AFGHANISTAN

People in need ¹

23.7 MILLION

People targeted ¹

17.3 MILLION

Funding requirement

US\$133 030 000

1 Data provided for People in need and People targeted is taken from the <u>Global</u> <u>humanitarian Overview 2024</u>, these figures may be subject to change as part of the HRP process throughout the year.



CONTEXT

Afghanistan continues to grapple with an enduring humanitarian crisis characterized by a multitude of challenges. Afghan citizens endure an unstable healthcare system and confront the daily spectre of food scarcity and malnutrition. The situation is compounded by the significant burden of communicable and non-communicable diseases, frequent disease outbreaks, severe drought, and frequent natural disasters (most commonly severe flooding and deadly earthquakes). Furthermore, the plight of Afghan women has worsened because of heightened barriers to healthcare access driven by restrictions on education and the conditionality imposed in the employment sector.

The need for humanitarian assistance in Afghanistan has surged dramatically, increasing from 18.4 million people in need before August 2021 to a current estimate of 23.3 million people who will be in dire need in 2024. Regrettably, a substantial segment of this population, comprising 9.5 million individuals residing in over 20 000 villages, remains with little or no access to the most basic healthcare services.

The most severe repercussions of this protracted health emergency are borne by Afghan women and children, who find themselves on the margins of society and increasingly vulnerable to adverse health outcomes, particularly concerning reproductive, maternal, newborn, and child health. Tragically, preventable maternal mortality claims the lives of 21 mothers every day, a staggering 148 infants.

In addition, Afghanistan has one of the highest levels of food insecurity globally, affecting 15.8 million people. This dire situation has been exacerbated by three consecutive years of drought-like conditions, leaving 30 out of 34 provinces with severe water scarcity or extremely poor water quality. The drought has pushed the proportion of people affected by this crisis from 10% in 2020 to a troubling 64% in 2022. In 2023, a staggering 21 million people urgently require access to clean water and sanitation - a dire contrast to the 2.4 million people in need a decade ago.

This protracted humanitarian crisis now lingers in the shadow of ongoing geopolitical considerations, which have resulted in dwindling support from international partners. The healthcare sector is struggling to meet the surging demand. Severe underfunding has forced the closure of 262 static and mobile health facilities and the suspension of services in June 2023 has severely impacted the healthcare access of 2 million individuals. Additionally, 2800 community-based classes and over 170 mobile health and nutrition teams (MHNTs) ceased operations in August of 2023, adversely affecting more than 140 000 children, out of which 70 200 are under the age of five.



WHO'S STRATEGIC OBJECTIVES

- Reach the unreached and place women and children's health first
- Protect people every day by scaling up the response to ongoing emergencies and emerging health needs
- Coordinate the health sector for maximum impact

WHO 2024 RESPONSE STRATEGY

WHO's role in Afghanistan is unique and cuts across the different spheres of intervention. In the context of the humanitarian crises, WHO's work in Afghanistan focuses on providing strategic leadership, strategic health information, technical expertise, and, most importantly, operational interventions at the provincial levels to ensure basic health system functionality to maintain the delivery of essential and life-saving services for all. WHO is present in all regions across the country.

In line with the expectations of our partners and the Health Sector Transition Strategy (HSTS), WHO will continue working with partners to tackle critical health emergencies. WHO will provide life-saving health interventions and build on the achievements and lessons learned in 2023 to achieve better health for the people of Afghanistan. WHO will maintain the three overarching and integrating priorities for 2024:

Reach the unreached and place women and children's health first by:

- Taking a 'for women, by women, with women' approach
- Expanding the coverage of health service delivery and increasing its quality, especially in underserved areas
- Sustaining the momentum of polio eradication and increasing immunization coverage

Continue protecting people every day by scaling up the response to ongoing emergencies and emerging health needs through:

- Including the strengthening of disease outbreak preparedness and response
- Strengthening the health information management system

Coordinate the health sector for maximum impact, including through:

 Responding to health-related humanitarian needs at national and subnational levels through the donor/partner coordinating forum, health cluster, and other coordinating mechanisms







KEY ACTIVITIES FOR 2024

- Strengthen surveillance
- O Enhance emergency, trauma care, and physical rehabilitation services
- O Improve access to emergency primary healthcare services
- O Improve access to secondary and tertiary healthcare
- Scale up efforts to combat malnutrition
- Expand the response to ongoing outbreaks and emerging health needs
- O Enhance access to quality reproductive, maternal, neonatal, and child health services
- Integrate mental health and psychosocial services
- O Enhance access to comprehensive and specialized services for gender-based violence (GBV) survivors
- O Improve health information for informed decision-making
- O Strengthen the health cluster coordination structure



ACHIEVEMENTS IN 2023

LETTING PEOPLE EXPRESS THEIR PAIN: A MENTAL HEALTH EXPERT'S STORY FROM THE FIELD





In October 2023, three major earthquakes, all with a magnitude of 6.3, hit Herat Province in Western Afghanistan. The region continues to experience a series of aftershocks, leaving people gripped by fear and uncertainty. Many survivors remain confined to temporary shelters or are sleeping in tents due to the loss of their homes and fear of collapsing buildings. These earthquakes have also caused partial damage to some UN premises, including the WHO office in Herat. By 15 October, WHO and Health Cluster partners had reached 28 831 individuals affected by the earthquake across multiple districts.

Dr Fawzia Rahimi, Mental Health Officer at the Provincial Public Health Directorate of Herat, decided to join the response team in Zindajan district -- the epicenter of the first earthquake - two days after the first of the series of Herat earthquakes. "At Seya Aab village, fear spread all over my body as I saw damaged villages.

Bodies were found among the ruins for at least five days after the earthquakes.

I saw a woman's half body stuck under the rubble -- she broke both hands and legs and lost five members of her family. Her daughter survived with a broken leg. The residents were traumatized, and they wouldn't eat or drink for days.

They were just breathing but they seemed like dead souls.

It was the first time in my life that I experienced such a deep tragedy. I felt like it's happening to me and my family. Some women told me they didn't want to live anymore because they lost their whole families. As a mother, a sister and a wife, I could never imagine the pain of losing so many members of the family, including your own child. I want to be there for these women.

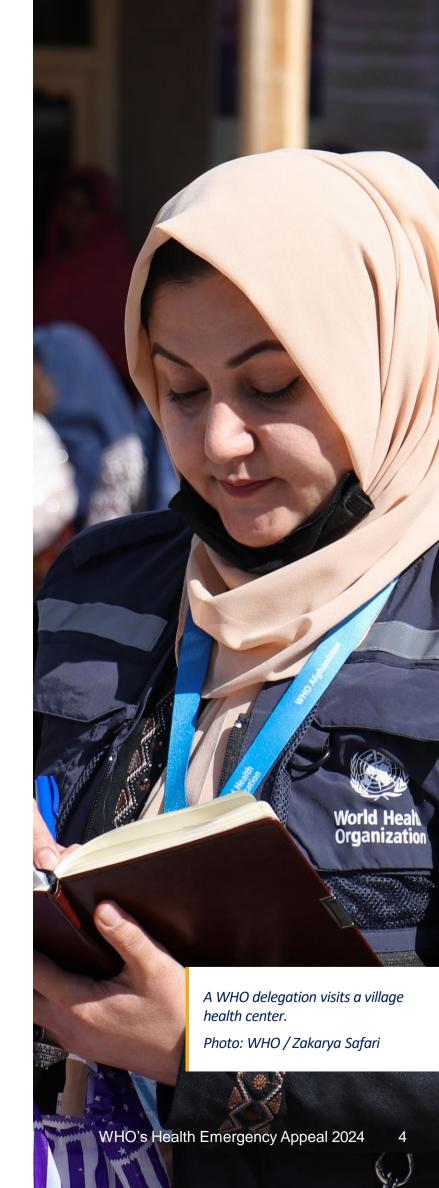
I had to do my share to ease people's burden. I have been making site visits in hospitals and camps. I provide psychosocial support and counseling. I let them share their stories with me. I patiently and passionately listen to them. I want to enable them to express their pain. I want them to focus on their strengths. I want them to heal. I know it is not easy. I know it takes time. But that is the least I can do for them," says Dr Fawzia Rahimi.

FOR MORE INFORMATION

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2024 FUNDING REQUIREMENTS

Emergency Appeal Requirement

Afghanistan Complex Emergency	US\$ '000		
	F	Regional & Global	
Funding requirement by response pillar	Afghanistan	support	Total
P1. Leadership, coordination, planning, and monitoring	4 775		4 775
P2. Risk communication and community engagement	860		860
P3. Surveillance, case investigation and contact tracing	7 833		7 833
P4. Travel, trade and points of entry	740		740
P5. Diagnostics and testing	7 243		7 243
P6. Infection prevention and control	675		675
P7. Case management and therapeutics	6 478	45	6 523
P8. Operational support and logistics	5 318		5 318
P9. Essential health systems and services	98 839		98 839
P10. Vaccination	-		-
P11. Research, innovation and evidence	225		225
Total	132 985	45	133 030

The table above presents WHO's funding requirements to respond to the ongoing emergency event in 2024. In addition to this, WHO also requires funding for its core work to support countries to prevent, prepare, detect and respond to emergencies. The table below presents the overall needs for both the ongoing emergency response (included in WHO's 2024 Health Emergency Appeal) and the core budget for WHE in the country, (included in WHO's Programme Budget 2024-2025).

Afghanistan - Country office requirement	US\$ '000
Afghanistan Complex Emergencies	132 985
Emergency appeal requirement	132 985
2.1 Countries prepared for health emergencies	1 511
2.2 Epidemics and pandemics prevented	250
2.3 Health emergencies rapidly detected and responded to	4 308
Billion 2 - Base programme requirement	6 069
Total	139 054



