

UNFPA Afghanistan Humanitarian Appeal 2023



TOTAL REQUIREMENT:
\$289,111,500*

DURATION:
12 months
(January - December 2023)

POPULATION COVERAGE:
10,651,476

*Corresponds to 2023 UNFPA Humanitarian Action Overview and 2023 Afghanistan HNO

More than a year since the return to power of the Taliban in Afghanistan, the humanitarian crisis in the country continues to deepen, progressively reversing many of the gains of the last 20 years, particularly around women's rights.

Multiple studies show that Afghanistan is the worst place in the world to be a woman.

- Every two hours, a mother dies because of preventable pregnancy and childbirth-related complications.
- It is only in Afghanistan where women and girls are banned from education and work.

Afghan women and girls are also suffering from the impact of the bans on education and work. Discrimination based on sex, which prevents women from accessing services, assistance and support is not only a violation of women's basic human rights but also a form of gender-based violence.

In the ongoing crisis, the need for reproductive health services continues to increase. UNFPA estimates that more than 27,000 women give birth in hard-to-reach areas every month. These women need maternal health services to deliver safely.

Without timely and sustained support to ensure the availability of reproductive health services, it is projected that 51,000 additional maternal deaths could occur by 2025.



POTENTIAL IMPACT of inaction on maternal health and family planning between now and 2025:*

Maternal Mortality Ratio (MMR):

Increase from **638/100,000** to **963/100,000**



Unmet Need for Family Planning:

Increase from **24.6%** to **36.9%**



Unintended Pregnancies:

Increase from **3.8 million** to **4.8 million**



*Modeling is done based on the impact of the closure of Sehatmandi Project. The Sehatmandi Project provides health, nutrition, and family planning services across Afghanistan by funding 100% of the Basic Package of Health Services (BPHS), the Essential Package of Health Services (EPHS), and 65% of overall public health facilities. The project was suspended by the World Bank following the Taliban takeover in August 2021. Baseline: 2018 Afghanistan Health Survey



Afghanistan is highly prone to natural hazards, whose frequency and intensity are exacerbated by the effects of climate change, increasing humanitarian needs and structural limitations in mitigating disaster impact. The number of atypical sudden-onset disasters, such as floods and earthquakes, was higher in 2022 than the preceding years and the scenario anticipates that these patterns may be the norm moving ahead.

POTENTIAL RISKS AND INFLUENCES on the needs facing populations of concern throughout 2023 include:*



Increase maternal morbidity and mortality due to food insecurity and malnutrition trends that impact pregnant and lactating women, as well as women of reproductive age



Risks for women, men, boys and girls (including GBV, sexual exploitation and abuse, burden of care, early marriage), including individuals with disabilities and mental health issues

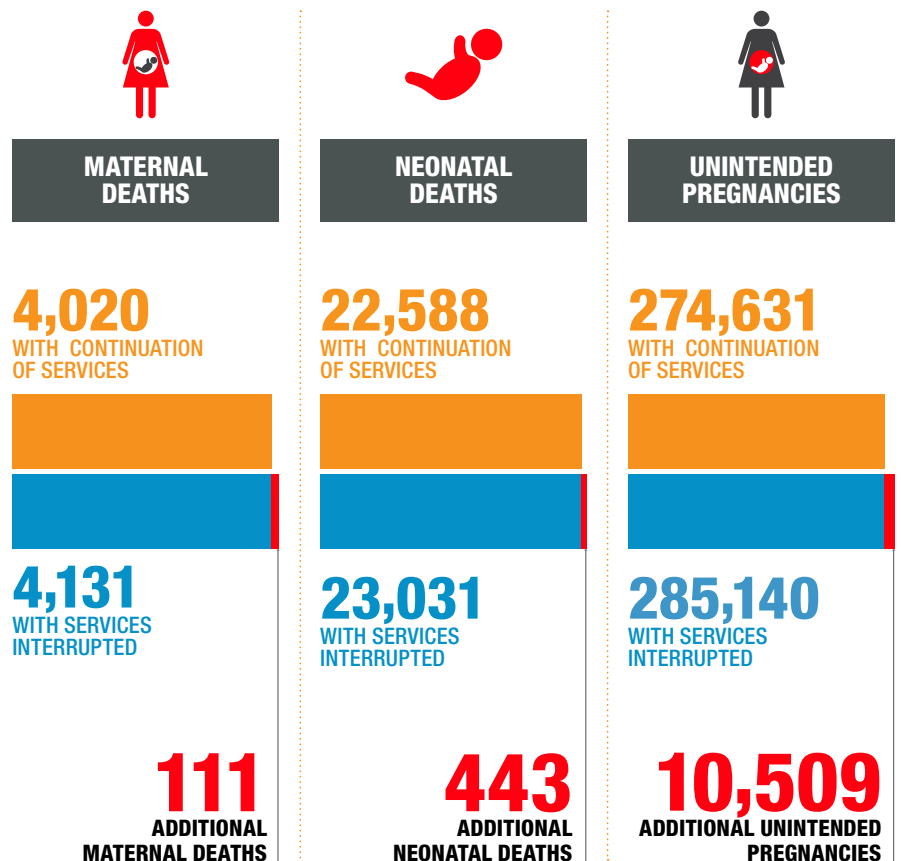


Gender-based restrictions and unique risks for women and girls' participation in life and society

(*Afghanistan Humanitarian Needs Overview, 2023)

POTENTIAL IMPACT of the ban on female NGO workers

Amid a growing set of restrictions curtailing their basic rights and freedoms, women humanitarian workers face increasingly restrictive challenges affecting their ability to travel to beneficiaries. The 24 December 2022 directive barring women from working for national or international NGOs will have a devastating humanitarian impact on millions of people across the country and will prevent millions of vulnerable women and girls from receiving services and life-saving assistance.



- UNFPA services are being delivered by women to women. Women have unique health concerns - from hygiene needs to life-threatening complications related to pregnancies and mental health.
- There are 2 million women in need of GBV protection services right now.
- UNFPA counts on female humanitarian workers to deliver these services.

UNFPA HUMANITARIAN RESPONSE: GOAL AND KEY LIFESAVING INTERVENTIONS

The overall goal of UNFPA's interventions in the humanitarian context in Afghanistan is to provide life-saving reproductive health services; and prevent, mitigate and respond to gender-based violence cases among the affected population, including women, girls and young people.

UNFPA KEY INTERVENTIONS:



1. Maternal and reproductive health



2. Psychosocial support services for women and girls



3. Lifesaving adolescent sexual and reproductive health services



4. Emergency supplies

UNFPA-SUPPORTED SERVICE DELIVERY POINTS

Delivering Integrated Reproductive Health and Gender-based Violence Services for Women, Girls, and Youth

To respond to the lifesaving humanitarian needs of women, girls, and youth, UNFPA continues to deliver an integrated reproductive health and gender-based violence response package at community, village, and district levels, as well as in camps, through the expansion and scaling up of existing service delivery points.



Family Health House (FHH):

Community-based facilities run by a midwife providing life-saving reproductive, maternal, newborn, child and adolescent health services to people living in underserved and hard-to-reach areas.



Midwifery Help Line (MHL):

Toll-free number accessible across Afghanistan, functional 24/7, providing RMNCAH technical information, consultation, and guidance to midwives and other health workers and skilled birth attendants on duty.



Mobile Health Team (MHT):

Provides a range of medical services, including maternal, newborn, child and adolescent health care, as well as psychosocial support, through outreach activities in remote communities, especially targeting internally displaced persons (IDPs).



Zero Point Health Facilities (ZPHF):

Health facilities set up along border areas to provide integrated RH and gender-based violence services to returnees, IDPs and host communities.



Youth Health Line (YHL):

Nationwide telehealth toll-free line staffed with male and female counselors providing young people with immediate, anonymous and professional RH, PSS and Healthy LifeStyles. information and advice, including referral services on RH, and PSS.



Integrated Youth Center (IYC):

Centers integrated in health facilities with youth health educators that activate youth peer educators in their communities. Services include awareness raising, counseling, and referral services, in addition to promoting youth led initiatives.



Women-Friendly Health Spaces (WFHS):

Provides psychosocial support services, youth education/life skills program, and vocational training opportunities for women and girls.



Psychosocial Counseling Center (PSCC):

Located within regional, provincial or district level hospitals to provide health and psychosocial support services.



PSS Mobile Outreach Team (PSS-MOT):

provide gender-based violence psychosocial support services and awareness. The outreach teams go to remote communities to deliver services for people who cannot visit health facilities.

ACCOUNTABILITY TO AFFECTED POPULATIONS:

Community participation is key to UNFPA's lifesaving interventions. UNFPA has established and implemented systematic approaches for accountability to affected populations including community listening initiatives, community voices and accountability platform (real-time monitoring tool) and other localized community engagement mechanisms to ensure that women, girls and vulnerable communities continually guide the UNFPA response in all programme cycles.

HUMANITARIAN ACCESS:

With the worsening humanitarian access situation in Afghanistan, UNFPA mobilized an Access Specialist function to ensure unimpeded access of UNFPA programs to Afghan women and girls. UNFPA has dedicated internal structures, strategies and tools to address access constraints both at central and provincial levels. UNFPA is an active member of Humanitarian Access Group, Access Working Group and UN Joint Engagement Group, coordinating access and engagement with the larger humanitarian actors in Afghanistan.

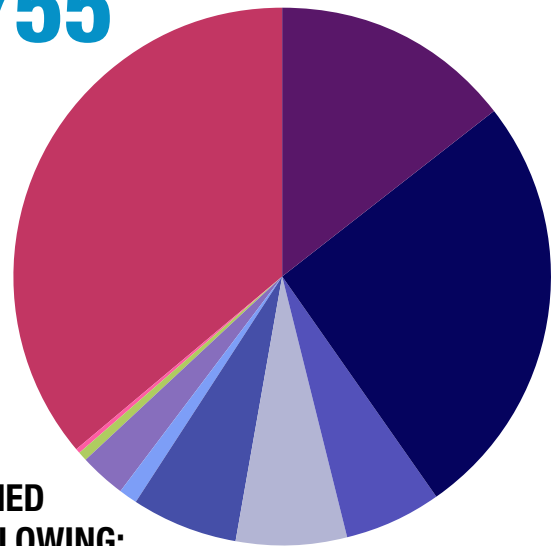
COORDINATION - UNFPA LEADS IN THE FOLLOWING:

- **Reproductive, Maternal, Neonatal, Child and Adolescent Health in Emergency Working Group** [under the Health Cluster](#)
- **Gender-Based Violence Sub-cluster** [under the Protection Cluster](#)
- **Adolescent and Youth Working Group** [under the Protection Cluster](#)
- **The Accountability to Affected Populations Working Group** [under the Inter-Cluster Coordination Team](#)
- **Protection from Sexual Exploitation and Abuse Task Force**

2022 RESULTS SNAPSHOT

6,370,755

Total People in Need Reached in 2022



THEY WERE REACHED THROUGH THE FOLLOWING:

SDP	Number Reached
FHH	924,398
MHT	1,657,552
Static Facilities (ZP, TC, BHC)	370,831
WFHS	423,938
PSS MOT	395,608
PSCC	71,989
YHL	175,951
IYC	44,515
MHL	19,750
TOTAL	4,084,532

SUPPLIES	Number Reached
RH Kits	1,223,723
Inter-Agency Health Kit	959,000
Female Dignity Kits	84,700
Winterization Kits	19,500
TOTAL	2,286,223

UNFPA TARGETS AND COVERAGE

UN TARGET POPULATION FOR ASSISTANCE:
28,300,000

UNFPA TARGET POPULATION FOR ASSISTANCE:
10,651,476

UNFPA KEY TARGET POPULATIONS:

Women of reproductive age (15-49):
2,556,354

Adolescent girls (10-14):
745,603

Adolescent girls (10-19):
1,278,177

Adolescent boys and girls (10-19):
2,662,869

No. of births in the next 12 months:
332,028

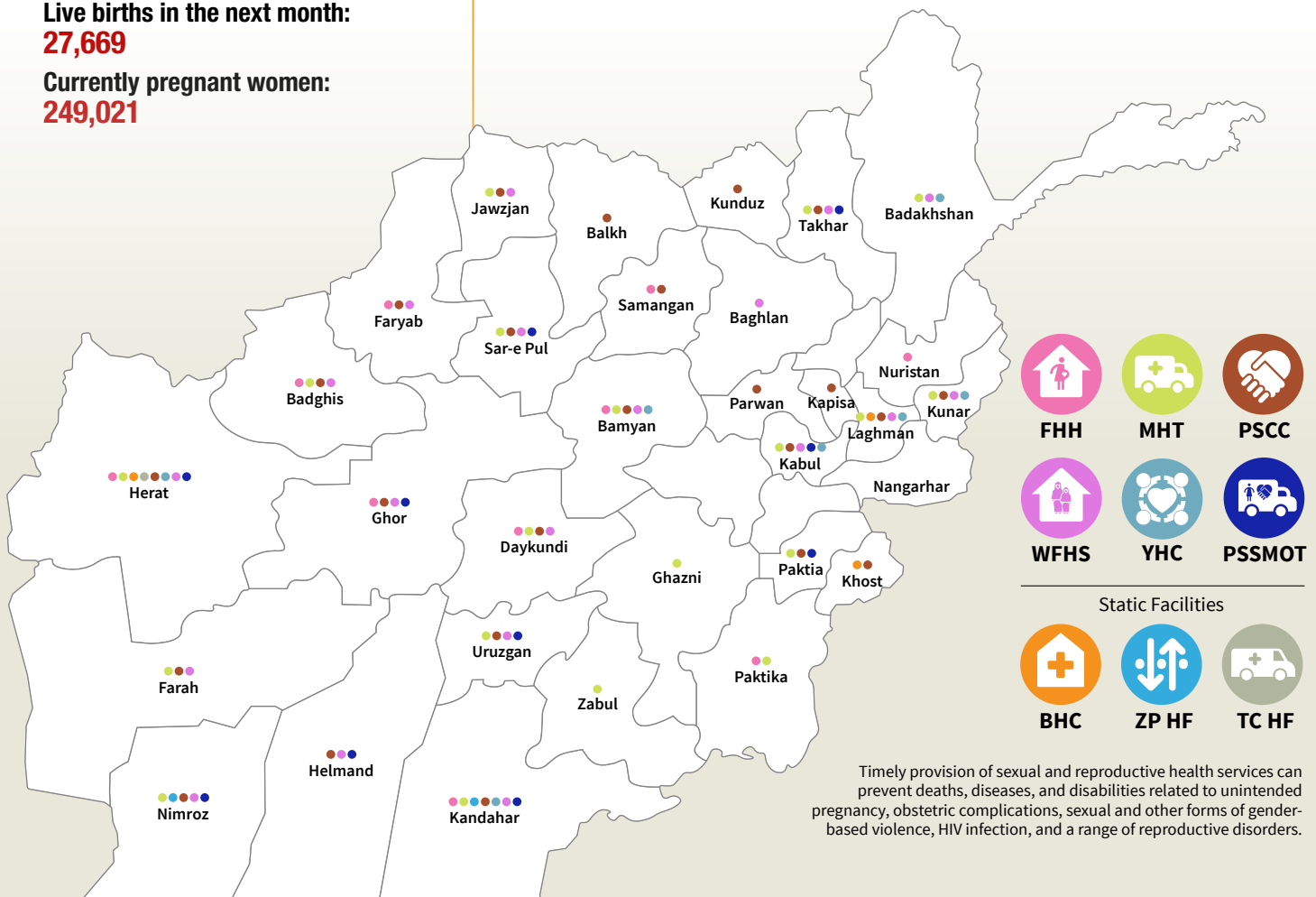
Live births in the next month:
27,669

Currently pregnant women:
249,021

UNFPA 2023 APPEAL SCALE-UP

SDPs		Target for 2023
RH	FHH	1500
	MHL	3
HUM	MHT	180
	Static Clinic, including Zero points	30
A&Y*	Youth Health Line (YHL)	1
	Integrated Youth Center (IYC), Ataturk Hospital	1
	Youth Space in Paktika	1
GBViE	PSCC	150
	WFHS	203
	MOT	80

¹ A&Y interventions are being integrated across humanitarian GBV and RH



Timely provision of sexual and reproductive health services can prevent deaths, diseases, and disabilities related to unintended pregnancy, obstetric complications, sexual and other forms of gender-based violence, HIV infection, and a range of reproductive disorders.

FUNDING REQUIREMENTS

UNFPA requires a total of

\$289,111,500

to implement the key life saving humanitarian interventions in Afghanistan for 2023



Key Interventions	2023 Total Requirement (USD)	%
Reproductive Health in Emergency	137,280,000	47
GBV in Emergency	73,080,000	25
Youth in Emergency (for integration)	20,929,235	7
AAP, PSEA, Disability Inclusion, Humanitarian Access	14,455,575	5
Monitoring & Evaluation	14,455,575	5
UNFPA Operations	28,911,115	10
Total	289,111,500	100

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THE CALCULATION IS BASED ON THE AVERAGE COST PER BENEFICIARY:

Health Cluster: **\$26/person per year**

Protection Cluster: **\$30/person per year**

2023 HNO	Cluster		UNFPA		
Target Reach	Cluster	Target Reach	Target Reach	% of the total 2023 HRP Target Reach	Average Cost per Beneficiary [USD]
28,300,000	Health	17,600,000	7,608,197	43%	26
	Protection	20,300,000	3,043,279	15%	30
(16% increase from the 2022 HRP)			10,651,476		

CONSEQUENCES OF NOT MEETING THE NEEDS:



Higher maternal mortality and morbidity



Worsening of gender-based violence and harmful practices



Increased risk of unintended pregnancies, sexually transmitted infections including HIV, and unsafe abortions



Youth disengagement, disconnection, and radicalization

THEORY OF CHANGE:

IF we are able to deliver integrated services for reproductive health and gender-based violence through expansion and scaling up of existing services,

THEN women and girls will have better access to universal reproductive health care and protection services. In the long term, the country will be able to sustain the downward trend in its maternal mortality ratio.

UNFPA'S INTERVENTIONS AIM TO ACHIEVE:

ZERO preventable maternal deaths

ZERO unmet need for family planning

ZERO gender-based violence and harmful practices

... even in emergencies

Timely funding, donor flexibility and necessary exemptions will be critical for humanitarian partners to succeed in their mission of providing life-saving support for the people of Afghanistan.

