Situation Report #6

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<thead>
<tr>
<th>Country</th>
<th>AFGHANISTAN</th>
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<tbody>
<tr>
<td>Crisis</td>
<td>Earthquake</td>
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<tr>
<td>Covering period</td>
<td>25-31 October 2023</td>
</tr>
<tr>
<td>Crisis Location</td>
<td>Herat Province, Afghanistan</td>
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<tr>
<td>Date issued</td>
<td>1 November 2023</td>
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</tbody>
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Japanese Ambassador to Afghanistan, SRSG and RC/HC visit UNFPA’s Mobile Health Team at the earthquake-affected village of Ghor Moshak [Photo: Abdul Hamid Wahidi/UNAMA]
1. Situation overview

- Latest assessments show that the first two earthquakes on 7 and 11 October left 1,480 people dead and 1,950 wounded, with available satellite imagery indicating that 513 villages were impacted. About 43,400 people across six districts are reported to have been directly affected by the earthquakes, with Injil and Zindajan districts worst affected.

- UNFPA’s Herat Earthquake Response Appeal estimates that $11.6 million will be needed to scale up interventions for the next nine months. This is based on the 318,000 total affected population.

![Earthquake in Herat Province of Afghanistan](image)

2. Humanitarian needs

- The impact of the earthquakes resulted in the immediate need for the provision and continuity of integrated primary health care and reproductive health, mental health and psychosocial support, trauma care, and physical rehabilitation services. A disease surveillance system continues to monitor communicable disease trends and health situations.

- The displacement and loss of livelihoods can intensify the need for psychosocial support services in crisis-affected areas. Tailored well-being support activities are crucial for women and girls to help them cope with challenges and recover.
3. Government, UN and other stakeholders’ response

- To date, humanitarian partners have reached approximately 7,300 households with more than US$1.9 million in cash assistance, including cash for food, cash for transitional shelter, cash for winterization, and full and half packages of multipurpose cash assistance. At a sectoral level, 103,000 people have already been reached with food, and 43,000 with shelter support.

4. UNFPA Country Office role

- A high-level delegation with the Special Representative of the UN Secretary-General (SRSG), the UN Humanitarian Coordinator, and the Ambassador of Japan visited the earthquake-affected area of Ghar Mosakh, where 160 families are residing. The delegation received a comprehensive briefing on UNFPA’s emergency response, which is being implemented through its Mobile Health Teams (MHTs), Basic Health Centers (BHCs), Women-Friendly Health Spaces (WFHS) and Psychosocial Counselling Centers (PSCCs). The delegation was also briefed on the distribution of essential items like blankets, tarpaulin sheets, Dignity Kits, Mama & Baby Kits, and Adolescent Girl Kits.

- The delegation had the opportunity to visit a UNFPA-supported health facility managed by AADA, which is delivering crucial health services, including maternal and reproductive health care, to the villages of Ghar Mosakh, Nawabad, and Sanjab. The Japanese Ambassador expressed appreciation for the swift response provided by UNFPA and commended efforts in offering services such as midwifery, psychosocial support, and general healthcare through prefabricated container clinics.
Summary of service provision and population reached

To date, UNFPA and its NGO partners have reached 43,928 affected people with maternal, reproductive health and psychosocial support services, as well as distribution of essential supplies and kits.

A. Lifesaving services provided through UNFPA implementing partners

Maternal and reproductive health:

- Eight Mobile Health Teams (MHTs) managed by AADA, MOVE and HNTPO have provided reproductive health services to women and girls in Zindajan District and Herat City.

- 13,209 affected people have accessed maternal and reproductive health services, including 606 women who received antenatal care, five deliveries assisted by midwives, 145 women who received postnatal care, 1,454 women who received reproductive health information, 410 people who accessed family planning information and counselling, 3,234 people who received health services, 1,021 people with psychosocial support services, and 6,334 people with awareness raising on health.

- 24 youth educators (12 male, 12 female) supported community awareness raising about the aftershocks, self-protection and risk mitigation. In particular, 10 youth educators under CARE contributed to joint assessment in Zindajan, Robat Sangi and Enjil districts. The youth educators play a key role in Adolescent Girl Kits distribution and other supplies, including Dignity Kits, tarpaulin sheets and blankets.
16 youth volunteers for the Last Mile Assurance are assisting in the distribution of non-medical commodities and the collection of data at distribution points. Three volunteers are assigned to AFGA-supported MHTs in Herat City and Injil District.

Left: Adolescent Girl Kits Distribution in Ahmad Abad Village, Koshan District; (Right): Youth educator supporting the joint assessment in Injil District. (Photos courtesy of CARE International).

Psychosocial support services:

CARE International deployed to Zindajan District eight teams to support psychological first aid, psychosocial counselling and awareness-raising on available services to affected people in Zindajan, Kohsan and Herat City. The psychosocial support teams in various locations stopped their activities on 26 October and will be resuming their regular activities in the WFHSs from 31 October. The teams also supported assessments in Khosan and Robat Sangi districts.

HealthNetTPO, deployed three teams to provide psychosocial support and psychological first aid to earthquake-affected women and girls in Ansari camp. They were also involved in assessments for identifying the psychosocial needs of affected communities.
12,974 people have been reached with psychosocial support services, including counselling, awareness-raising sessions, and psychological first aid. Out of the total, 1,577 received psychological first aid, 2,328 received psychosocial counselling, and 9,069 received awareness about available services.

5,190 Dignity Kits were distributed to vulnerable women and adolescent girls.

B. Prepositioned stocks and distribution:

- **Dignity Kits**: 1,650 Dignity Kits are available in Herat (850 with AFGA and 800 with HNTPO); an additional 11,500 Dignity Kits reached Herat last week; 5,190 Dignity Kits were distributed to affected women and girls.
- **Mama & Baby Kits**: 1,400 are prepositioned in Herat; 4 beneficiaries received the kits during the reporting period.
- **Individual Clean Delivery Kits**: 2,000 kits are available in the Herat regional warehouse (AFGA); 4 beneficiaries utilized the kit during the reporting period.
- **Blankets**: 24,025 blankets are prepositioned in the Herat regional warehouse; 6,492 blankets have been distributed to women.
- **Tarpaulin sheets**: 27,617 are prepositioned in the Herat regional warehouse; 5,396 have been distributed during the reporting period.
- **Adolescent Girl Kits**: 3,600 are available in Herat City; 659 kits have been distributed in 17 villages during the reporting period.

**Life-saving supplies and kits:**

<table>
<thead>
<tr>
<th>Supplies and Kits</th>
<th>Beneficiaries Reached</th>
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<tbody>
<tr>
<td>Dignity kits</td>
<td>5,190</td>
</tr>
<tr>
<td>Blankets</td>
<td>6,492</td>
</tr>
<tr>
<td>Tarpaulin sheets</td>
<td>5,396</td>
</tr>
<tr>
<td>Mama and Baby Kits</td>
<td>4</td>
</tr>
<tr>
<td>Clean Delivery Kits</td>
<td>4</td>
</tr>
<tr>
<td>Adolescent Girls Kits</td>
<td>659</td>
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17,745 beneficiaries reached with supplies and kits
Distribution of dignity kits to women and girls on 26 October in Molasiyan district. (Photo: Jamshid Qazizadah/UNFPA Afghanistan)

C. Coordination:

- **Regional Humanitarian Team (RHT):** The Herat Regional Health Cluster meeting was attended by the *de facto* Provincial Public Health Directorate (PPHD), UN agencies and partners involved in the earthquake response. The Herat Regional Health Cluster and PPHD informed UN agencies and partners that they will assess the current needs and remap areas which still require health services and will give priority to the MHTs which are dedicated to the earthquake response.

Herat Regional Health Cluster Meeting attended by UNFPA, 30 October. (Photo: UNFPA Afghanistan)

- **GBV Sub-Cluster (GBVSC):** GBVSC is working on a risk mitigation strategy for cash and voucher actors working on the response, while coordinating the efforts of the partners to cover
the gaps in the response. Furthermore, the GBVSC made substantial contributions, alongside other clusters under the leadership of OCHA, towards the revision and adaptation of the Multi-Sector Rapid Assessment Tool (MRAT).

- **Accountability to Affected Populations Working Group (AAPWG):** UNFPA continues to support the Inter-Cluster Coordination Group (ICCG) in Herat on addressing the quality of response, through ensuring a strong integration and operationalization of community-centred approaches, including:
  
  o 4Ws matrix/community engagement tracker (including Protection from Sexual Exploitation and Abuse) was developed with initial participation of 15 partners. The tracker/dashboard will help ICCG to coordinate the humanitarian response and ensure the component of community participation especially vulnerable groups of women, children and persons with disabilities.
  
  o A response-wide community feedback system has been designed. The system, called Engaged! will involve some 30 community reporters to conduct observation and dialogues with women, girls, men, boys, persons with disabilities in earthquake affected areas. This includes the PSEA awareness-raising support.
  
  o A rapid accountability report, based on consultation with women and men in the affected communities, is being developed by the AAP and PSEA groups led by UNFPA.