations reduce redundancies and maximize the impact of programs. With nearly \$3.6 million in FY 2017 USAID/OFDA funding, iMMAP provides humanitarian actors with accurate and timely information to support DRR efforts and improve humanitarian access and coordination.
- In April, OCHA established the Access Monitoring and Reporting Framework (AMRF) to monitor constraints on humanitarian access, including violence against humanitarian actors, limitations on movement, interference with implementation, and self-imposed safety measures. AMRF provides analysis and studies trends for humanitarian actors based on reported constraints to provide early warning, develop preparedness, and inform decision-making.
- International donor coordination supports the reintegration of returnees and IDPs by incorporating the needs of host communities in response plans. The World Bank’s Citizens’ Charter Project aims to improve the delivery of infrastructure projects and social services in host communities by linking Community Development Councils with local

government institutions to improve coordination. In addition, the Afghanistan Reconstruction Trust Fund (ARTF)—the largest single source of funds for the GoA development budget—continues to coordinate financing and development interventions in GoA priority sectors, such as agriculture, education, health, infrastructure, and rural development. ARTF-funded programs include the Second Education Quality Improvement Program and the System Enhancement for Health Action in Transition Project that aim to expand equitable access to basic education and health services.

- State/PRM Deputy Assistant Secretary (DAS) Nancy Izzo-Jackson and USAID Deputy Assistant Administrator (DAA) Jason Foley met with GoA ministers and USAID partners, including the World Bank and UN agencies, during an early June trip to Kabul. During the visit, DAS Izzo-Jackson and DAA Foley assessed humanitarian conditions among returnees and IDPs and discussed the GoA’s medium and long-term reintegration strategy, including efforts to meet the challenges of land allocation, livelihoods, and school access. In addition, DAS Izzo-Jackson and DAA Foley met with Minister Wais Ahmad Barmak, who leads the State Ministry of Disaster Management and Humanitarian Affairs (SMDMHA), which is responsible for managing disaster mitigation, preparedness, and response activities. With an emphasis on capacity building, SMDMHA aims to establish an early warning system for at-risk communities, strengthen the institutional mechanisms for disaster preparedness, and integrate DRR and resilience concepts into development strategies. SMDMHA continues to coordinate with USAID and its partners, including AKF/US, IMC, iMMAP, IOM, WFP, and other relief actors, to develop a comprehensive disaster management strategy.

FOOD SECURITY AND NUTRITION

- The majority of provinces experienced Stressed—IPC 2—or Crisis—IPC 3—levels of food insecurity from February to May, according to the USAID-funded Famine Early Warning Systems Network (FEWS NET).⁴ Following heavy precipitation from January to early March, below-average rainfall in late spring adversely affected rain-fed wheat, particularly in northern and northeastern provinces. FEWS NET predicts that 2017 wheat production will be below the five year average as a result of localized dryness and increased cultivation of poppy and other cash crops. Due to steady wheat flour imports from Kazakhstan and Pakistan and improved primary harvests, FEWS NET projects that food security in 24 of Afghanistan’s 34 provinces will improve to Minimal—IPC 1—levels of food insecurity from June to September. However, the most vulnerable populations in Afghanistan, including more than 120,000 undocumented Afghans who returned from Iran from January 1 to April 15, in addition to refugee returns from Pakistan, may experience IPC 3 levels of acute food insecurity during the coming months, according to FEWS NET.
- WFP reports that 9.3 million people in Afghanistan—more than 28 percent of the country’s total population—are food insecure. In FY 2017, USAID/FFP provided \$40 million to WFP to provide food assistance and cash transfers to support food purchases for nearly 900,000 individuals throughout the country, including IDPs, refugees, and returnees. In addition, USAID/FFP provided more than \$1.9 million to UNICEF to implement a countrywide emergency nutrition program for more than 53,000 people.
- The closure of the Pakistan border in May interrupted WFP’s supply chain for specialized nutritious foods (SNFs) used to treat moderate acute malnutrition, resulting in the suspension of treatment programs in many clinics in Afghanistan, where WFP supports children ages 6 months–5 years across 27 provinces. In response to the interruption, WFP increased its SNF orders and developed a new supply corridor; however, concerns remain regarding potential negative effects of the supply chain break, including on beneficiary recovery and overall confidence in the program. Approximately 58 percent of health centers in Afghanistan offer nutrition services and 20 percent provide treatment for severe and moderate acute malnutrition. Acute malnutrition is one of the leading contributors to mortality in children ages five years and younger in Afghanistan and nearly 1.3 million children will likely experience a level of malnutrition that necessitates the regular administration of SNFs in 2017, according to the UN.
- A recent WFP assessment revealed a locust infestation affecting crops in several districts of Badghis and Ghor provinces. The infestation will likely reduce food availability, negatively affect livelihoods, and increase prices in affected districts, according to WFP.

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

SHELTER

- With \$1.9 million in FY 2017 USAID/OFDA support, the Agency for Technical Cooperation and Development (ACTED) is assisting natural disaster-affected households in Badakhshan, Baghlan, Jowzjan, Kunar, Laghman, and Nangarhar provinces through the provision of cash-based assistance for construction materials; the facilitation of hazard awareness trainings; and the distribution of guidelines for resilient structures. In coordination with the Afghanistan National Disaster Management Authority, ACTED identified nearly 800 households for shelter assistance. In addition, selected households attended training on DRR and structural resilience prior to beginning construction to reduce the potential impact of natural hazards.
- With USAID/OFDA support, ZOA aims to provide emergency shelter assistance to more than 600 displaced households in Jowzjan and Sar-e-Pul. In addition, ZOA provides DRR training to raise awareness of hazards in vulnerable areas and strengthen preparedness for natural disasters, including earthquakes and floods.

HEALTH AND WASH

- Intensified conflict and displacement continue to strain Afghanistan's health system and hinder the delivery of emergency health services. In April, deteriorating security conditions resulted in the closure of 15 health facilities in southern and eastern Afghanistan; countrywide, only 60 percent of the population has access to health services, according to the UN. To respond to growing needs, health actors requested more than \$52 million in 2017 from the UN to support the provision of essential medical services for 3.8 million people. From January to May, relief agencies reached more than 368,500 beneficiaries in more than 80 districts affected by conflict, disease outbreaks, and refugee movements.
- USAID/OFDA partner WHO continues to improve access to health services for disaster and conflict-affected populations. In April and May, WHO provided emergency health services to more than 47,000 returnees and vaccinated approximately 47,000 children against measles and polio at the Torkham border crossing. In addition, WHO trained 180 female community volunteers on hygiene and sanitation best practices in Helmand, Jowzjan, and Paktiya provinces in April.
- With USAID/OFDA support, ACTED improved access to safe drinking water and sanitation infrastructure, promoted hygiene best practices, and provided emergency hygiene and water kits for disaster-affected households in Badakhshan, Baghlan, Balkh, Faryab, Jowzjan, and Kunduz provinces, reaching approximately 68,000 disaster-affected individuals since FY 2015. Between September 2015 and March 2017, ACTED constructed more than 100 latrines, drilled more than 240 wells, and provided approximately 21,000 people with hygiene and water kits.

OTHER HUMANITARIAN ASSISTANCE

- The 2017 Afghanistan Humanitarian Response Plan (HRP) calls for \$550 million to address the needs of 5.7 million conflict and disaster-affected people, including \$240 million to respond to the needs of returnees and refugees. As of July 19, the 2017 HRP was 27.5 percent funded.

CONTEXT

- Ongoing conflict and frequent natural disasters continue to displace populations and generate significant humanitarian needs throughout Afghanistan. The UN estimates that conflict has displaced more than 1.6 million people over the past 5 years, while natural disasters, such as avalanches and floods, affect at least 235,000 Afghans each year. Additionally, Afghanistan continues to host approximately 100,000 Pakistani refugees in Khost and Paktiya who fled July 2014 military operations in Pakistan’s North Waziristan Agency.
- On October 5, 2016, U.S. Ambassador P. Michael McKinley renewed the disaster declaration for FY 2017 due to increased humanitarian needs resulting from conflict, displacement, and recurring natural disasters in Afghanistan.
- USAID/OFDA supports a three-pronged approach to improving humanitarian response efforts in Afghanistan: supporting rapid response capacity for acute needs following natural disasters and conflict; improving humanitarian indicators; and enhancing humanitarian coordination, data collection, and analysis.
- USAID/FFP food assistance and disaster readiness programs are designed to respond to the food security and nutritional needs of IDPs and returnees, as well as people affected by economic stress; to support the recovery of communities affected by shocks; to treat moderately malnourished children and pregnant and lactating women; and to contribute to learning among primary and lower secondary school pupils and adults, particularly women.
- A USAID senior humanitarian advisor (SHA) based in Kabul continues to monitor the humanitarian situation and oversee USAID/OFDA and USAID/FFP activities in Afghanistan. The SHA leads USAID/Afghanistan’s Office of Humanitarian Assistance, which is supported by two national staff.

USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2017 ¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA			
ACTED	Logistics Support and Relief Commodities, Shelter and Settlements, WASH	Baghlan, Faryab, Laghman, Nangarhar	\$1,900,000
AKF/US	Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Natural and Technological Risks, Risk Management Policy and Practice, Shelter and Settlements	Badakhshan, Baghlan	\$1,810,383
IMC	Logistics Support and Relief Commodities, Risk Management Policy and Practice, Shelter and Settlements	Kunar, Laghman, Nangarhar, Nuristan	\$2,400,000
iMMAP	Humanitarian Coordination and Information Management	Countrywide	\$3,569,307
INTERSOS	Health, Nutrition, Protection, WASH	Kandahar	\$1,491,935
IRC	Logistics Support and Relief Commodities, Risk Management Policy and Practice, Protection, Shelter and Settlements, WASH	Badghis, Helmand, Herat, Khost, Laghman, Loghar, Nangarhar, Paktiya	\$2,350,000
OCHA	Humanitarian Coordination and Information Management	Countrywide	\$200,000
UN Food and Agriculture Organization (FAO)	Agriculture and Food Security	Countrywide	\$800,000
UNICEF	WASH	Countrywide	\$358,455
WHO	Health	Countrywide	\$2,699,707
ZOA	Shelter and Settlements	Jowzjan, Sar-e-Pul	\$1,500,000

	Program Support Costs		\$1,635
TOTAL USAID/OFDA FUNDING			\$19,081,422
USAID/FFP³			
WFP	Local and Regional Food Procurement	Countrywide	\$28,000,000
	Cash Transfers and Vouchers for Food		\$12,000,000
UNICEF	U.S. In-Kind Food Aid	Crisis-Affected Areas	\$1,950,155
TOTAL USAID/FFP FUNDING			\$41,950,155
USAID/Afghanistan			
FEWS NET	Humanitarian Coordination and Information Management	Countrywide	\$1,000,000
UN Humanitarian Air Service (UNHAS)	Logistics and Humanitarian Access	Countrywide	\$5,000,000
TOTAL USAID/AFGHANISTAN FUNDING			\$6,000,000
STATE/PRM			
Implementing Partner	Humanitarian Assistance	Countrywide	\$10,600,000
UNHCR	Humanitarian Assistance	Countrywide and Regional	\$39,500,000
UNICEF	Humanitarian Assistance	Countrywide	\$500,000
TOTAL STATE/PRM FUNDING			\$50,600,000
TOTAL USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2017			\$117,631,577

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

² USAID/OFDA funding represents anticipated or actual obligated amounts as of July 19, 2017.

³ Estimated value of food assistance and transportation costs at time of procurement; subject to change.

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 www.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, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org or +1.202.821.1999.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>